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|  |  | **Appendix Y - Ohio Department of Transportation - LPA Project DBE Trucking Information** | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |
| **Prime Contractor:** | | | | | | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
| **Project Name (CO/RT/SECT):** | | | | | | |  | **PID:** | |
|  |  |  |  |  |  |  |  |  |  |
| **Trucking Firm Name:** | | | | |  | **Certified DBE (Yes or No)** | | | |
|  |  |  |  |  |  |  |  |  |  |
| **Address:** | | | | |  | **County:** | | | |
|  |  |  |  |  |  |  |  |  |  |
| **Telephone Number:** | | | | |  | **Email Address:** | | | |
|  |  |  |  |  |  |  |  |  |  |
| **Name of Truck Owner (Owner/Operator or Company)** | | | **License Plate Number** | | **Vin Number** | | **Leased Truck (Yes/No)** | **DBE Employee Driver (Yes/No)** | **Ownership/Lease Agreement Submitted (Yes/No)** |
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