

State of Connecticut Department of Transportation

# Unified Certification DBE Program Manual Attachments

# ATTACHMENTS

<b><u>Section 1: General Program Information</u></b>		
Attachment 1	Definitions and Terms	Pages 1-8
Attachment 2	DBE Policy Statement	Pages 9-10
Attachment 3	DBE Special Provision	Pages 11-22
Attachment 4	CTDOT Organization Chart	Page 23
Attachment 5	OCC Organization Chart	Page 24
Attachment 6	OCC Staff Directory	Page 25
Attachment 7	CTDOT DBE Supportive Services Statement-Of-Work	Pages 26-31
Attachment 8	CTDOT Small Business Participation Program	Pages 32-34
<b><u>Section 2: Certification Program Information</u></b>		
Attachment 9	UCP Program MOU	Pages 35-38
Attachment 10	DBE Certification Application	Pages 39-58
Attachment 11	No Change Affidavit	Page 59
Attachment 12	Interstate Affidavit	Page 60
<b><u>Section 3: DBE Goal Methodology &amp; Goal Setting</u></b>		
Attachment 13	DBE Goal Methodology	Pages 61-72
Attachment 14	Vendor Profile Document	Pages 73-79
Attachment 15	Screening Committee (Project Goal)	Pages 80-83
<b><u>Section 4: DBE Project Requirements</u></b>		
Attachment 16	Pre-award DBE Review and Approval Forms	Pages 84-85

Attachment 17	Pre-award Good Faith Efforts Application	Pages 86-87
Attachment 18	Post-award Good Faith Effort Procedure	Page 88
Attachment 19	Prompt Payment Process	Page 89
Attachment 20	Guide to Civil Rights Compliance	Pages 90-101
Attachment 21	Good Faith Effort Monthly Update	Page 102
Attachment 22	Subcontractor Approval Request (CLA-12)	Pages 103-106
Attachment 23	Sub-consultant Payment Log	Pages 107-108
Attachment 24	Bi-Monthly Report on DBE Participation	Pages 109-110
Attachment 25	CUF Review Packet	Pages 111-122
Attachment 26	DBE Participation on Engineering Agreements	Pages 123-130
Attachment 27	Project Site Record Review	Pages 131-148
Attachment 28	Compliance Review Packet	Pages 149-170
Attachment 29	Final DBE Participation Form (88-1)	Page 171
Attachment 30	DBE Shortfall Log	Page 172

**DEFINITIONS AND TERMS**

**Affiliation**

Except as otherwise provided in 13 CFR part 121, concerns are affiliates of each other when, either directly or indirectly;

- 1) One concern controls or has the power to control the other; or
- 2) A third party or parties controls or has the power to control both; or
- 3) An identity of interest between or among parties exists such that affiliation may be found.

In determining whether affiliation exists, it is necessary to consider all appropriate factors, including common ownership, common management, and contractual relationships. Affiliates must be considered together in determining whether a concern meets small business size criteria and the statutory cap on the participation of firms in the DBE Program.

**Agreement**

means a legally binding relationship obligating a seller to furnish supplies or services (including, but not limited to, construction and professional services) and the buyer to pay for them. For purposes of this part, a lease is considered to be a contract.

**Alaska Native**

means a citizen of the United States who is a person of one-fourth degree or more Alaskan Indian (including Tsimshian Indians not enrolled in the Metlaktla Indian Community), Eskimo, or Aleut blood, or a combination of those bloodlines. The term includes, in the absence or proof of a minimum blood quantum, any citizen who a Native village or Native group regards as a Alaska Native if their father or mother is regarded as an Alaska Native.

**Airport  
Concession  
Disadvantaged  
Business  
Enterprise  
(ACDBE)**

means a concession that is a for-profit small business concern-

- 1) That is at least 51 percent owned by one or more individuals who are both socially and economically disadvantaged or, in the case of a corporation, in which 51 percent of the stock is owned by one or more such individuals who own it.
- 2) Whose management and daily business operations are controlled By one or more of the socially and economically disadvantaged individuals who own it.

**Alaska Native Corporation (ANC)**

means any Regional Corporation, Village Corporation, Urban Corporation, or Group Corporation organized under the State of Alaska in accordance with the Alaska in accordance with the Alaska Native Claims Settlement Act, as amended (43 U.S.C. 1601, et seq.).

batteries, and automotive accessories. Such establishments also frequently sell pickup trucks and vans at retail. In the standard

**Compliance**

means that a recipient has correctly implemented the requirements of this part.

**Concession**

means one or more of the types of for-profit businesses listed in paragraph (1) or (2) of this definition.

1) A business, located on an airport subject to this part, that is engaged in the sale of consumer goods or services to the public under an agreement with the recipient, another concessionaire, or the owner or lessee of a terminal, if other than the recipient.

2) A business conducting one or more of the following covered activities, even if it does not maintain an office, store, or other business location on an airport subject to this part, as long as the activities take place on the airport: Management contracts and subcontracts, a web-based or other electronic business in a terminal or which passengers can access at the terminal, an advertising business that provides advertising displays or messages to the public on the airport, or a business that provides goods and services to concessionaires.

3) For purposes of this subpart, a business is not considered to be "located on the airport" solely because it picks up and/or delivers customers under a permit, license, or other agreement. For example, providers of taxi, limousine, car rental, or hotel services are not considered to be located on the airport just because they send shuttles onto airport grounds to pick up passengers or drop them off. A business is considered to be "located on the airport," however, if it has an on-airport facility. Such facilities include in the case of a taxi operator, a dispatcher;; in the case of a limousine, a booth selling tickets to the public; in the case of a car rental company, a counter at which its services are sold to the public or a ready return facility; and in the case of a hotel operator, a hotel located anywhere on airport property.

4) any business meeting the definition of concession is covered by this subpart, regardless of the name given to the agreement with the recipient, concessionaire, or airport terminal owner or lessee. A concession may be operated under various types of agreements,

including but not limited to the following: i)Leases, ii)Subleases, iii)Permits, iv)Contracts or subcontracts, v)Other instruments or arrangements.

5) The conduct of an aeronautical activity is not considered a concession for purposes of this subpart. Aeronautical activities include scheduled and non-scheduled air carriers, air taxis, air charters, and air couriers, in their normal passenger or freight carrying capacities; fixed base operators; flight schools; recreational service providers (e.g., sky-diving, parachute jumping, flying guides); and air tour services.

6) Other examples of entities that do not meet the definition of a concession include flight kitchens and in-flight caterers servicing air carriers, government agencies, industrial plants, farm leases, individuals leasing hangar space, custodial and security contracts, telephone and electric service to the airport facility, holding companies, and skycap services under contract with an air carrier or airport.

**Concessionaire** means a firm that owns and controls a concession or a portion of a concession.

**CTDOT** means Connecticut Department of Transportation.

**Contract** means a legally binding relationship obligating a seller to furnish supplies or services (including, but not limited to, construction and professional services) and the buyer to pay for them. For purposes of this part, a lease is considered to be a contract.

**Contractor** means one who participates, through a contract or subcontract in a DOT-assisted highway, transit, or airport program.

**Consultant** means one who participates, through an agreement in a DOT-assisted highway, transit, or airport program.

**Department Or DOT** means the U.S. Department of Transportation, including the Office of the Secretary, the Federal Highway Administration (FHWA), the Federal Transit Administration (FTA), and the Federal Aviation Administration (FAA).

**Disadvantaged Business Enterprise Or DBE** means a for-profit small business concern-

- 1) That is at least 51 percent owned by one or more individuals who are both socially and economically disadvantaged or, in the case of a corporation, in which 51 percent of the stock is owned by one or more such individuals; and

- 2) Whose management and daily business operations are controlled by one or more of the socially and economically disadvantaged individuals who own it.

**DOT-assisted Contract**

means any contract between a recipient and a contractor (at any tier) funded in whole or in part with DOT financial assistance, including letters of credit or loan guarantees, except a contract solely for the purchase of land.

**Good Faith Efforts**

means efforts to achieve a DBE goal or ACDBE goal or other requirement of this part which, by their scope, intensity, and appropriateness to the objective, can reasonably be expected to fulfill the program requirement.

**Home State**

the state in which a DBE firm or applicant for DBE certification maintains its principal place of business.

**Immediate Family Member**

means father, mother, husband, wife, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, mother-in-law, or father-in-law, sister-in-law, brother-in-law and domestic partner and civil unions recognized under State law.

**Indian Tribe**

means any Indian tribe, band, nation, or other organized group or community of Indians, including any ANC, which is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians, or is recognized as such by the State in which the Tribe, band, nation, group, or community resides.

