Connecticut Department of Transportation  
Contractor/Vendor Profile Sheet  

Please submit completed form to:  

Constance Miano  
Connecticut Department of Transportation  
Division of Contract Compliance  
P.O. Box 317546  
Newington, Connecticut 06131-7546  

Telephone: (860) 594-2177  
Fax: (860) 594-3016  

Confidential Information Notice  
To the extent permitted by law, the information that you provide will be held in confidence and will not be shared with other firms without your prior written consent.  

A. Firm Name: __________________________________________________________  

Federal EIN or SSN Number: ____________________________________________  

Primary/Principal Business Address  
Street _____________________________________________________________________  
City _________________________________________________________________________  
State ______________________________________________________________________  
Zip Code ____________________________________________________________________  

Mailing Address if different than above  
Address (Line 1) ___________________________________________________________________  
Address (Line 2) ___________________________________________________________________  
City _________________________________________________________________________  
State ______________________________________________________________________  
Zip Code ____________________________________________________________________  

Please provide the following information for the contact person for this survey  
Name ________________________________________________________________________  
Phone Number ___________________________________________________________________  
Fax Number _____________________________________________________________________  
E-Mail _________________________________________________________________________  
Does your firm have a Web Site? YES ____ or NO ____
If “Yes,” what is the URL address? ______________________________________________________

B. Is your firm registered with the Connecticut Secretary of the State? YES ____ or NO ____
   Is your firm certified as a Disadvantaged Business Enterprise ("DBE")? YES ____ or NO ____
   If “Yes,” by what agency is your firm certified? ____________________________________________
   If “Yes” please list each State that you are certified in: _____________________________________
   __________________________________________  ____________________________  _______________________
   __________________________________________  ____________________________  _______________________

Is your firm certified by the U.S. Small Business Administration as an
   8(a) Business Development ("8(a) BD")? YES ____ or NO ____
   or
   Small Disadvantaged Business ("SDB")? YES ____ or NO ____

Is your firm certified as a small, woman, minority or disabled owned Business by the Connecticut
Department of Administrative Services (DAS)? YES ____ or NO ____
If “Yes,” are you a Small Business __; Minority Owned Business __; or a Woman Owned Business __

In what year did your business start under the current name? ___________ (year)

C. Gross Annual Receipts

To maintain eligibility to receive certain Federal funds, the Connecticut Department of Transportation
(ConnDOT) is required by the USDOT to keep on file information regarding the annual gross receipts
of firms bidding on prime contracts and/or bidding or quoting subcontracts at any tier.

Under the State’s Freedom of Information Act, Connecticut General Statutes Chapter 14, Sections 1-200 through 1-241, this information may be subject to disclosure unless it qualifies as a trade secret under Section 1-210(b)(5), which exempts from a disclosure “commercial or financial information given in confidence, not required by statute.” Therefore, please answer the following questions concerning your firm’s annual gross receipts:

1. Do you consider this information to be sensitive commercial or financial information? YES ____ or No ____

2. Are you submitting this information in confidence? YES ____ or No ____

3. In what category are your firm’s annual gross receipts?
   _____ Less than $1 Million
   _____ More than $1 Million and Less than $5 Million
   _____ More than $5 Million and Less than $10 Million
   _____ More than $10 Million and Less than $15 Million
   _____ More than $15 Million and Less than $20 Million
   _____ More than $20 Million
Please answer the following questions about your firm’s business activities:

1. Please enter the North American Industry Classification System (NAICS) code reported on your firm’s most current Federal Tax return and any other NAICS codes that best describe your business activities. (required information)

2. Within the last year has your firm quoted work or given notice of interest for a local agency (city, town or other political subdivision of the State of Connecticut) construction project whether successful or not? (This can include subcontracting, trucking, bonding services, material quotes and/or professional services regardless of tier) YES ____ or NO ____

3. Within the last two years has your firm quoted work or given notice of interest to ConnDOT or a Prime Contractor or Consultant for a ConnDOT construction project or professional services agreement whether successful or not? This can include subcontracting, trucking, bonding services, material quotes and/or professional services regardless of tier?

