Contractor Compliance Activity Report

2021 06 01 Ver 1

Development Number:	
Development Name:	
Development Address:	
Development County Area:	
Total Construction Contract Amount:	

**** COMPLIANCE ERRORS ****

The project is out of compliance with the goal(s) listed below. For any goal that remains out of compliance, submit documentation on how you attempted to reach that goal. CLICK ON AN ERROR MSG to see the details of that goal in the spreadsheet below.

The information is required to be provided for all contractors (i.e. generals and sub-contractors) who bid on the project.

Complete For All Contractors						Black, Indigenous, and People of Color-owned Business Enterprise/ Women-owned Business Enterprise Information		
Contractor Name & Address	**Type of Business / Trade**	**General or Sub (G/S)**	**$ Amt. Of Bid**	**Contract Awarded (Yes/ No)**	**Date of Contract If Awarded**	**Women-owned Business Enterprise (Yes/No)**	**Black, Indigenous, and People of Color-owned Business Enterprise (Yes/No)**	**Black, Indigenous, and People of Color-owned Business Enterprise Racial/Ethnic Code**

Total(s) Where Applicable	**Total Bid Amt:**	**$0.00**		
COMPLIANCE TOTALS:	**Total Awarded Bid Amt:**	**$0.00**	**Women-owned Business Enterprise Contract Award Amount:**	**$0.00**
			Women-owned Business Enterprise Percentage:	**0.00%**
			Black, Indigenous, and People of Color-owned Business Enterprise Contract Award Amount:	**$0.00**
			Black, Indigenous, and People of Color-owned Business Enterprise Percentage:	**0.00%**

(Click on CONTRACTOR NAME / ADDRESS to change info)

If you did not meet Minnesota Housing's Black, Indigenous, and People of Color-owned Business Enterprise and /or Women-owned Business Enterprise contracting goals, please explain your efforts to award contracts to and/or solicit bids from Black, Indigenous, People of Color-owned and/or Women-owned contractors and subcontractors.

I certify that this list is complete and accurate.

☐ Pursuant to Minnesota Statutes chapter 325L, by typing my name below I am representing that it constitutes my valid electronic signature.

Owner's Signature: Date

☐ Pursuant to Minnesota Statutes chapter 325L, by typing my name below I am representing that it constitutes my valid electronic signature.

General Contractor's Signature: Date

IMPORTANT CONTRACT COMPLIANCE INFORMATION AND DEFINITIONS

DEFINITIONS:

- **Black, Indigenous, and People of Color-owned Business Enterprise/Women-owned Business Enterprise** - Black, Indigenous, or person of color or woman-owned business enterprise (i.e., having 51% ownership in the actual work of the business)
- **Black, Indigenous, and People of Color** - member of one of the following racial/ethnic groups:

  BLACK/AFRICAN AMERICAN (non-Hispanic) - a person having origins in any of the black racial groups of Africa.

  AMERICAN INDIAN or ALASKA NATIVE - a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

  ASIAN - a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, for example: Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippines, Thailand and Vietnam.

  NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER – a person having origins in any of the original peoples of Hawaii, Guam, Samoa or Pacific Islands.

  HISPANIC OR LATINO – a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

RACIAL/ETHNIC CODES:

1 White
2 Black / African American
3 American Indian or Alaska Native
4 Asian
5 Native Hawaiian or Other Pacific Islander
6 Hispanic or Latino