**Joint Venture**

means an association of a DBE or ACDBE firm and one or more other firms to carry out a single, for-profit business enterprise, for which the parties combine their property, capital, efforts, skills and knowledge, and in which the DBE or ACDBE is responsible for distinct, clearly defined portion of the work of the contract and whose share in the capital contribution, control, management, risks, and profits of the joint venture are commensurate with its ownership interest. Joint venture entities are not certified as ACDBEs.

**Large Hub Primary Airport**

means a commercial service airport that has a number of passenger boardings equal to at least one percent of all passenger boardings in the United States.

**Management Contract or Subcontract**

means an agreement with a recipient or another management contractor under which a firm directs or operates one or more business activities, the assets of which are owned, leased, or otherwise controlled by the recipient. The managing agent generally receives, as compensation, a flat fee or a percentage of the gross receipts or profit from the business activity. For purposes of this subpart, the business activity operated or directed by the managing agent must be other than an aeronautical activity, be located at an airport subject to this subpart, and be engaged in the sale of consumer goods or provision of services to the public.

**Medium Hub Primary Airport**

means a commercial service airport that has a number of passenger boardings equal to at least 0.25 percent of all passenger boardings in the United States but less than one percent of such passenger boardings.

**Native Hawaiian**

means any individual whose ancestors were natives prior to 1778, of the area which now comprises the State of Hawaii.

**Native Hawaiian Organization**

means any community service organization serving Native Hawaiians in the State of Hawaii which is not-for-profit organization chartered by the State of Hawaii, is controlled by Native Hawaiians, and whose business activities will principally benefit such Native Hawaiians.

**Noncompliance**

means that a recipient has not correctly implemented the requirements of this part.

**Operating Administration**

or OA means any of the following parts of DOT: the Federal Aviation Administration (FAA), Federal Highway Administration (FHWA), and Federal Transit Administration (FTA). The "Administrator" of an operating administration includes his or her designees.

**Personal Net Worth**

means the net value of the assets of an individual remaining after total liabilities are deducted. An individual's personal net Worth does not include: The individual's equity in his or her primary place of residence. An individual's personal net worth includes only his or her own share of assets held jointly or as community property with the individual's spouse.



In the case of an ACDBE an individual's personal net worth does not include the following: The individual's ownership interest in an ACDBE firm or a firm that is applying for ACDBE certification; and other assets that an individual can document are necessary to obtain financing or a franchise agreement for the initiation or expansion of his or her ACDBE firm (or have in fact been encumbered to support existing financing for the individual's ACDBE business), to a maximum of \$3 million.

**Primary Industry Classification**

means the North American Industrial Classification System (NAICS) designation which best describes the primary business of a firm. The NAICS is described in the North American Industry Classification Manual – United States, 1997 which is available from the National Technical Information Service, 5285 Port Royal Road, Springfield, VA, 22161; by calling 1 (800) 553-6847; or via the Internet at <http://www.ntis.gov/product/naics/htm>.

**Primary Recipient**

means a recipient which receives DOT financial assistance and passes some or all of it on to another recipient.

**Principal Place of Business**

means the business location where the individuals who manage the firm's day-to-day operations spend most working hours and where top management's business records are kept. If the offices from Management is directed and where business records are kept are in different locations, the recipient will determine the principal place of business for DBE and ACDBE program purposes.

**Program**

means any undertaking on a recipient's part to use DOT financial assistance, authorized by the laws to which this part applies.

**Race-conscious**

measure or program is one that is focused specifically on assisting only DBEs or ACDBEs, including women-owned DBEs and ACDBEs.

**Race-neutral**

means a measure or program is one that is, or can be, used to assist all small businesses, without making distinctions or classifications on the basis or race or gender.

**Recipient**

is any entity, public or private, to which DOT financial assistance is extended, whether directly or through the programs of the FAA, FHWA, or FTA, or who has applied for such assistance.

**SBA certified firm**

refers to firms that have a current, valid certification from or recognized by the SBA under the 8(a) BD or SDB programs.

**Secretary**

means the Secretary of Transportation or his/her designee.

- Set-aside** means a contracting practice restricting eligibility for the competitive award of a contract solely to DBE or ACDBE firms.
- Small Business Administration or SBA** means the United States Small Business Administration.
- Small Business Concern** means with respect to firms seeking to participate as ACDBEs, a for profit business that does not exceed the size standards of 49 CFR Part 23.33.
- means, with respect to firms seeking to participate as DBEs in DOT-assisted contracts, a small business concern as defined pursuant to section 3 of the Small Business Act and Small Business Administration regulations implementing it (13 CFR part 121) that also does not exceed the cap on average annual gross receipts specified in 26.65(b).
- Small Hub Airport** means a publicly owned commercial service airport that has a number of passenger boardings equal to at least 0.05 percent of all passenger boardings in the United States but less than 0.25 percent of such passenger boardings.
- Socially and Economically Disadvantaged individual** means any individual who is a citizen (or lawfully admitted permanent resident) of the United States and who is-
- 1) Any individual who a recipient finds to be a socially and economically disadvantaged individual on a case-by-case basis.
  - 2) Any individual in the following groups, members of which are rebuttably presumed to be socially and economically disadvantaged: "*Black Americans*," which includes persons having origins in any of the Black racial groups of Africa; "*Hispanic Americans*," which includes persons of Mexican, Puerto Rican Cuban, Dominican, Central or South American, or other Spanish or Portuguese culture or origin, regardless of race; "*Native Americans*," which includes persons who are American Indians, Eskimos, Aleuts, or Native Hawaiians; "*Asian-Pacific Americans*." Which includes persons whose origins are from Japan, China, Taiwan, Korea, Burma (Myanmar), Vietnam, Laos, Cambodia (Kampuchea), Thailand, Malaysia, Indonesia, the Philippines, Brunei, Samoa, Guam, the U.S. Trust Territories of the Pacific Islands (Republic of Palau), the Commonwealth of the Northern Marianas Islands, Macao, Fiji, Tonga, Kiribati, Juvalu, Nauru, Federated States of Micronesia, or Hong Kong; "*Subcontinent Asian Americans*," which includes persons whose origins are from India,

Pakistan, Bangladesh, Bhutan, the Maldives Islands, Nepal or Sri Lanka; "Women"; "Other," any additional groups whose members are designated as socially and economically disadvantaged by SBA, at such time as the SBA designation becomes effective.

Any additional groups whose members are designated as socially and economically disadvantaged by the SBA, at such time as the SBA designation becomes effective.

Being born in a particular country does not, standing alone, mean that a person is necessarily a member of one of the groups listed in this definition.

**Tribally-owned concern**

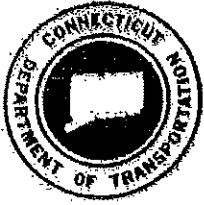
means any concern at least 51 percent owned by an Indian tribe as defined in this section.

**TVM**

Transit vehicle manufacturer whose primary business purpose is to manufacture vehicles specifically built for public mass transportation. Such vehicles include, but are not limited to: Buses, rail cars, trolleys, ferries, and vehicles manufactured specifically for paratransit purposes. Producers of vehicles that receive post-production alterations or retrofitting to be used for public transportation purposes (e.g., so-called cutaway vehicles, vans customized for service to people with disabilities) are also considered transit vehicle manufacturers. Businesses that manufacture, mass-produce, or distribute vehicles solely for personal use and for sale "off the lot" are not considered transit vehicle manufacturers.

**You**

refers to a recipient, unless a statement in the text of this part or the context requires otherwise.



# CONNECTICUT DEPARTMENT OF TRANSPORTATION

## POLICY STATEMENT

POLICY NO. EX.O.30  
May 11, 2016

SUBJECT: Disadvantaged Business Enterprise Program

The Connecticut Department of Transportation (CTDOT) has established a Disadvantaged Business Enterprise (DBE) Program in accordance with the regulations of the United States Department of Transportation (USDOT), 49 CFR Part 26. CTDOT has received Federal financial assistance from the USDOT, and as a condition of receiving this assistance, CTDOT has signed an assurance that it will comply with 49 CFR Part 26.

It is the policy of CTDOT to ensure that DBEs as defined in Part 26, have an equal opportunity to receive and participate in USDOT assisted contracts.

