Document 00572

CONTRACTOR'S REQUEST FOR PLAN DEVIATION

Contractor Name:_____

Project Name:_____

Approved Participation Plan Percentages	**MBE**	**WBE**	**SBE**	**Total**
	%	%	%	%

Contractor's Requested Participation Plan	**MBE**	**WBE**	**SBE**	**Total**
	%	%	%	%

Justification: Please provide the reason the Contractor is unable to meet the MWSBE goal in the Approved Plan.

_____

_____

_____

Good Faith Efforts: Please list any efforts not listed in Contractor's Record of Good Faith Effort (Document 00571).

_____

_____

_____

_____

Please attach additional pages if the space for Justification or Good Faith Efforts is insufficient.

Date:_____ *Contractor:_____

E-mail: _____ *By:_____

Phone Number: _____ Title:_____

*I understand that the approval of this deviation request does not constitute a final decision by OBO that Contractor has used Good Faith Efforts in meeting the Contracting Goal.

FOR OFFICIAL USE ONLY: Approved ☐ Not Approved ☐

OBO Representative Date:_____

_____ Title: _____