



**“Get Listed” Online Business Directory Form**

**Please mail, email, or fax this application to:**  
MWMCA, P.O. Box 29602, Baltimore, Maryland 21216  
Telephone: 443-759-8580 • Fax: 888-609-8318  
E-mail: [info@mwmca.org](mailto:info@mwmca.org); Web site: [www.mwmca.org](http://www.mwmca.org)

Company Name: \_\_\_\_\_

Owner’s Name & Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address (if different from firm’s address): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Company Representative’s Name & Title (will appear on listing): \_\_\_\_\_  
\_\_\_\_\_

E-mail address: \_\_\_\_\_

Website URL: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Ext.: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Cell Number (Optional): \_\_\_\_\_

Number of Years in Business: \_\_\_\_\_

Do you oppose your company’s name in our marketing material? \_\_\_\_ Yes \_\_\_\_ No

**If you would like your company’s logo to appear on your business profile, please e-mail the logo to [info@mwmca.org](mailto:info@mwmca.org). Acceptable File Formats: jpeg (.jpg); tif (.tiff); .psd (Adobe Photoshop); .gif; .eps; .png; .pdf**

What is your business type? **(Check all that applies)**

Service Provider  Supplier  Professional Services

Construction Company (Specify Your Construction Division(s))

Please check (✓) all Construction Division(s) that apply to your company:

Division 01 — General Requirements

Division 02 — Site Construction

Division 03 — Concrete

Division 04 — Masonry

Division 05 — Metals

Division 06 — Wood and Plastics

Division 07 — Thermal and Moisture Protection

Division 08 — Doors and Windows

Division 09 — Finishes

Division 10 — Specialties

Division 11 — Equipment

Division 12 — Furnishings

Division 13 — Special Construction

Division 14 — Conveying Systems

Division 15 — Mechanical

Division 16 — Electrical

Describe all types of work, services, or products performed/provided by your firm:

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NAICS Code Number(s): \_\_\_\_\_

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Minority Status **(Check all that applies and specify the one descriptor that describes your company best):**

African American  Alaska Native Corporation  Asian American Pacific

Hispanic American  Asian American Sub-Continent  Native American

Service Disabled Veteran  Veteran  Female  Non-Profit

Disadvantaged Business Enterprise  Airport Concessions Disadvantage Business Enterprise

HUB Zone  Other \_\_\_\_\_

License(s):

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Certification(s):

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Prequalification(s):

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Professional Affiliation(s):

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Bonding Capacity (Optional):

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Insurance Limit (Optional):

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**If you would like to upload a Capability Statement to your business profile, please email to [info@mwmca.org](mailto:info@mwmca.org) (no more than 3 pages) (PDF/Word format only) (optional):**

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Is there any additional information you desire to have listed on your business profile? (Optional):

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I understand that my business profile listing is a one (1) year commitment. My business profile will begin according to the date my application is received.

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

We will generate a bill to you according to what method of payment you check below:

\_\_\_ **My Bank Account**

\_\_\_ **Charge my online listing to:**



Thank you for “Getting Listed” in MWMCA’s online business directory! For more information and/or details, please call 443-759-8580 or email [info@mwmca.org](mailto:info@mwmca.org).