



CITY OF DALLAS
Office of Economic Development – Business and Workforce Inclusion
Business Inclusion and Development Documentation Form (BWI-FRM-215)

(Note: Please use the Tab button, mouse or arrows to move from one section to the next. Please DO NOT use the "Enter" key.)

Project Name

Bid #:

Firm Name and Address:

1. Did you meet with a staff member of the Office of Economic Development Business and Workforce Inclusion (BWI)?

Please make a selection:

Name of staff member:

2. Did you utilize a current M/WBE directory provided by BWI staff for this project?

Please make a selection:

Date of Listing:

3. Did you provide plans and specifications, bids or proposals to potential M/WBEs or information regarding the location of plans and specifications, bids, or proposals for this project?

Please make a selection:

4. If M/WBE bids and proposals were received and rejected, you must attach documentation of the received bid and the reason for rejection. (i.e. letters, memos, telephone calls, meetings, etc.)

5. Complete the attached Documentation Form(s) to further explain good faith efforts to obtain M/WBE participation on this project. If there is written documentation of efforts with the M/WBEs who responded affirmatively to the bidder's written notice please attach documentation (i.e. quotes, or e-mails).



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Project Name #: _____ **Bid #:** _____

Firm Name and M/WBE Certification Number	Person Contacted and Date	Telephone Number and Email Address	Type of Work	Method of Communication (Telephone/Email)	Response
		- -			
		- -			
		- -			
		- -			
		- -			
		- -			
		- -			

Please use the form(s) below if additional space is needed. Intentional misrepresentation could result in criminal prosecution.

Officer’s Signature: _____ **Title:** _____ **Date:** _____

Printed Name: _____ **Date:** _____



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Project Name & Bid/Contract #: _____ #: _____

Firm Name and M/WBE Certification Number	Person Contacted and Date	Telephone Number and Email Address	Type of Work	Method of Communication (Telephone/Email)	Response
		- -			
		- -			
		- -			
		- -			
		- -			
		- -			
		- -			

Please use the form below if additional space is needed. Intentional misrepresentation could result in criminal prosecution.

Officer’s Signature: _____ Title: _____ Date: _____

Printed Name: _____ Date: _____