



NEW YORK STATE ASSOCIATION FOR AFFORDABLE HOUSING

Registration Form: MWBE / Developer Speed Networking Event

The State Room: 154 State Street, Albany, NY

SECTION 1 (TO BE COMPLETED BY ALL REGISTRANTS)

Company Name:

Address:

Geographic Market Area:

Representative Name:

Representative Title:

Phone:

Email:

Business type (circle all that apply): Developer Contractor Sub-Contractor

SECTION 2 (TO BE COMPLETED BY MWBE FIRMS ONLY)

Ownership (circle all that apply): Minority Owned Woman Owned

Certified MWBE in (circle all that apply)*: New York City New York State

Please list your firm's three largest contracts with a brief description.

1. Amount: Date: Description:

2. Amount: Date: Description:

3. Amount: Date: Description:

SECTION 3 (TO BE COMPLETED BY NON-MWBE FIRMS ONLY)

Please list upcoming projects and / or opportunities for MWBE firms:

1.

2.

3.

*Certification is not required to participate in this event