

CERTIFICATION OF SIGNED CONTRACT

MSHDA No.:	
Development:	

This is to certify that on this	day, of	20
		has entered into a written and binding
(NAME OF SUBCONTRACTOR)		
Subcontract with		<u>f</u> or the
Purpose* of supplying building m	aterials and/c	or performing the following trade(s) work(s):
Trade Name:		Trade Code:
Initial contract dollar amount or c	redit limit is \$_	
of the "Employment Practices." "Failure on the part of the Plan requirements will be consid termination of the contract and re	e subcontracto lered a breach emoval from ti ate the "Emplo	anguage is included in the contract along with a copy or to implement the Equal Employment Opportunity n of the contract, and may be considered cause for he project. In order to comply with this requirement, oyment Practices Provision" of MSHDA's Article XV, Contract into this subcontract."
commitment goals are included, v	which are nat the require	ity and female skilled trades-people utilization % for minority trades-people and 6.9 % d "Approval Packet" forms are attached and
representation; or the fraudulent use of an instrument, facility, arti	obtaining of n cle, or other v ite Housing De	pretense, including any false statement or noney, real or personal property; or the fraudulent valuable thing or service pursuant to his/her evelopment Authority program, is punishable by e up to \$5,000.00.
period of at least three (3) years a	after the proje andom basis f	ust keep a complete set of contract work records for a act is completed. It is also understood that MSHDA for full project record audits at which time all records administrator.
		Date
Subcontractor's Signature (BLUE	: INK)	

Date ___ General Contractor's Signature (BLUE INK)

Revised 03/2019



CONTRACT AWARD AND UTILIZATION COMMITMENT

MSHDA No.: Development #:____ Development Address: _____

MICHIGAN STATE HOUSING Lansing, MI 48909

SPONSER(S):

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

GENERAL CONTRACTOR

(If you are a subcontractor who is subcontracting to another subcontractor, please complete the General Contractor Block) Business Name:

Address:

Principal Owner:

Telephone:

Email:

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

Construction Contract Amount:_____ Date of Award _____

Date

Address:			
Principal Owner:			
Telephone:		Email:	
			nic or Latino% Asian% r% Other% or NA
	: \$	Contract Award	Date:
If Joint Venture:\$	Amount Minority \$	Female, or \$	Date: Majority, or NA
Tier:FirstSeco	ondThirdFourth		Professional (arch, engineer, etc.) Or Service (waste, porta-john, etc.)
Estimated Starting Da	ate:	Estimated Comple	
Goals: For total projec	t hours worked is% M	inorities and <u>6.9%</u> F	emales in each trade.
Subcontractor's EEO (Officer or Owner Signature (Date

Note: A subcontractor who is subcontracting with another subcontractor (sub of a sub) must sign this General Contractor EEO Officer line.

GENERAL CONTRACTOR SIGNATURE:

General Contractor's EEO Officer or Owner Signature (BLUE INK)

WORKFORCE ANALYSIS

(Suppliers - Only Do Not Complete)



MSHDA No.: _____ Development: _____

CURRENT TOTAL MICHIGAN WORKFORCE BREAKDOWN

Job Category or Trade Include all employees	TO1 EMPLC		Non-Minorities		Non-Minorities		Non-Minorities		Non-Minorities Alaska N		Asian		Black or African American		Hispanic or Latino		Not Hispanic or Latino		Native Hawaiian/Other Pacific Islander		Handicapped	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female				

IN COMPLIANCE WITH MSHDA EEO requirements, we hereby commit our firm to a total workforce integration of

____% minorities and 6.9% females. This is a percentage of the skilled trade hours worked on this project.

PROJECTED WORKFORCE ON THIS JOB

Job Category or Trade Include all employees	TO1 EMPLC		Non-Minorities		American Indian/ Alaska Native		Asian		Black or African American		Hispanic or Latino		Not Hispanic or Latino		Native Hawaiian/ Other Pacific Islande		Handicapped	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female

GROUPS: American Indian/Alaska Native, Asian, Black or African American, Hispanic or Latino, or Native Hawaiian or Other Pacific Islander, TBD

Company Name: _____

Authorized Signature (BLUE INK)