

Small Business Enterprise Set-Aside Eligibility

I _____, acting on behalf
(Official's name)
of _____, do hereby
(Company name)
certify and affirm that the information set forth below is true and accurate to the best of my knowledge.

I attest that as of the date of this instrument, the Gross Revenue of this business including any anticipated proceeds from this project (_____), will
Project number
not exceed \$15,000,000 in the company's current fiscal year.

Signature: _____

Date: _____

Title: _____

CONNECTICUT DEPARTMENT OF TRANSPORTATION (CTDOT)

PRE-AWARD SBE COMMITMENT APPROVAL REQUEST

TO BE SUBMITTED WITHIN THE TIME FRAME INDICATED IN THE BID DOCUMENTS

Only certified SBE firms will be approved. The SBE directory is available on the Department of Administrative Service's web site:

<http://www.biznet.ct.gov/SupplierDiversity/SDSearch.aspx>

Sheet of

CDOT Project Number (s): _____

SBE Subcontractor: _____

Town(s) of: _____

Address: _____

Submitted By: _____

Original Bid (\$): _____

Dollar amount subcontracted to this SBE firm (\$): _____

<u>Item Number & Description</u>	<u>Is This item Partial</u> <u>Yes No</u>	<u>Firm Type Code *</u>	<u>Units</u>	<u>Quantity bid by the Prime</u>	<u>Contract Unit Price</u>	<u>Quantity Subcontracted</u>	<u>Subcontract Unit Price **</u>	<u>Total Item price subcontracted</u>
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____

If any of the items above are checked **Yes** as to **Partial**, please provided or use an attachment to offer an explanation of the work involved. Also please identify who is responsible for the remainder of the partial items.

* Firm Type Code: **S** (subcontractor), **M** (manufacturer), **P** (supplier), **T** (trucking), **V** (services)

** In instances where the Prime is paying the Subcontractor a higher unit price than the bid, by submitting this form the Prime agrees to the higher subcontracted price without qadditional costs to the Department.

Signature of Prime Contractor, Title

Date

Signature of Subcontractor, Title

Date

After this submittal is approved by the Department, any proposed changes to it must be submitted to the Department for approval.

Sample of Past Construction Experience

Only include the work within the last 5 years that are relevant to the work performed on this project

CTDOT Project Number: _____

SBE Firm: _____

Project Description and Location	Your Contract Value	The Name of the Owner or the Prime Contractor on the Project/Contact Name and Phone Number	Actual or Estimated Completion Date	overview of items Performed