



## Capabilities Statement Builder

A capabilities statement is a one-page document that tells potential clients what your business can do and why you're qualified to do it. It's like a business resume that helps people quickly understand if you're the right person for the job.

**Business Name:**

**Email Address:**

**Owner's Name:**

**Business Address:**

**Phone Number:**

**Website:**

**DUNS Number:**

**CAGE Code(s):**

**What are your NAICS code(s) and core service(s)?**

Example: For an electrician: Residential rewiring, panel upgrades, generator installation, code violation fixes.

**How many years have you been in business or working in this trade?**

**Who are some of your current or past clients?**

Example: City of Worcester DPW, local public schools, private homeowners.

**What certifications, licenses, or credentials do you hold? (Check or list all that apply):**

☐ MA Trade License (License #:)

**Disadvantage Business Enterprise (DBE) Certified**

☐ [State of Connecticut](#)

☐ [State of Maine](#)

☐ [State of New Hampshire](#)

☐ [State of Rhode Island](#)

☐ [Disability-Owned Business Enterprise \(DOBE\) Certified](#)

☐ [HubZone Certified](#)

**Minority Business Enterprise (MBE) Certified**

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☐ [National Minority Supplier Development Council](#)

☐ [State of Connecticut](#)

☐ [State of Massachusetts](#)

☐ [State of Rhode Island](#)

**Minority and Woman-Owned Business Enterprise (M/WBE) Certified**

☐ [State of Vermont](#)

☐ **[SBA 8\(a\) Business Development Program](#)**

**Veteran Business Enterprise (VBE) Certified**

☐ [Disabled Veteran-Owned \(V-DOBE\)](#)

☐ [National Veteran-Owned Business Association \(NaVOBA\)](#)

☐ [Service-Disabled Veteran-Owned \(SDV-DOBE\)](#)

☐ [Veteran Small Business Certification \(VetCert\)](#)

**Woman-Owned Business Enterprise (WBE) Certified**

☐ [Economically Disadvantaged Woman-Owned Small Business \(EDWOSB\)](#)

☐ [State of Massachusetts](#)

☐ [State of Rhode Island](#)

☐ [Women's Business Enterprise National Council \(WBENC\)](#)

☐ [Woman-Owned Small Business \(WOSB\)](#)

☐ **OSHA Training**

**Are you insured?**

☐ Yes ☐ No

**Are you bonded?**

☐ Yes ☐ No

**What geographic area do you serve?**

Examples: Greater Boston, MA, RI, NH, Western MA, etc.

*Use this completed document to create your own capability statement on your company's letterhead. [Check out a sample from HHS here!](#) Be sure to reach out to us for feedback before you go live! You can always find us at [info.Regional@CWEonline.org](mailto:info.Regional@CWEonline.org).*

*Love this tool? Thank [Wallace Consulting, LLC!](#)*