NEW YORK CITY HOUSING AUTHORITY

BID/ PROPOSAL FACE SHEET

ALL VENDORS MUST COMPLETE AND SUBMIT A BID/PROPOSAL FACE SHEET FOR CONTRACT BIDS OF MORE THAN \$10,000 AS PART OF THE BID/PROPOSAL SUBMISSION.

DEPARTMENT/DEVELOPMENT					
BID/CONTRACT NUMBER CONTRACT FOR:					
BU	SINESS APPLICANT NAME			TAX ID NUMBER	
	D/B/A OR TRADE NAME (If Any):				
	BUSINESS ADDRESS:				
	MAILING ADDRESS (If Different):				
	REMIT TO ADDRESS (If Different):				
	TELEPHONE #:	CELL PHONE # :			
	FAX #:				
	WEBSITE:				
	CONTACT PERSON:	TITLE:			
	E-MAIL ADDRESS:				
IT IS THE POLICY OF THE NEW YORK CITY HOUSING AUTHORITY (NYCHA) TO ENSURE THAT ALL BUSINESSES HAVE AN EQUAL OPPORTUNITY TO PARTICIPATE IN ALL ASPECTS OF NYCHA'S PROCUREMENT OF GOODS AND SERVICESWITHOUT REGARDTOTHE RACE, COLOR, RELIGION, MILITARY SERVICE, NATIONAL ORIGIN, SEX, AGE, DISABILITY, MARITAL STATUS OR SEXUAL ORIENTATION OF THE OWNERS, PARTNERS OR STOCKHOLDERS. FURTHER, NYCHA IS COMMITTED TO ACHIEVE MAXIMUM PARTICIPATION OF MINORITY, WOMEN, AND SMALL BUSINESS ENTERPRISES (MWSBES) IN NYCHA'S PROCESS OF AWARDING CONTRACTS FOR GOODS AND SERVICES.					
IS THIS BUSINESS CERTIFIED AS AN M/WBE BY NEW YORK CITY'S SMALL BUSINESS SERVICES (SBS)?					
	(Please Check All That Apply):		- (,	
	☐ ASIAN / PACIFIC ☐ HISPANIC	☐ NATIVE AMERICAN	N	BLACK	WOMEN
	IF YOU BELIEVE YOU MAY QUALIFY AS AN M/WBE, PL https://www1.nyc.gov/nycbusiness/description/minority-an				CERTIFY:
2.	ARE YOU A SECTION 3 BUSINESS CONCERN?	res No			
	YOUR BUSINESS MUST BE REGISTERED ON EITHER NYCHA'S S3BC REGISTRY OR THE HUD SECTION 3 OPPORTUNITY PORTAL FOR NYCHA TO CONSIDER YOU AN S3BC. IF YOU BELIEVE YOU MAY QUALIFY AS AN S3BC, GO TO: https://www1.nyc.gov/site/nycha/business/section3-business-concern-information.page				
3.	IS THIS BUSINESS CERTIFIED AS ANY OF THE FOLLO IF YES, ATTACH COPIES OF ALL SUCH CERTIFICATION		ERPRISE B	Y A GOVERNMENT A	AGENCY OR AUTHORITY?
	MINORITY - OWNED BUSINESS ENTERPRISE (MBE)	☐ YES [NO		
	SMALL BUSINESS ENTERPRISE (SBE)	YES [NO		
	WOMEN - OWNED BUSINESS ENTERPRISE (WBE)	☐ YES [NO		
	VETERAN-OWNED BUSINESS	☐ YES	NO		
	PRINT NAME OF BUSINESS REPRESENTATIVE COMPLETING THIS FORM:				
	TITLE:				
	SIGNATURE:				

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