It is the policy of CTDOT to:

- a) Ensure nondiscrimination in the award and administration of USDOT-assisted contracts in the CTDOT's highway and transit financial assistance programs;
- b) Create a level playing field on which DBEs can compete fairly for USDOT-assisted contracts;
- c) To ensure that CTDOT's DBE Program is narrowly tailored in accordance with applicable law;
- d) Ensure that only firms which fully meet this part's eligibility standards are permitted to participate as DBEs;
- e) Help remove barriers to the participation of DBEs in USDOT-assisted contracts; and
- f) Assist with the development of firms that can compete successfully in the marketplace outside the DBE Program.

CTDOT will not exclude any person from participation in, deny any person the benefits of, or otherwise discriminate against anyone in connection with the award and performance of any contract. CTDOT shall not discriminate on the basis of race, color, national origin, or sex in the award and performance of any USDOT-assisted contract, or in the administration of its DBE Program, or the requirements of 49 CFR Part 26. CTDOT shall take all necessary and reasonable steps under 49 CFR Part 26 to ensure nondiscrimination in the award and administration of USDOT-assisted contracts.

In administering the DBE Program, CTDOT will not directly or through contractual or other arrangements, use criteria or methods of administration that have the effect of defeating or substantially impairing the

accomplishment of the objectives of the DBE Program with respect to individuals of a particular race, color, sex, or national origin.

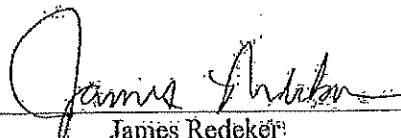
No contractor, subrecipient, or subcontractor shall discriminate on the basis of race, color, national origin, or sex in the performance on any USDOT-assisted contract. Contractors shall carry out the applicable requirements of 49 CFR Part 26 in the award and administration of USDOT-assisted contracts. Failure by the contractor to carry out these requirements will result in a material breach of the contract, which may result in the termination of the contract or such other remedy, as the recipient deems appropriate.

Implementation of this program is a legal obligation, and failure to carry out its terms shall be treated as a violation of the agreement. The USDOT may take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, against any participant in the DBE Program whose conduct is subject to such action. The USDOT may refer to the United States Department of Justice, for prosecution under 18 United States Code (USC) 1001 or other applicable provisions of law, any person who makes a false or fraudulent statement in connection with participation of a DBE in any USDOT-assisted program or otherwise violates applicable Federal statutes.

Ms. Debra Goss, the Manager of the Office Contract Compliance has been designated as CTDOT's DBE Liaison Officer. In that capacity, Ms. Goss is responsible for implementing all aspects of the DBE Program. Implementation of the DBE Program is accorded the same priority as compliance with all other legal obligations incurred by the CTDOT in its financial agreements with the USDOT.

This DBE policy statement is distributed to all CTDOT managers and is posted on the CTDOT website. CTDOT has distributed this statement by email to the DBE and non-DBE business communities that perform work for CTDOT on USDOT-assisted contracts.

(This Policy Statement supersedes Policy Statement No. EX.O-30 dated April 10, 2013).



James Redeker  
Commissioner

D.B.E. SUBCONTRACTORS AND MATERIAL SUPPLIERS OR  
MANUFACTURERS

January 2013

I. ABBREVIATIONS AND DEFINITIONS AS USED IN THIS SPECIAL PROVISION

A. *CTDOT* means the Connecticut Department of Transportation.

B. *USDOT* means the U.S. Department of Transportation, including the Office of the Secretary, the Federal Highway Administration ("FHWA"), the Federal Transit Administration ("FTA"), and the Federal Aviation Administration ("FAA").

C. *Broker* means a party acting as an agent for others in negotiating Contracts, Agreements, purchases, sales, etc., in return for a fee or commission.

D. *Contract, Agreement or Subcontract* means a legally binding relationship obligating a seller to furnish supplies or services (including but not limited to, construction and professional services) and the buyer to pay for them. For the purposes of this provision, a lease for equipment or products is also considered to be a Contract.

E. *Contractor* means a consultant, second party or any other entity under Contract to do business with CTDOT or, as the context may require, with another Contractor.

F. *Disadvantaged Business Enterprise ("DBE")* means a for profit small business concern:

1. That is at least 51 percent owned by one or more individuals who are both socially and economically disadvantaged or, in the case of a corporation, in which 51 percent of the stock is owned by one or more such individuals; and
2. Whose management and daily business operations are controlled by one or more of the socially and economically disadvantaged individuals who own it; and
3. Certified by CTDOT under Title 49 of the Code of Federal Regulations, Part 26, (Title 49 CFR Part 23 of the Code of Federal Regulations for Participation of Disadvantaged Business Enterprise in Airport Concessions)

G. *USDOT-assisted Contract* means any Contract between CTDOT and a Contractor (at any tier) funded in whole or in part with USDOT financial assistance.

H. *Good Faith Efforts ("GFE")* means all necessary and reasonable steps to achieve a DBE goal or other requirement which by their scope, intensity, and appropriateness to the objective, can reasonably be expected to fulfill the program requirement.

I. *Small Business Concern* means, with respect to firms seeking to participate as DBEs in USDOT-assisted Contracts, a small business concern as defined pursuant to Section 3 of the Small Business Act and Small Business Administration ("SBA") regulations implementing it (13 CFR Part 121) that also does not exceed the cap on average annual gross receipts in 49 CFR Part 26, Section 26.65(b).

J. *Socially and Economically Disadvantaged Individual* means any individual who is a citizen (or lawfully admitted permanent resident) of the United States and who is:

1. Any individual who CTDOT finds, on a case-by-case basis, to be a socially and economically disadvantaged individual.
2. Any individuals in the following groups, members of which are rebuttably presumed to be socially and economically disadvantaged:
  - “Black Americans”, which includes persons having origins in any of the Black racial groups of Africa;
  - “Hispanic Americans”, which includes persons of Mexican, Puerto Rican, Cuban, Dominican, Central or South American, or other Spanish or Portuguese culture or origin, regardless of race;
  - “Native Americans”, which includes persons who are American Indians, Eskimos, Aleuts, or Native Hawaiians.
  - “Asian-Pacific Americans”, which includes persons whose origins are from Japan, China, Taiwan, Korea, Burma (Myanmar), Vietnam, Laos, Cambodia (Kampuchea), Thailand, Malaysia, Indonesia, the Philippines, Brunei, Samoa, Guam, the U.S. Trust Territories of the Pacific Islands (Republic of Palau), the Commonwealth of the Northern Marianas Islands, Macao, Fiji, Tonga, Kiribati, Juvalu, Nauru, or Federated States of Micronesia;
  - “Subcontinent Asian Americans”, which includes persons whose origins are from India, Pakistan, Bangladesh, Bhutan, the Maldives Islands, Nepal or Sri Lanka;
  - Women;
  - Any additional groups whose members are designated as socially and economically disadvantaged by the SBA, at such time as the SBA designation becomes effective.

K. *Commercially Useful Function (“CUF”)* means the DBE is responsible for the execution of the work of the contract and is carrying out its responsibilities by actually performing, managing, and supervising the work involved with its own forces and equipment. The DBE must be responsible for procuring, determining quantity, negotiating price, determining quality and paying for all materials (where applicable) associated with their work. The DBE must also perform at least 30% of the total cost of its contract with its own workforce.

## **II. ADMINISTRATIVE REQUIREMENTS**

### **A. General Requirements**

A DBE goal percentage equaling \_\_\_\_\_ percent (%) of the Contract value has been established for this Contract. This DBE goal percentage will be applied to the final Contract value to ultimately determine the required DBE goal. If additional work is required, DBE firms should be provided the appropriate opportunities to achieve the required DBE goal.

In order to receive credit toward the Contract DBE goal, the firms utilized as DBE subcontractors or suppliers must be certified as DBEs in the type of work to be counted for credit by CTDOT’s Office of Contract Compliance prior to the date of the execution of the subcontract. Neither CTDOT nor the State of Connecticut’s Unified Certification Program (UCP) makes any representation as to any DBE’s technical or financial ability to perform the work. Prime contractors are solely responsible for performing due diligence in hiring DBE subcontractors.

All DBEs shall perform a CUF for the work that is assigned to them. The Contractor shall monitor and ensure that the DBE is in compliance with this requirement. The Connecticut DBE UPC Directory of certified firms can

be found on the CTDOT website <http://www.ct.gov/dot>. The directory lists certified DBE firms with a description of services that they are certified to perform. Only work identified in this listing may be counted towards the project's DBE goal. A DBE firm may request to have services added at any time by contacting CTDOT's Office of Contract Compliance. No credit shall be counted for any DBE firm found not to be performing a CUF.

