STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

275-021-13 EQUAL OPPORTUNITY 04/14

NOTIFICATION TO FDOT OF EEO OFFICER

Directions: Email the fully completed and signed form to eeoforms@dot.state.fl.us	
Section 1: COMPANY IDENTIFICATION	
1. Contractor Name:	2. FEID No.:
3. Home Office Mailing Address: (street)	4. Home Office Mailing Address: (city, state, zip)
5. Main Phone Number:	6. Fax Number:
	on Appointed Appointee Changed Name Contact Data Changed
Changed? Yes No Yes	☐ No ☐ Yes ☐ No ☐ Yes ☐ No
Section 2: EEO OFFICER IDENTIFICATION	
8. Name of EEO Officer: (first name, middle initial, last name)	9. EEO Officer's Working Title:
10. Work Address of EEO Officer: (street)	11. Work Address of EEO Officer: (city, state, zip)
12. EEO Officer Phone Number:	13. EEO Officer Fax Number:
14. EEO Officer email address:	
14. EEO Officer email address:	
Section 3: SIGNATURE OF CORPORATE OFFICIAL	
As required in the Equal Employment Opportunity Special Provisions included in Federally Funded Highway Construction Contracts and as required in the Equal Employment Opportunity Requirements included in all State funded highway construction contracts, this official notice of EEO Officer appointment (and/or update) is made to the Florida Department of Transportation and the U.S. Federal Highway Administration (FHWA). I understand that additional Information regarding the EEO Officer, the EEO Policy and other aspects of the construction contract compliance program may be found in the EEO Construction Contract Compliance Workbook.	
15. Appointing Official's Signature:	16. Date: (Mo/Day/Yr.)
17. Official's Name: (printed)	18. Official's Title: (printed)
(This Section For FDOT Use) Section 4: Processing of Notification	
19. Processed by: (First and Last Name)	20. Date Processed: (mo/day/yr)
DISTRIBUTION: Original to FDOT Central EO Office Files; Copy: Mailed to Contractor UPDATE ACTION: Input In EOR System	

State of Florida Department of Transportation EEO Officer Notification

This form is used by contractors to communicate the appointment of an EEO Officer and to provide EEO Officer Contact data. The form is also used to update that information in the event of new appointees, name changes or contact data changes.

Email the fully completed and signed form to: eeoforms@dot.state.fl.us

An email acknowledging that the information has been processed will be issued to the sender.

General: Complete all boxes each time this form is submitted

Section 1: Project Identification

Box 1 Contractor Name – The name of the contractor.

Box 2 FEID No. – The contractor's Federal Identification Number

Box 3 - Home Office Mailing Address (Street) – The contractor's home office street address; if the business' home office is outside of Florida, indicate the address of the Florida Home Office.

Box 4- Home Office Mailing Address (City, State, Zip) – The contractor's home office city, state and zip code; if the business' home office is outside of Florida, indicate the address of the Florida Home Office.

Box 5 Main Phone No. – Area code and phone number contractor's main business phone

Box 6 Fax Number No. – Area code and phone number contractor's main fax

Box 7 What is Being Changed? – Mark 'Yes' or 'No" to indicate if this is the company's initial submission of EEO Officer information; If a new person has been appointed as EEO Officer, If the appointee of record had a name change, and if the appointee's contact data is being updated.

Section 2: EEO Officer Identification

Box 8 Name of EEO Officer – First name, middle initial and last name of EEO Officer

Box 9 EEO Officer's Working Title – Job title if the EEO Officer has other duties (e.g.

Treasurer, Manager of Contract Services, etc)

Box 10 Work Address of EEO Officer (Street) – Address of EEO Officer's office

Box 11 Work Address of EEO Officer (City, State, Zip) – Address of EEO Officer's office

Box 12 EEO Officer Phone Number - Area code and phone number for EEO Officer

Box 13 EEO Officer Fax Number – Area code and fax number for EEO Officer

Box 14 EEO Officer email address – EEO Officer Email address

Section 3: Signature of Corporate Official

Box 15 Appointing Official's Signature – Signature of Company Official responsible for EEO Officer Appointment

Box 16 Date (Mo/Day/Year) – Date appointing official signs this Notification form

Box 17 Official's Name (printed) – Printed first name and last name of person signing Box 15

Box 18 Official's Title (printed) – Printed title of person signing Box 15 (e.g. President, CEO, etc)

Section 4: Processing of Notification

This section is completed by FDOT

Box 19 Processed by – First and last name of person processing the Notification

Box 20 Date Processed – Date processing is completed