



COMPLIANCE UNIT/OFFICE OF CONTRACTS AND CONSTRUCTION MANAGEMENT

EQUAL EMPLOYMENT OPPORTUNITY OFFICER IDENTIFICATION

Project TA No.	D No.	County(ies)
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In accordance with Equal Employment Opportunity provisions contained in the contract identified above, please provide the following information and return this form to the Compliance Unit/Office of Contracts and Construction Management.

EQUAL EMPLOYMENT OPPORTUNITY OFFICER

Name (Last, First, MI)		Title or Position	
Street	City	State	Zip Code
Phone No. () -		Fax No. () -	

DISADVANTAGED, MINORITY, WOMEN BUSINESS ENTERPRISE LIAISON OFFICER

Name (Last, First, MI)		Title or Position	
Street	City	State	Zip Code
Phone No. () -		Fax No. () -	

PROJECT SITE REPRESENTATIVE RESPONSIBLE FOR EQUAL OPPORTUNITY CONTRACT PROVISIONS

Name (Last, First, MI)		Title or Position	
Street	City	State	Zip Code
Phone No. () -		Fax No. () -	

Check One: <input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor <input type="checkbox"/> Consulting Engineer	Check One: <input type="checkbox"/> First Submittal <input type="checkbox"/> Revised
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Estimated Start Date:	Estimated Completion Date:
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Firm Name		
Signature	Title	Date