

Bidder Questionnaire

Agency Name Prime Contractor Name							Federal Aid Number Contract Number			
Firm/ Subcontractor Name	Address (incl. Zipcode)	DBE Status	Race	Gender	NAICS Codes	\$	Scope of Work	Firm Age	Firm Gross Receipts	
If you have additional F	Firms or Subcontractors t	hat submitted Bid	s, please complete a	additional forms	S.					
Prime Contractor Repr									 Date	

DOT Form 272-022 Revised 09/2024

Form Instructions

The following information on each firm that submitted a bid is required as part of part of 49 CFR 26.11(c)(2):

Firm/Subcontractor Name: Enter the name of each firm or subcontractor who submitted a quote or a bid on the contract.

Address: Enter the date the main address of the firm/subcontractor. Include the zip code.

DBE Status: Enter the DBE status. Options are DBE and Non-DBE.

Race: Enter the race of the majority Owner. Options are "Black American", "Hispanic American", "Native American", "Asian-Paci ic American", "Subcontinent Asian American", and "White". N/A should only be used if there is not a majority owner such as when the Firm is a corporation.

Gender: Enter the gender of the majority Owner. *Options are "Female" and "Male"*. N/A should only be used if there is not a majority owner such as when the Firm is a corporation.

NAICS Codes: Enter the appropriate NAICS Codes for the work the bid was submitted.

Scope of Work: Enter the scope of the work the bid was submitted for.

Firm Age: Enter the age of the Firm.

Firm Gross Receipts: Enter the annual gross receipts. Options are "Less than \$1 million", "\$1-\$3 million", "\$3-\$6 million", "\$6-\$10 million", "\$10-\$20 million", "\$20-\$30.72 million", "Greater than \$30.72 million".

Prime Contractor Representative: The name of the person who filled out the form.