Once a Contract is awarded, all DBEs that were listed on the pre-award DBE commitment document must be utilized. The Contractor is obligated to provide the value and items of the work originally established in the pre-award documentation to the DBE firms listed in the pre-award documentation. Any modifications to the pre-award commitment must follow the procedure established in Section II-C.

The Contractor shall designate a liaison officer who will administer the Contractor's DBE program. Upon execution of this Contract, the name of the liaison officer shall be furnished in writing to CTDOT's unit administering the Contract, CTDOT's Office of Contract Compliance and CTDOT's Office of Construction ("OOC"). Contact information for the designated liaison officer shall be furnished no later than the scheduled date for the pre-construction meeting.

**The Contractor shall submit a bi-monthly report to the appropriate CTDOT unit administering the Contract. This report shall indicate what work has been performed to date, with the dollars paid and percentage of DBE goal completed.**

**Verified payments made to DBEs shall be included in this bi-monthly report. A sample form is included on the CTDOT website.**

In addition, the report shall include:

1. A projected time frame of when the remaining work is to be completed for each DBE.
2. A statement by the Contractor either confirming that the approved DBEs are on schedule to meet the Contract goal, or that the Contractor is actively pursuing a GFE.
3. If retainage is specified in the Contract specifications, then a statement of certification that the subcontractors' retainage is being released in accordance with 1.08.01 (Revised or supplemented).

Failure by the Contractor to provide the required reports may result in CTDOT withholding an amount equal to one percent (1%) of the monthly estimate until the required documentation is received.

The Contractor shall receive DBE credit when a DBE, or any combination of DBEs, perform work under the Contract in accordance with this specification.

Only work actually performed by and/or services provided by DBEs which are certified for such work and/or services, as verified by CTDOT, can be counted toward the DBE goal. Supplies and equipment a DBE purchases or leases from the Contractor or its affiliate cannot be counted toward the goal.

Monitoring of the CUF will occur by CTDOT throughout the life of the project. If it is unclear that the DBE is performing the work specified in its subcontract with the prime Contractor, further review may be required. If it is determined that the DBE is not performing a CUF, then the work performed by that DBE will not be counted towards the DBE goal percentage.



## **B. Subcontract Requirements**

The Contractor shall submit to CTDOT's OOC all requests for subcontractor approvals on the standard CLA-12 forms provided by CTDOT. The dollar amount and items of work identified on the CLA-12 form must, at minimum, equal the dollar value submitted in the pre-award commitment. CLA-12 forms can be found at <http://www.ct.gov/dot/construction> under the "Subcontractor Approval" section. All DBE subcontractors must be identified on the CLA-12 form, regardless of whether they are being utilized to meet a Contract goal percentage. A copy of the legal Contract between the Contractor and the DBE subcontractor/supplier, a copy of the Title VI Contractor Assurances and a copy of the Required Contract Provision for Federal Aid Construction Contracts (Form FHWA-1273) (Federal Highway Administration projects only) must be submitted along with a request for subcontractor approval. These attachments cannot be substituted by reference.

If retainage is specified in the Contract specifications, then the subcontract agreement must contain a prompt payment mechanism that acts in accordance with Article 1.08.01 (Revised or supplemented).

If the Contract specifications do not contain a retainage clause, the Contractor shall not include a retainage clause in any subcontract agreement, and in this case, if a Contractor does include a retainage clause, it shall be deemed unenforceable.

In addition, the following documents are to be included with the CLA-12, if applicable:

- An explanation indicating who will purchase material.
- A statement explaining any method or arrangement for utilization of the Contractor's equipment.

The subcontract must show items of work to be performed, unit prices and, if a partial item, the work involved by all parties. If the subcontract items of work or unit prices are modified, the procedure established in Section II-C must be followed.

Should a DBE subcontractor further sublet items of work assigned to it, only lower tier subcontractors who are certified as a DBE firm will be counted toward the DBE goal. If the lower tier subcontractor is a non-DBE firm, the value of the work performed by that firm will not be counted as credit toward the DBE goal.

The use of joint checks between a DBE firm and the Contractor is acceptable, provided that written approval is received from the OOC prior to the issuance of any joint check. Should it become necessary to issue a joint check between the DBE firm and the Contractor to purchase materials, the DBE firm must be responsible for negotiating the cost, determining the quality and quantity, ordering the material and installing (where applicable), and administering the payment to the supplier. The Contractor should not make payment directly to suppliers.

Each subcontract the Contractor signs with a subcontractor must contain the following assurance:

"The subcontractor/supplier/manufacturer shall not discriminate on the basis of race, color, national origin, or sex in the performance of this contract. The contractor shall carry out applicable requirements of 49 CFR Part 26 in the award and administration of DOT-assisted contracts. Failure by the contractor/subcontractor/supplier/manufacturer to carry out these requirements is a material breach of this contract, which may result in the termination of this contract or such other remedy as the recipient deems appropriate."

## **C. Modification to Pre-Award Commitment**

Contractors may not terminate for convenience any DBE subcontractor or supplier that was listed on the pre-award DBE commitment without prior written approval of the OOC. This includes, but is not limited to, instances

in which a Contractor seeks to perform work originally designated for a DBE subcontractor with its own forces or those of an affiliate, a non-DBE firm, or with another DBE firm. Prior to approval, the Contractor must demonstrate to the satisfaction of the OOC, that it has good cause, as found in 49CFR Part 26.53 (f)(3), for termination of the DBE firm.

Before transmitting its request for approval to terminate pre-award DBE firms to the OOC, the Contractor must give written notice to the DBE subcontractor and include a copy to the OOC of its notice to terminate and/or substitute, and the reason for the notice.

The Contractor must provide five (5) days for the affected DBE firm to respond. This affords the DBE firm the opportunity to advise the OOC and the Contractor of any reasons why it objects to the termination of its subcontract and why the OOC should not approve the Contractor's action.

Once the Contract is awarded, should there be any amendments or modifications of the approved pre-award DBE submission other than termination of a DBE firm, the Contractor shall follow the procedure below that best meets the criteria associated with the reason for modification:

1. If the change is due to a scope of work revision or non-routine quantity revision by CTDOT, the Contractor must notify CTDOT's OOC in writing or via electronic mail that their DBE participation on the project may be impacted as soon as they are aware of the change. In this case, a release of work from the DBE firm may not be required; however the Contractor must concurrently notify the DBE firm in writing, and copy the OOC for inclusion in the project DBE file. This does not relieve the Contractor of its obligation to meet the Contract specified DBE goal, or of any other responsibility found in this specification.
2. If the change is due to a factor other than a CTDOT directive, a request for approval in writing or via electronic mail of the modification from the OOC must be submitted, along with an explanation of the change(s), prior to the commencement of work. The Contractor must also obtain a letter of release from the originally named DBE indicating their concurrence with the change, and the reason(s) for their inability to perform the work. In the event a release cannot be obtained, the Contractor must document all efforts made to obtain it.
3. In the event a DBE firm that was listed in the pre-award documents is **unable** or **unwilling** to perform the work assigned, the Contractor shall:
  - Notify the OOC Division Chief immediately and make efforts to obtain a release of work from the firm.
  - Submit documentation that will provide a basis for the change to the OOC for review and approval prior to the implementation of the change.
  - Use the DBE Directory to identify and contact firms certified to perform the type of work that was assigned to the unable or unwilling DBE firm. The Contractor should also contact CTDOT's Office of Contract Compliance for assistance in locating additional DBE firms to the extent needed to meet the contract goal.

Should a DBE subcontractor be terminated or fail to complete work on the Contract for any reason, the Contractor must make a GFE to find another DBE subcontractor to substitute for the original DBE. The DBE replacement shall be given every opportunity to perform at least the same amount of work under the Contract as the original DBE subcontractor.

If the Contractor is unable to find a DBE replacement:

- The Contractor should identify other contracting opportunities and solicit DBE firms in an effort to meet the Contract DBE goal requirement, if necessary, and provide documentation to support a GFE. (Refer to GFE in Section III.)
- The Contractor must demonstrate that the originally named DBE, who is unable or unwilling to perform the work assigned, is in default of its subcontract, or identify other issues that affected the DBE firm's ability to perform the assigned work. **The Contractor's ability to negotiate a more advantageous agreement with another subcontractor is not a valid basis for change.**

### III. GOOD FAITH EFFORTS

The DBE goal is **NOT** reduced or waived for projects where the Contractor receives a Pre-Award GFE determination from the Office of Contract Compliance prior to the award of the Contract. It remains the responsibility of the Contractor to make a continuing GFE to achieve the specified Contract DBE goal. The Contractor shall pursue every available opportunity to obtain additional DBE firms and document all efforts made in such attempts.

