

Work/NAICS Code Add or Change Request Form

Business Name:		DBE Owner on Record:	
Mailing Address:			
City:		State:	Zip:
Business Phone:	Cell Phone:		Fax:
Email Address:		Primary Contact:	

Work code(s) to be changed:

Work code(s) to be added:

Work code(s) to be removed:

Please provide proof that your firm has previously done the type of work that you wish to add (invoices, purchase orders, payment checks, etc.). Attach separate pages if necessary.

Please list experience, qualifications, and/or licensures for the persons in your firm who will be performing the work type you wish to add. Attach separate pages if necessary.

Provide a list of equipment your firm possesses that enables it to perform the work type you wish to add. Attach separate pages if necessary.

If your firm leases equipment to perform the work type you wish to add, please provide the names and locations of any businesses from whom the firm leases equipment. Attach separate pages if necessary.

Owner's Signature _____

Date _____