

MWBE/SDVOB SOLICITATION LOG

Contract No. _____ County _____ Letting Date _____ Date Submitted _____ Page _____ of _____

Contractor Name / Address _____ Contact Name: _____

_____ E-Mail: _____

_____ Telephone No: _____

	Firm Name Contact	Pgm	Telephone No E-Mail Address	NYSDOT or OGS Work Code(s)	Date of Contact	Method(s) of Contact	MWBE/SDVOB Response Code(s)	Bidder Action Code(s)
1								
2								
3								
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