At the completion of all Contract work, the Contractor shall submit a final report to CTDOT's unit administering the Contract indicating the work done by and the dollars paid to DBEs. Only verified payments made to DBEs performing a CUF will be counted towards the Contract goal.

Goal attainment is based on the total Contract value, which includes all construction orders created during the Contract. If the Contractor does not achieve the specified Contract goal for DBE participation or has not provided the value of work to the DBE firms originally committed to in the pre-award submission, the Contractor shall submit documentation to CTDOT's unit administering the Contract detailing the GFE made during the performance of the Contract to satisfy the goal.

A GFE should consist of the following, where applicable (CTDOT reserves the right to request additional information):

1. A detailed statement of the efforts made to replace an unable or unwilling DBE firm, and a description of any additional subcontracting opportunities that were identified and offered to DBE firms in order to increase the likelihood of achieving the stated goal.
2. A detailed statement, including documentation of the efforts made to contact and solicit bids from certified DBEs, including the names, addresses, and telephone numbers of each DBE firm contacted; the date of contact and a description of the information provided to each DBE regarding the scope of services and anticipated time schedule of work items proposed to be subcontracted and the response from firms contacted.
3. Provide a detailed explanation for each DBE that submitted a subcontract proposal which the Contractor considered to be unacceptable stating the reason(s) for this conclusion.
4. Provide documentation, if any, to support contacts made with CTDOT requesting assistance in satisfying the specified Contract goal.

5. Provide documentation of all other efforts undertaken by the Contractor to meet the defined goal. Additional documentation of efforts made to obtain DBE firms may include but will not be limited to:
  - Negotiations held in good faith with interested DBE firms, not rejecting them without sound reasons.
  - Written notice provided to a reasonable number of specific DBE firms in sufficient time to allow effective participation.
  - Those portions of work that could be performed by readily available DBE firms.

**In instances where the Contractor can adequately document or substantiate its GFE and compliance with other DBE Program requirements, the Contractor will have satisfied the DBE requirement and no administrative remedies will be imposed.**

#### **IV. PROJECT COMPLETION**

At the completion of all Contract work, the Contractor shall:

1. Submit a final report to CTDOT's unit administering the Contract indicating the work done by, and the dollars paid to DBEs.
2. Submit verified payments made to all DBE subcontractors for the work that was completed.
3. Submit documentation detailing any changes to the DBE pre-award subcontractors that have not met the original DBE pre-award commitment, including copies of the Department's approvals of those changes.
4. Retain all records for a period of three (3) years following acceptance by CTDOT of the Contract and those records shall be available at reasonable times and places for inspection by authorized representatives of CTDOT and Federal agencies. If any litigation, claim, or audit is started before the expiration of the three (3) year period, the records shall be retained until all litigation, claims, or audit findings involving the records are resolved.

If the Contractor does not achieve the specified Contract goal for DBE participation in addition to meeting the dollar value committed to the DBE subcontractors identified in the pre-award commitment, the Contractor shall submit documentation to CTDOT's unit administering the Contract detailing the GFE made during the performance of the Contract to satisfy the goal.

#### **V. SHORTFALLS**

##### **A. Failure to meet DBE goals**

**As specified in (II-A) above, attainment of the Contract DBE goal is based on the final Contract value. The Contractor is expected to achieve the amount of DBE participation originally committed to at the time of award; however, additional efforts must be made to provide opportunities to DBE firms in the event a Contract's original value is increased during the life of the Contract.**

The Contractor is expected to utilize the DBE subcontractors originally committed in the DBE pre-award documentation for the work and dollar value that was originally assigned.

If a DBE is terminated or is unable or unwilling to complete its work on a Contract, the Contractor shall make a GFE to replace that DBE with another certified DBE to meet the Contract goal.

The Contractor shall immediately notify the OOC of the DBE's inability or unwillingness to perform, and provide reasonable documentation and make efforts to obtain a release of work from the firm.

If the Contractor is unable to find a DBE replacement, then the Contractor should identify other contracting opportunities and solicit DBE firms in an effort to meet the Contract DBE goal requirement, if necessary, and provide documentation to support a GFE.

When a DBE is unable or unwilling to perform, or is terminated for just cause, the Contractor shall make a GFE to find other DBE opportunities to increase DBE participation to the extent necessary to at least satisfy the Contract goal.

For any DBE pre-award subcontractor that has been released appropriately from the project, no remedy will be assessed, provided that the Contractor has met the criteria described in Section II-C.

#### **B. Administrative Remedies for Non-Compliance:**

In cases where the Contractor has failed to meet the Contract specified DBE goal or the DBE pre-award commitment, and where no GFE has been demonstrated, then one or more of the following administrative remedies will be applied:

1. A reduction in Contract payments to the Contractor as determined by CTDOT, not to exceed the shortfall amount of the **DBE goal**. The maximum shortfall will be calculated by multiplying the Contract DBE goal (adjusted by any applicable GFE) by the final Contract value, and subtracting any verified final payments made to DBE firms by the Contractor.
2. A reduction in Contract payments to the Contractor determined by CTDOT, not to exceed the shortfall amount of the **pre-award commitment**. The maximum shortfall will be calculated by subtracting any verified final payments made by the Contractor to each DBE subcontractor from the amount originally committed to that subcontractor in the pre-award commitment.
3. A reduction in Contract payments to the Contractor determined by CTDOT for any pre-award DBE subcontractor who has not obtained the dollar value of work identified in the DBE pre-award commitment and has not followed the requirements of Section II-C or for any DBE firm submitted for DBE credit that has not performed a CUF.
4. The Contractor being required to submit a written DBE Program Corrective Action Plan to CTDOT for review and approval, which is aimed at ensuring compliance on future projects.
5. The Contractor being required to attend a Non-Responsibility Meeting on the next contract where it is the apparent low bidder.
6. The Contractor being suspended from bidding on contracts for a period not to exceed six (6) months.

## VI. CLASSIFICATIONS OTHER THAN SUBCONTRACTORS

### **A. Material Manufacturers**

Credit for DBE manufacturers is 100% of the value of the manufactured product. A manufacturer is a firm that operates or maintains a factory or establishment that produces on the premises the materials or supplies obtained by the Contractor.

If the Contractor elects to utilize a DBE manufacturer to satisfy a portion of, or the entire specified DBE goal, the Contractor must provide the OOC with:

- Subcontractor Approval Form (CLA-12) indicating the firm designation,
- An executed "Affidavit for the Utilization of Material Suppliers or Manufacturers" (sample attached), and
- Substantiation of payments made to the supplier or manufacturer for materials used on the project.

### **B. Material Suppliers (Dealers)**

Credit for DBE dealers/suppliers is limited to 60% of the value of the material to be supplied, provided such material is obtained from an approved DBE dealer/supplier.

In order for a firm to be considered a regular dealer, the firm must own, operate, or maintain a store, warehouse, or other establishment in which the materials, supplies, articles or equipment of the general character described by the specifications and required under the contract are bought, kept in stock, and regularly sold or leased to the public in the usual course of business. At least one of the following criteria must apply:

- To be a regular dealer, the firm must be an established, regular business that engages, as its principal business and under its own name, in the purchase and sale or lease of the products in question.
- A person may be a regular dealer in such bulk items as petroleum products, steel, cement, gravel, stone, or asphalt without owning, operating or maintaining a place of business if the person both owns and operates distribution equipment for the products. Any supplementing of the regular dealers' own distribution equipment shall be by long term lease agreement, and not on an ad hoc or contract to contract basis.
- Packagers, brokers, manufacturers' representatives, or other persons who arrange or expedite transactions are not regular dealers within the meaning of this paragraph.

If the Contractor elects to utilize a DBE supplier to satisfy a portion or the entire specified DBE goal, the Contractor must provide the OOC with:

- Subcontractor Approval Form (CLA-12) indicating the firm designation,
- An executed "Affidavit for the Utilization of Material Suppliers or Manufacturers" (sample attached), and
- Substantiation of payments made to the supplier or manufacturer for materials used on the project.

### **C. Brokering**

- Brokering of work for DBE firms who have been listed by the Department as certified brokers is allowed. Credit for those firms shall be applied following the procedures in Section VI-D.
- Brokering of work by DBEs who have been approved to perform subcontract work with their own workforce and equipment is not allowed, and is a Contract violation.

- Firms involved in the brokering of work, whether they are DBEs and/or majority firms who engage in willful falsification, distortion or misrepresentation with respect to any facts related to the project shall be referred to the U.S. DOT, Office of the Inspector General for prosecution under Title 18, U.S. Code, Part I, Chapter 47, Section 1020.

