

State of Michigan Department of Labor and Economic Growth
MICHIGAN STATE HOUSING DEVELOPMENT AUTHORITY
P.O. BOX 30044 – Lansing, MI 48909

This form is issued under authority of Act 346 P.A. 1966. Completion and execution of this form is required.
Failure to complete and execute this form may result in the termination of the construction contract.

CONTRACT AWARD AND UTILIZATION COMMITMENT

DEVELOPMENT NAME AND NUMBER

Development Location

SPONSOR(S)

Minority or Female Ownership Black/African American _____% Hispanic or Latino _____% Asian _____%
American Indian or Alaska Native _____% Native Hawaiian or Other Pacific Islander _____% Other _____%

GENERAL CONTRACTOR

Business Name

Address

Telephone ()

IRS No.

Principal Owner

Minority or Female Ownership

Black/African American _____% Hispanic or Latino _____% Asian _____%
American Indian or Alaska Native _____% Native Hawaiian or Other Pacific Islander _____% Other _____%

Construction Contract Amount

\$

Date of Award

Estimated Starting Date

Estimated Completion Date

SUBCONTRACTOR

Business Name

Address

Telephone ()

IRS No.

Principal Owner

EEO Officer

Minority or Female Ownership

Black/African American _____% Hispanic or Latino _____% Asian _____%
American Indian or Alaska Native _____% Native Hawaiian or Other Pacific Islander _____% Other _____%

Subcontract Amount

\$

Contract Date

If Joint Venture

Amount Minority: \$

Amount Majority: \$

Amount Woman-Owned: \$

Type of Contract

☐ Trade

☐ Supplier

Professional or

☐ Service

Tier

If third tier, to whom:

Estimated Starting Date:

Estimated Completion Date:

On this development, we hereby commit our firm to provide a total workforce integration of
_____ % minorities and _____ % females in each skilled trade.

Signature of Subcontractor's EEO Officer

Date

ACKNOWLEDGEMENT BY GENERAL CONTRACTOR

Signature of General Contractor's EEO Officer

Date