NORTH CAROLINA DEPARTMENT OF TRANSPORTATION PUBLIC TRANSPORTATION DIVISION

DBE/MBE/WBE/HUB ANTICIPATED VENDOR AWARDS in FY2017 APPLICANT'S NAME: City of Eden, NC PERIOD COVERED MAILING ADDRESS: PO Box 70, Eden, NC 27289 From: 7/1/2016 VENDOR NUMBER: **To:** 6/30/2017 We expect to utilize the following list of DBE/MBE/WBE/HUB Vendors in FY2015: **Mailing Address** DBE/MBE/WBE/HUB **ID# from NCDOT** Describe Service/ Item to be **Anticipated** City, State, Zip Expenditure (\$) Vendor/Subcontractor's Name Website Purchased TOTAL The above list includes the DBE/MBE/WBE/HUB Vendors the applicant expects to utilize in FY2017. The applicant does **NOT** expect to utilize any DBE/MBE/WBE/HUB Vendors in FY2017.

Date

Signature of Authorized Official