



In order to develop a more complete knowledge of your Company and help WMMCA better serve you, please complete this form and return to:

WMMCA
580 Cascade West Pkwy
Grand Rapids, MI 49546

Name of Company: _____

Street Address: _____

Mailing Address: _____

Contact Person: _____

Telephone Number: _____ Fax Number: _____

Website: _____ Email Address: _____

Is your Company:

MBE WBE DBE

MBE/WBE/DBE Certified by: _____

Bonding Capacity: _____ No. of Employees: _____

Trades

Please fill-in the trade(s) that your Company is interested in bidding

Year Company Started: _____ Type of Company: Corp. Partnership Proprietorship Sub S. Corp.

State of Incorporation: _____ Date of Incorporation: _____

What is the largest contract your Company has completed?

Amount: _____ Year: _____ Project name and scope: _____

What is the largest dollar volume job you expect to do during this year?

Amount: _____ Project name and scope: _____

List five (5) largest projects competed: _____

List five (5) current projects: _____