#### **D. Non-Manufacturing or Non-Supplier DBE Credit**

Contractors may count towards their DBE goals the following expenditures with DBEs that are not manufacturers or suppliers:

- Reasonable fees or commissions charged for providing a bona fide service such as professional, technical, consultant or managerial services and assistance in the procurement of essential personnel, facilities, equipment materials or supplies necessary for the performance of the Contract, provided that the fee or commission is determined by the OOC to be reasonable and consistent with fees customarily allowed for similar services.
- The fees charged only for delivery of materials and supplies required on a job site when the hauler, trucker, or delivery service is a DBE, and not the manufacturer, or regular dealer of the materials and supplies, and provided that the fees are determined by the OOC to be reasonable and not excessive as compared with fees customarily allowed for similar services.
- The fees or commissions charged for providing bonds or insurance specifically required for the performance of the Contract, provided that the fees or commissions are determined by CTDOT to be reasonable and not excessive as compared with fees customarily allowed for similar services.

#### **E. Trucking**

While technically still considered a subcontractor, the rules for counting credit for DBE trucking firms are as follows:

- The DBE must own and operate at least one fully licensed, insured, and operational truck used on the Contract.
- The DBE receives credit for the total value of the transportation services it provides on the Contract using trucks it owns, insures and operates using drivers it employs.
- The DBE may lease trucks from another DBE firm, including an owner-operator who is certified as a DBE. The DBE who leases trucks from another DBE receives credit for the total value of the transportation services the lessee DBE provides on the Contract.
- The DBE may lease trucks from a non-DBE firm; however the DBE may only receive credit for any fees or commissions received for arranging transportation services provided by the non-DBE firms. Additionally, the DBE firm must demonstrate that they are in full control of the trucking operation for which they are seeking credit.

#### **VII. Suspected DBE Fraud**

In appropriate cases, CTDOT will bring to the attention of the USDOT any appearance of false, fraudulent, or dishonest conduct in connection with the DBE program, so that USDOT can take the steps, e.g. referral to the

January 2013

Department of Justice for criminal prosecution, referral to USDOT Inspector General, action under suspension and debarment or Program Fraud and Civil Penalties rules provided in 49 CFR Part 31.



CONNECTICUT DEPARTMENT OF TRANSPORTATION  
(OFFICE OF CONSTRUCTION)  
BUREAU OF ENGINEERING AND CONSTRUCTION

This affidavit must be completed by the State Contractor's DBE notarized and attached to the contractor's request to utilize a DBE supplier or manufacturer as a credit towards its DBE contract requirements; failure to do so will result in not receiving credit towards the contract DBE requirement

State Contract No.

Federal Aid Project No.

Description of Project

\_\_\_\_\_, acting in behalf of \_\_\_\_\_  
Name of person signing Affidavit) (DBE person, firm, association or corporation)

which I am the \_\_\_\_\_ certify and affirm that \_\_\_\_\_  
(Title of Person) (DBE person, firm, association or corporation),

a certified Connecticut Department of Transportation DBE. I further certify and affirm that I have read and understand 49 CFR, Sec. 55(e)(2), as the same may be revised.

I further certify and affirm that \_\_\_\_\_ will assume the actual and  
(DBE person, firm, association or Corporation)

responsibility for the provision of the materials and/or supplies sought by \_\_\_\_\_

If I am a manufacturer, I operate or maintain a factory or establishment that produces, on the premises, the materials, supplies, articles or equipment required under the contract and of the general character described by the specifications.

If I am a supplier, I perform a commercially useful function in the supply process. As a regular dealer, I, at a minimum, own and operate the distribution equipment for bulk items. Any supplementing of my distribution equipment shall be by long-term lease agreement, and not on an ad hoc or contract-by-contract basis.

I understand that false statements made herein are punishable by Law (Sec. 53a-157), CGS, as revised).

(Name of Corporation or Firm)

(Signature & Title of Official making the Affidavit)

Subscribed and sworn to before me, this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

Notary Public (Commissioner of the Superior Court)

My Commission Expires \_\_\_\_\_

CERTIFICATE OF CORPORATION

I, \_\_\_\_\_, certify that I am the \_\_\_\_\_  
(Official) (President)

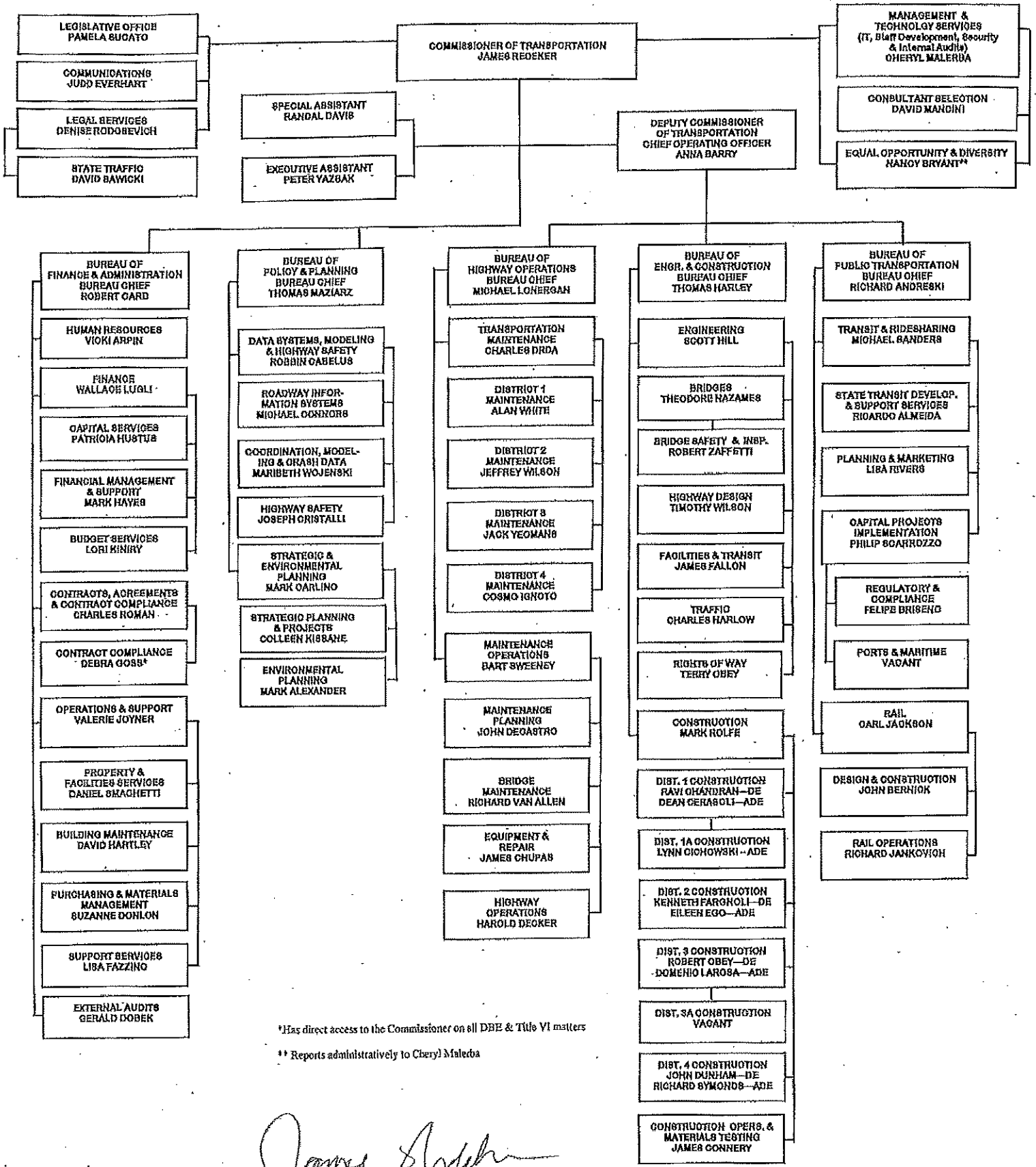
of the Corporation named in the foregoing instrument; that I have been duly authorized to affix the seal of the Corporation to such papers as require the seal; that \_\_\_\_\_, who signed said instrument on behalf of the Corporation, was then \_\_\_\_\_ of said Corporation; that said instrument was duly signed for and in behalf of said Corporation by authority of its governing body and is within the scope of its Corporation powers.

