



## NAMC-WA PPE Request Form

Certificate will be emailed upon submission of this completed form. You will need to present Certificate at time of pick up if you choose that option. PPE distribution is coordinated by National Association of Minority Contractors Washington Chapter. If you need assistance filling out this form, call 206-369-6740 or email [admin@namcwa.com](mailto:admin@namcwa.com). Members only option:  Secure mail  Pick up/drop off

UBI Number\*

Business Name

Owner/Officer Name

Name of Person Picking Up PPE

### Business Information

Office Phone

Email Address

Cell Phone

Business Physical Address

City

State.

ZIP Code

Business Type (select one):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Accommodation/Food Services     | <input type="checkbox"/> Agriculture     | <input type="checkbox"/> Construction/Building Repair                       |
| <input type="checkbox"/> Information Technology          | <input type="checkbox"/> Manufacturing   | <input type="checkbox"/> Medical/Dental <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Real Estate/Property Management | <input type="checkbox"/> Retail          | <input type="checkbox"/> Services   |
| <input type="checkbox"/> Transportation/Logistics        | <input type="checkbox"/> Wholesale Trade | <input type="checkbox"/> Other  |

Number of Employees

Number of Office Locations

PPE Requested (select "Yes")

Yes

No

Yes

No

Disposable, Non-Surgical Masks

No Touch Thermometer (Limit 1)