



# RENEWAL

## NEW CONTRACT COMPLIANCE EQUAL OPPORTUNITY ASSURANCES

Firm's Name	Trade
Address	City State Zip
Phone	Fax Number
EEO Officer or Contact Person	Project Number and Name
Email Address	

**The undersigned Bidder and/or Recipient of City Tax Incentives or Credits agrees:**

To complete and submit all required affirmative action forms included in this Instructions to Bidders packet or as required by The City of Springfield, Ohio. The undersigned further agrees to fully comply with the provisions of Springfield City Ordinance Chapter 155, as amended.

If additional information is needed, a copy of the ordinance is available upon request.

\_\_\_\_\_  
*Authorized Representative*

\_\_\_\_\_  
*Date*

**CHECK ONE:**

- Submitting new A.A.P.
- Renewing approved A.A.P. on file (See Supplement #2)
- Current A.A.P. Contract # \_\_\_\_\_

Not applicable - Reason:

\*Please note that: **All A.A.P Applications MUST include a CURRENT WORKFORCE BREAKDOWN**, unless otherwise expressed by The City of Springfield. A "Current Total Workforce Breakdown" form is included in this packet (Page 3).

INFORMATION FOR BIDDERS & RECIPIENTS OF CITY TAX INCENTIVES OR CREDITS

SUPPLEMENT #2

**PREVIOUSLY SUBMITTED AFFIRMATIVE ACTION PROGRAMS & BIDDERS OR RECIPIENTS WHOSE PROGRAMS HAVE BEEN APPROVED BY ANOTHER CONTRACTING AGENCY**

**Contractors and recipients of city tax incentives or credits** who have previously submitted **Affirmative Action Programs** to the **City of Springfield, Ohio**, and whose programs were approved by the **Minority Business Coordinator** within six months of the date of this bid or incentive agreement, should update their programs to reflect any changes since submission. These individuals or entities **may forego re-submitting Affirmative Action Programs** with their new bids or incentive applications **for up to six months after approved program expires.**

**Contractors and recipients of city tax incentives or credits** who have filed, or become a signatory to a government-recognized **Affirmative Action Program** in another jurisdiction may comply with the requirements of **Chapter 155 of the City of Springfield's Codified Ordinances** by:

1. Obtaining a certificate from the previous contracting agency verifying that the contractor or recipient is in compliance with their Affirmative Action Program.
2. Submitting both the certificate and a copy of the City of Springfield's Affirmative Action Program to the City's Contracts Compliance Officer for review.

In lieu of re-submitting an Affirmative Action Program, such bidders or recipients should submit a new Current Workforce Breakdown and sign the following statement:

As officer(s) and representative(s) of: \_\_\_\_\_  
(Name of Firm)

We the undersigned, state that we are fully implementing the Affirmative Action Program previously submitted to and approved by the City of Springfield, Ohio.

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

Title: \_\_\_\_\_ Title: \_\_\_\_\_

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

**Questions concerning the City's Equal Employment Opportunity Policy and the required written Affirmative Action Program should be directed to:**

**The City of Springfield  
Minority Business Coordinator  
76 E. High St.  
Springfield, Ohio 45502  
937-324-7379 Office  
937-328-3497 Fax**

# CURRENT TOTAL WORKFORCE BREAKDOWN

NAME AND LOCATION OF FIRM

COVERED AREA OF DATA

Compiled By \_\_\_\_\_

Date \_\_\_\_\_

JOB CATEGORY CLASSIFICATION	1. TOTAL NUMBER OF EMPLOYEES		2. TOTAL NUMBER OF MINORITY EMPLOYEES		3. MINORITY GROUP EMPLOYEES										4. MINORITY PERCENT	5. FEMALE PERCENT		
					A. BLACK (NOT OF HISPANIC ORIGIN)		B. HISPANIC		C. ASIAN OR PACIFICA ISLANDERS		D. AMERICAN INDIAN OR ALASKA NATIVE		E. 2 or More Races					
	M	F	M	F	M	F	M	F	M	F	M	F	M	F				
OFFICERS/MANAGERS																		
PROFESSIONALS																		
TECHNICIANS																		
SALES WORKERS																		
OFFICE/CLERICAL																		
SERVICE WORKERS																		
OTHERS																		
<b>TOTAL</b>																		
<b>TRADE NAME:</b>																		
JOURNEYMAN																		
APPRENTICE																		
TRADESMAN																		
<b>TOTAL</b>																		
<b>TRADE NAME:</b>																		
JOURNEYMAN																		
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<b>TOTAL</b>																		
<b>TRADE NAME:</b>																		
JOURNEYMAN																		
APPRENTICE																		
TRADESMAN																		
<b>TOTAL</b>																		
<b>GRAND TOTAL</b>																		
SPRINGFIELD RESIDENTS																		