\_\_\_\_\_  
(Signature of Person Certifying)

\_\_\_\_\_  
(Date)

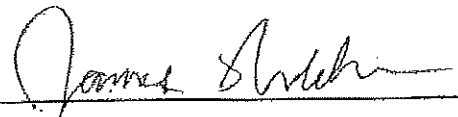
STATE OF CONNECTICUT  
DEPARTMENT OF TRANSPORTATION  
ORGANIZATION CHART

4

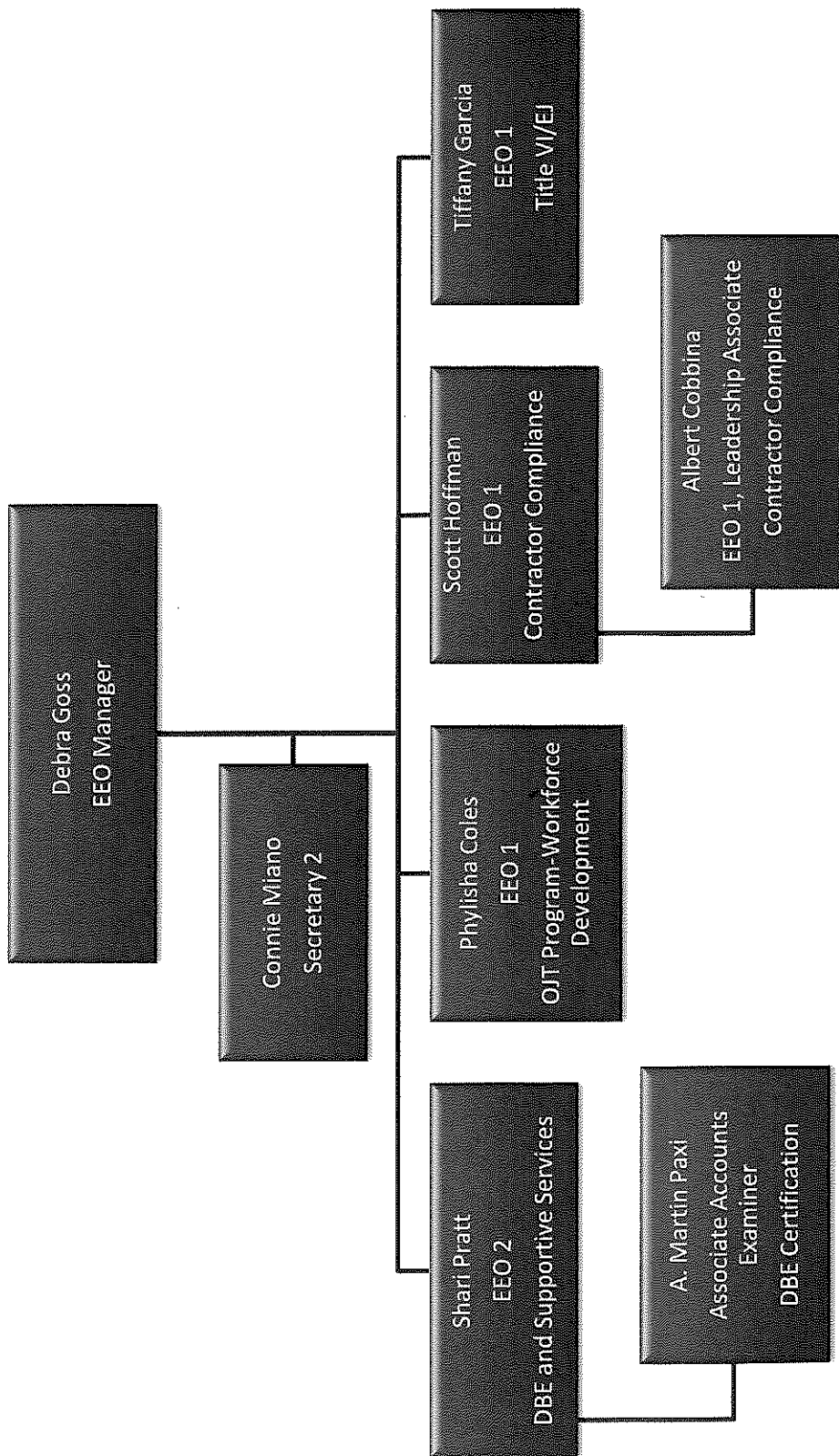


\*Has direct access to the Commissioner on all DBE & Title VI matters

\*\* Reports administratively to Cheryl Malenda

  
James Redeker, Commissioner  
March 9, 2016

# Office of Contract Compliance Organizational Chart



6

**Connecticut Department of Transportation**  
**Office of Contract Compliance**  
**2800 Berlin Turnpike, P.O. Box 317546, Newington, CT 06131-7546**  
**Staff Directory**  
**Fax (860) 594-3016**

**Debra Goss, Manager and DBELO**  
Office of Contract Compliance  
Email: [debra.goss@ct.gov](mailto:debra.goss@ct.gov)  
(860) 594-2169

**Contact List**

**Telephone**

**Connie Miano, Secretary 2**

Email: [constance.miano@ct.gov](mailto:constance.miano@ct.gov)

(860) 594-2177

**Shari Pratt, EEO 2**

DBE Program/Business & Workforce Development Program  
Email: [shari.pratt@ct.gov](mailto:shari.pratt@ct.gov)

(860) 594-2171

**Phylisha Coles, EEO 1**

OJT Program/Contractor Compliance Program  
Email: [phylisha.coles@ct.gov](mailto:phylisha.coles@ct.gov)

(860) 594-2178

**Scott Hoffman, EEO 1**

Contractor Compliance Program  
Email: [scott.hoffman@ct.gov](mailto:scott.hoffman@ct.gov)

(860) 594-2246

**Tiffany Garcia, EEO 1, LA**

Contractor Compliance Program/Title VI  
Email: [tiffany.garcia@ct.gov](mailto:tiffany.garcia@ct.gov)

(860) 594-2243

**Albert Cobbina, EEO 1, LA**

Contractor Compliance Program  
Email: [albert.cobbina@ct.gov](mailto:albert.cobbina@ct.gov)

(860) 594-2167

**Martin Paxi**

Associate Accounts Examiner  
Email: [Abraham.Paxi@ct.gov](mailto:Abraham.Paxi@ct.gov)

(860) 594-2161

**Sydney Kremidas**

DBE Program Assistant  
Email: [Sydney.Kremidas@ct.gov](mailto:Sydney.Kremidas@ct.gov)

(860) 594-2168

**Hanna Nagy**

OJT Supportive Services Program Assistant  
Email: [Hanna.Nagy@ct.gov](mailto:Hanna.Nagy@ct.gov)

(860) 594-2164

**FISCAL YEAR 2016-2017 CONNECTICUT DEPARTMENT OF TRANSPORTATION**

**DBE SUPPORTIVE SERVICES STATEMENT-OF-WORK**

**DBE Business Development Program**

The Connecticut Department of Transportation (CTDOT) is committed to creating economic opportunities for our DBE firms. To obtain FHWA contracts, we recognize the critical and urgent need to work with Connecticut DBE firms to build capacity.

In our mission to help DBE firms build capacity, we recognize that it is necessary to provide a Supportive Services Program where DBE firms can address their business deficiencies. We will do this by providing technical assistance to firms seeking contracting opportunities in the highway industry.

**Purpose Statement**

Our goal is to provide firm-specific training and technical assistance to increase DBE participation as primes or subcontractors on FHWA contracts.

CTDOT is requesting Supportive Services funds to provide business development services to DBE firms that are eligible to compete for and perform work on federal-aid projects. Our goal is to increase DBE capacity by offering DBE firms the necessary tools to increase and improve their capacity..

**Program Goals**

The Office of Contract Compliance (OCC) has identified three (3) DBE Business Stages: Early, Mid-Level and Established. Our business development program seeks to address the issues that DBE firms encounter at each stage in order to help them reach the next stage in their development cycle, as well as increase their technical competence and knowledge to obtain FHWA contracts as primes or sub-contractors.

Each stage appears to have its own problem areas. Our goal is to implement a business development program specifically targeted to address each stage of development. Listed below is a brief description of each business stage:

- **Early Stage Description**
  - Newly formed business
  - Have no real, organized back office operations
  - Have no formulated job costing system
  - Not functioning as a business
  
- **Mid-Level Stage Description**
  - In business a few years
  - Back office operations are sustainable, but these operations are sometimes deprioritized
  - Need executive team development

- Mature/Established Stage Description
  - In business a number of years
  - Back office operations are organized and yield results
  - Has a sustainable job costing system in place
  - Company is in a growth pattern

**Results-Oriented Objectives Based on DBE Business Stages:**

We arrived at these activities by analyzing information obtained from past business assessments. Depending on the development stage, the DBE firm would be eligible for a specific menu of services. We realize that there may be overlap in each of the stages.

