

Missouri
Department
of Transportation



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Kevin Keith, Director

**DISADVANTAGED BUSINESS ENTERPRISE
Request for North American Industry Classification System (NAICS) Code Review**

Name of Firm:		
Street Address:		
City:	State:	Zip:

Type of work requested for expansion:

List and attach documentation of the 5 largest contracts or supply invoices completed for the NAICS code requested.

Owner/Contractor	Phone	Contract Amount	Project Name/Location	Type of Work Performed

List all equipment you own or lease used to perform the work for the NAICS code requested. Copies of current lease agreements or proof of payment must be attached.

Type of Equipment	Make	Model	Year	Date Acquired	Present Value

Please attach any other documentation or information relevant to the review of the NAICS code your firm requested. This can include documentation of technical licenses, leases of property or facilities, training or expertise.

Signature	
Printed name	
Title	
Date	