



REQUEST FOR NAICS CODE MODIFICATION

Instructions: Provide information as requested below. All fields are text limited for accurate printing. See page 2 of this form if additional space is needed for code requests. Check NAICS codes for accuracy prior to submission to the KYTC Office for Civil Rights and Small Business Development, 200 Mero Street, Frankfort, KY, 40622.

SECTION 1: DBE INFORMATION

COMPANY NAME		MAILING ADDRESS (street, P.O. Box)		
DBE OWNER ON RECORD (first and last name)	% OWNED	CITY	STATE	ZIP

PRIMARY JOB CATEGORY THIS COMPANY IS CERTIFIED TO PERFORM:

SECTION 2: PRIMARY CONTACT INFORMATION

FIRST NAME	MI	LAST NAME	EMAIL	PHONE

SECTION 3: NAICS CODE REMOVAL REQUESTS (Additional space is provided on page 2.)

SECTION 4: NAICS CODE ADDITION REQUESTS (Additional space is provided on page 2.)

NAICS CODE ADDED	EQUIPMENT/LICENSES (Those possessed by your company allowing performance of this work.)	COMPANY PERSONNEL (Those with expertise in this work.)
1		
2		
3		
4		
5		

SECTION 5: SIGNATURE

DBE OWNER	DATE	FOR KYTC USE ONLY	
		<input type="checkbox"/> Approve	<input type="checkbox"/> Deny <input type="checkbox"/> Needs site visit
		_____	_____
		Program Investigator	Branch Manager



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SECTION 3: NAICS CODE REMOVAL REQUESTS *(continued from page 1)*

SECTION 4: NAICS CODE ADDITION REQUESTS *(continued from page 1)*

NAICS CODE ADDED	EQUIPMENT/LICENSES <i>(Those possessed by your company allowing performance of this work.)</i>	COMPANY PERSONNEL <i>(Those with expertise in this work.)</i>
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

SECTION 5: SIGNATURE *(Signature is required on pages 1 and 2 if both contain information.)*

DBE OWNER	DATE