   If your answer is “No,” skip to question #5. YES ____ or NO ____

4. If your answer to question #3 is “Yes,” please answer the following:

   a. Approximately how many times in the past year has your firm quoted work, materials, products or services for a ConnDOT project or professional services agreement at any level whether successful or not?

   b. You have quoted work to ConnDOT as? Check all that apply:

   Prime - You submit bids, proposals and/or RFQs directly to ConnDOT
   1st Tier – You are a subcontractor, consultant; and/or supplier to a Prime
   Lower Tier – You are a subcontractor; consultant; and or supplier to a subcontractor

   A Contractor: Prime ____ 1st Tier ____ Lower Tier ____
   A Consultant: Prime ____ 1st Tier ____ Lower Tier ____
   A Supplier: Prime ____ 1st Tier ____ Lower Tier ____
   A Manufacturer: Prime ____ 1st Tier ____ Lower Tier ____
   Trucking Firm: Prime ____ 1st Tier ____ Lower Tier ____
   A Broker: Prime ____ 1st Tier ____ Lower Tier ____
   Other (Describe): __________________________________________

5. In which area(s) does your firm actively bid to perform work or provide materials, products or services on ConnDOT projects?

   Construction ______
   Maintenance ______
   Procurement ______
   Professional and/or Consulting Services ______
   Other (Describe): __________________________________________

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6. Please identify the types of transportation projects on which your firm performs work. (Please check all that apply.

   Highway Related  ____
   Transit Related  ____
   Rail Related  ____
   Airport related  ____

7. Please identify the geographic area(s) in Connecticut where your firm can perform work. Check all that apply.

   Hartford County  ____
   Fairfield County  ____
   Litchfield County  ____
   Middlesex County  ____
   New Haven County  ____
   New London County  ____
   Tolland County  ____
   Windham County  ____
Please identify any firm that provides quotes to your company when your firm bids on ConnDOT construction projects or professional services agreements.

Firm Name: ________________________________________________________________

Business Address: ____________________________________________________________

City: __________________________ State: _______ Zip: ________________

Phone No.: __________________________

Fax No.: ____________________________

Firm Name: ________________________________________________________________

Business Address: ____________________________________________________________

City: __________________________ State: _______ Zip: ________________

Phone No.: __________________________

Fax No.: ____________________________

Firm Name: ________________________________________________________________

Business Address: ____________________________________________________________

City: __________________________ State: _______ Zip: ________________

Phone No.: __________________________

Fax No.: ____________________________

Firm Name: ________________________________________________________________

Business Address: ____________________________________________________________

City: __________________________ State: _______ Zip: ________________

Phone No.: __________________________

Fax No.: ____________________________

Firm Name: ________________________________________________________________

Business Address: ____________________________________________________________

City: __________________________ State: _______ Zip: ________________

Phone No.: __________________________

Fax No.: ____________________________
Firm Name: ________________________________________________________________

Business Address: __________________________________________________________

City: _______________________________ State: __________ Zip: _________________

Phone No.: _______________________________

Fax No.: _________________________________

Firm Name: ________________________________________________________________

Business Address: __________________________________________________________

City: _______________________________ State: __________ Zip: _________________

Phone No.: _______________________________

Fax No.: _________________________________

Firm Name: ________________________________________________________________

Business Address: __________________________________________________________

City: _______________________________ State: __________ Zip: _________________

Phone No.: _______________________________

Fax No.: _________________________________

Firm Name: ________________________________________________________________

Business Address: __________________________________________________________

City: _______________________________ State: __________ Zip: _________________

Phone No.: _______________________________

Fax No.: _________________________________

(Please provide additional pages if necessary)