

MBE CHANGE ORDER PARTICIPATION FORM

Name of Contractor/Consultant				Change Order No.:	
Project Title:				Project No.:	
Date:			Project No.:		
In this chart, indicate <u>all</u> subcontractors scheduled to work on this Change Order (Both MBE and Non-MBE). Please indicate if it is an Additive (+) or Deductive (-) Change Order.					
MBE/Non-MBE	Firms Name	Phone #	Scope of Work to be subcontracted (indicate if the contract will include labor & material)	Dollar Value of Change Order	If Certified with a reciprocal agency (Name Agency)

MBE Code	Code Description	Total Dollar Value [\$]	Percentage of Contract Amount as a result of the Change Order[%]
AA	African American Participation	_____	_____
HANA	Hispanic, Asian, Native American Participation	_____	_____
WBE	Women Owned Participation	_____	_____
TOTAL	Minority Participation	_____	_____

Please attach the justification letter to this form along with any necessary backup data.

ADDITIONAL INFORMATION:

Signature: _____ **Title:** _____