

**Allegheny County Department of  
Minority/ Women/ Disadvantaged Business Enterprise  
Small Business Development and Technical Assistance Program**

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**Past Projects References Form**

Please provide us with information on the three largest projects that your company has completed within the past three years. The following information is useful so that we may be better able to evaluate your company's previous track record and performance.

**Project #1**

Year Completed: \_\_\_\_\_ Start and End Dates: \_\_\_\_\_ Size (\$): \_\_\_\_\_

Project Name/Description: \_\_\_\_\_

Were you a Prime or Sub Contractor: \_\_\_\_\_ Size of Your Contract (\$): \_\_\_\_\_

If Sub, Name of Prime Contractor: \_\_\_\_\_

Contact: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Were you bonded (Amount)? Yes: \_\_\_\_\_ No: \_\_\_\_\_ Not Required: \_\_\_\_\_

**Project #2**

Year Completed: \_\_\_\_\_ Start and End Dates: \_\_\_\_\_ Size (\$): \_\_\_\_\_

Project Name/Description: \_\_\_\_\_

Were you a Prime or Sub Contractor: \_\_\_\_\_ Size of Your Contract (\$): \_\_\_\_\_

If Sub, Name of Prime Contractor: \_\_\_\_\_

Contact: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Were you bonded (Amount)? Yes: \_\_\_\_\_ No: \_\_\_\_\_ Not Required: \_\_\_\_\_

**Project #3**

Year Completed: \_\_\_\_\_ Start and End Dates: \_\_\_\_\_ Size (\$): \_\_\_\_\_

Project Name/Description: \_\_\_\_\_

Were you a Prime or Sub Contractor: \_\_\_\_\_ Size of Your Contract (\$): \_\_\_\_\_

If Sub, Name of Prime Contractor: \_\_\_\_\_

Contact: \_\_\_\_\_ Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Were you bonded (Amount)? Yes: \_\_\_\_\_ No: \_\_\_\_\_ Not Required: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_