

**CITY OF KNOXVILLE
M/W/SBE BUSINESS DEVELOPMENT PROGRAM
BUSINESS PROFILE**

**Return To:
Joshalyn Hundley
City of Knoxville
P.O. Box 1631
Knoxville, TN 37901**

Status: (Check all that apply)

African American Asian American Hispanic American Native American Woman Small Business

Type of Work: Contractor Services/Sales Professional Services Manufacturing Other

Firm Name: _____ Contact Person: _____

Address: _____

City/State: _____ Zip: _____

Phone: _____ Cell Number: _____

E-mail: _____ Fax: _____

Construction Only: State of Tennessee License Number: _____ License Classification: _____

License Expiration Date: _____ Other Licenses: _____

Complete if your company is non-construction:

Business License Number: _____ Other Licenses: _____

Specialty:

Company Established (Year): _____

Type of work typically contracted/subcontracted or service provided:

Bonding Capability? Yes No Bondable Amount: _____

Type of Insurance:	General Liability:	Limits: _____
	Auto Liability:	Limits: _____
	Errors and Omissions: (<i>Professional Services Only</i>)	Limits: _____
	Workers Compensation:	Limits: _____

References:

1. _____
2. _____
3. _____

Signature: _____ Title: _____ Date: _____

I certify that the above information is true and correct.

* The information submitted will only be used to increase the participant's market availability and reporting purposes.