

MBE/WBE/SDVOB PARTICIPATION PLAN PA 3749D / 10-23 Office of Diversity, Equity & Inclusion (ODEI) or Aviation Affirmative Action Office (AAAO) NOTE: The contractor is required to submit to ODEI or AAAO a MODIFIED PLAN, for any changes to the original plan. TAA/MWA/Project Number: Project Title: **Tenant Name:** Location: Prime Contractor Contact Name: Total Construction \$ Amount: MBE 20%, WBE 10% and SDVOB 3% Prime Contractor Company: Port Authority Contract Goals: Search our database of certified businesses click here Prime Contact Email: Prime Contractor Phone: * Approximate \$ Indicate Description of work and MBE/WBE/SDVOB Company Name, Address, Phone Number, Anticipated amount MBE, WBE, specify "supply" and/or date work will % of Total Contract Contact Person Name, Email Address "install." MBE/WBE/SDVOB **SDVOB** start and finish. \$ Amount Subcontract MBE Phone Number Company Name Start WBF Email Address Contact Person Name SDVOB Finish Company Address Supplier MBE Company Name Phone Number Start WBE Contact Person Name **Email Address** SDVOB Company Address Finish Supplier MBE Company Name Phone Number Start WBE **Email Address** Contact Person Name SDVOB Finish Company Address Supplier Phone Number MBE Company Name Start WBE Contact Person Name **Email Address** SDVOB Finish Company Address Supplier Total: If you need additional lines to add more contractors or sub contractor suppliers please click here M/WBE: WBE: SDVOB: FOR PRIME CONTRACTOR USE FOR ODEI AND AAAO USE ONLY Contract Goals: ☐ Approved □ Waived ☐ Rejected Title: Department: Print Name: Print Name: Date: Date: Signature: Signature:

^{*} Please Note: supplies, equipment and materials are only credited 60%, towards the MBE/WBE/SDVOB goals.. Example: \$100,000 x 60% = \$60,000 estimated MBE/WBE dollar value of work.