

**MINORITY BUSINESS ENTERPRISE REPORT**

1. Minority Business:  Yes  No

2. Ownership:

a) Company is at least 51% owned and controlled by one or more of the following categories:

African Americans

Asian Americans

American Indians

Women

Hispanics

Physically or mentally disabled

b) or is a non-profit entity organized to serve the interests of the physically or mentally disabled.

3. Company Name:

4. Mailing Address:

5. City:

State:

Zip:

6. Company Contact Person:

Title:

Phone No.:

7. Has your firm applied for Minority Business Certification with the Maryland Department of Transportation?  Yes  No

If yes, what is the status?  Pending  Denied  Certified

Certification No.:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title