



Attachment G – Contractor Profile must be submitted within fifteen (15) working days after being notified as selected Respondent.

Project Name: _____ Project No. _____

Name of Contractor _____

Contractor's FED Tax ID# _____ DUNS # _____

Name of Subcontractor _____

Subcontractor's FED Tax ID# _____ DUNS # _____

Category of Trade (e.g. Carpentry, Electrical, Plumbing, etc.): _____

Type of Contract:

☐ Construction ☐ Professional ☐ Non-professional Services ☐ Supplies

☐ Equipment ☐ Architectural / Engineering

Name of Principal Owner(s): _____

Name of Contact Person: _____

Company Address: _____

Phone: _____ Email: _____

Estimated Amount of Contract or Subcontract: \$ _____

Women Owned: ☐ Yes ☐ No

Minority Owned: ☐ Yes ☐ No





Section 3 Business: ☐ Yes ☐ No

If you select "Yes" to Section 3 Business, you must attach the Pasco County Section 3 Business Concern Self-Certification form.

Signature of Contractor

Date