To encourage DBE firms to participate and remain active in the Mid-Level and Established programs, incentives were added to each development stage. For instance, if a Mid-Level firm remains active in the supportive services program, they will be provided with a tradeshow booth at the Greater New England Minority Supplier Development Council (GNEMSDC) Business Opportunities Tradeshow, where they can showcase their business services.

Below is a listing of the incentives we will offer:

- A paid tradeshow booth at the GNEMSDC Business Opportunities Tradeshow (\$600.00 value) and customized one-on-one sales presentation training (\$2000.00 value)
- Mentoring Sessions (\$1,000.00 value)
- Participation in Executive Development Programs (\$4,900.00 value)

Early Stage

- Assistance with bid & proposal preparation and identifying contract opportunities
- Business Development Plan Services
- Workshops/Conferences/Matchmaking Events

Mid-Level Stage

- Assistance with bid & proposal preparation and identifying contract opportunities
- Business Development Plan Services
- Workshops/Conferences/Matchmaking Events
- Technical Assistance Coaching and, if necessary, Student Intern Assistance
- Incentive:
  - GNEMSDC Business Opportunities Tradeshow Booth and customized one-on-one sales presentation training\*

We expect to provide services to the following five (5) firms in the Mid-Level Stage:

1. CC Security
2. Fortaleza Concrete, LLC
3. Jay's Landscaping, LLC
4. Kelly Steel, LLC
5. SLM Services d/b/a Northeast Horticultural Services

Established Stage

- Assistance with bid & proposal preparation and identifying contract opportunities
- Business Development Plan Services
- Workshops/Conferences/Matchmaking Events
- Technical Assistance Coaching and, if necessary, Student Intern Assistance
- Incentives:
  - GNEMSDC Business Opportunities Tradeshow Booth and customized one-on-one sales presentation training\*
  - Mentoring Program
  - Executive Development Programs

We expect to provide services to the following five (5) firms in the Established Stage:

1. Alcaide Inc. d/b/a A&J Construction
2. Freeman Companies
3. Charter Oak Environmental Services, Inc.
4. Garg Consulting Services, Inc.
5. VB Technologies Corporation

*\*We anticipate 5 of the 10 firms with participate in the GNEMSDC Business Opportunities Tradeshow Booth incentive*

**Sample DBE Report Card Showing Menu of Services:**

<i>Activity</i>	<i>Early-Stage</i>	<i>Mid-Stage</i>	<i>Established Stage</i>
Bid & Proposal Preparation	✓	✓	✓
Business Assessments	✓	✓	✓
Workshops/Conferences	✓	✓	✓
Technical Assistance Coaching		✓	✓
Business Opportunities Tradeshow Booth & Customized 1-on-1 Sales Presentation Training		✓	✓
Mentoring Program			✓
Executive Development Programs			✓
Areas of Improvement: This section will provide a summary of areas of improvement and any other areas that need discussion.			

**Scope of Work**

These activities will start on October 1, 2016.

The OCC plans on holding four (4) networking sessions around the state to allow our DBE firms to network and market their services to Prime Contractors.

The OCC will pay for Networking & Outreach Support Activities to allow DBE firms to attend tradeshows to market their firm's services to Prime Contractors.

CTDOT's DBE Supportive Services Program Manager will oversee activities provided by two (2) supportive services consultants, Central Connecticut State University-Institute of Technology & Business Development and Greater New England Minority Supplier Development Council; we will work together to ensure an effective program. CTDOT's in-kind contribution to the program will include the Program Manager's salary & benefits, equipment and travel costs. See Attached Budget Summary.

To implement a successful business development program, it is necessary to partner with a variety of organizations. Below is a partial listing of our partners:

- Connecticut Construction Industries Association (CCIA)
- Central Connecticut State University/Institute of Technology & Business Development (CCSU-ITBD)
- Connecticut Community Colleges
- Department of Administrative Services (DAS)
- Department of Economic & Community Development (DECD)
- Diverse Supplier Development Academy (DSDA)
- Greater New England Minority Supplier Development Council (GNEMSDC)
- Hartford Economic Development Corp (HEDCO)
- Metro-Hartford Alliance
- Minority Contractors Association
- Minority Business Development Agency (MBDA)
- Small Business Development Centers (SBDC)
- Service Corp of Retired Executives (SCORE)
- Small Business Transportation Resource Center of New York (SBTRC)
- University of Connecticut (UCONN)
- University of Hartford (UHART)

**Service Providers- Presently we use two Service Providers:**

**1. Central Connecticut State University-Institute of Technology & Business Development (CCSU-ITBD)**

CCSU's ITBD helps support growing Connecticut businesses and organizations. Combining the expertise of a professional staff, academic experts, private sector advisors, and government resources, ITBD turns ideas into ventures, aids the growth of existing businesses, and helps Connecticut's business community succeed in today's challenging domestic and international market. It was felt that the combination of academic experience and "real world" expertise from their consultants would provide our firms a well-balanced supportive services program.

**2. Greater New England Minority Supplier Development Council (GNEMSDC)**



The GNEMSDC is one of twenty-four (24) regional councils of the National Minority Supplier Development Council (NMSDC), a nonprofit membership organization that advances business opportunities for socially and economically disadvantaged firms and connects them to its corporate members.

GNEMSDC was selected because of their expertise and experience working with small underutilized firms. They provide business development assistance, training, and outreach services. They have a "pulse" on needs of the small business community.

***Budget Summary- See Attached Detailed Budget Summary***

Federal Funds	\$159,278.00
State Funds (In-Kind)	\$51,000.00
State Funds (504[e])	\$10,000.00
State Funds (not in-kind & not 504 Funds)	\$0

***Evaluation, Monitoring & Oversight***

The OCC will compile reports based on the following information:

- DBE participation at workshops/meetings/networking events/conferences
- The feedback survey within the CTDOT DBE newsletter will be used to collect data
- Follow-up interviews & surveys will be conducted with firms that receive supportive services assistance on a quarterly basis
- Firms that progress from one stage to another
- Details on technical assistance coaching/sales presentation training/mentoring/executive development will be provided
- Breakdown of the number of contracts bid on and contracts awarded at the end of each quarter
- Areas of improvement will be discussed to analyze trends or high-risk areas
- Completion of a DBE Report Card for each DBE receiving supportive services (see sample report card)

<b><i>DBE Report Card</i></b>			
<b><i>Firm: ABC Environmental, Inc.</i></b>	<b><i>Early Stage</i></b> <input type="checkbox"/>	<b><i>Mid-Stage</i></b> <input checked="" type="checkbox"/>	<b><i>Established Stage</i></b> <input type="checkbox"/>
<b><i>Activity</i></b>			
Bid & Proposal Preparation			
Business Assessments		✓	
Workshops/Conferences		✓	
Technical Assistance Coaching		✓	
Business Opportunities Tradeshow Booth & 1-on-1 Sales Presentation Training		✓	
Mentoring Sessions			
Executive Development Programs			
<b>Areas of Improvement:</b> This section will provide a summary of areas of improvement and any other issues that need discussion.			

### **Reporting Requirements**

Data will be collected and compiled into quarterly reports and submitted to the FHWA CT Division Office, by Dec 30, March 30, July 31, and Sept 29. CTDOT will submit quarterly reports no later than 15 days after the end of the quarter.

The following information will be included:

- Number of DBEs receiving Supportive Services
- Description of Supportive Services received
- Summary of DBE Report Card Data
- Program Effectiveness
- Changes/Recommendations
- Challenges

## **SMALL BUSINESS PARTICIPATION PROGRAM (SBPP Program)**

### **Overview**

In 2009, the Connecticut Department of Transportation (CTDOT) created a pilot program called the Small Business Participation Program (SBP Program). The program was designed to provide small businesses with an opportunity to bid as primes. The SBP Program is a race and gender neutral program in which certain projects are set-aside for small business participation.

The DBE program improvement regulations, that became effective on February 28, 2011, require that recipients include in their DBE program, an element to structure contracting requirements to facilitate competition by small business concerns; in addition to taking all reasonable steps to eliminate obstacles to the participation of small business concerns in procurements as prime contractors or subcontractors.

### **Purpose**

The CTDOT proposes to utilize the SBP Program in order to foster small business participation on federal-aid contracts. This program will provide an opportunity for small economically disadvantaged firms to compete and participate as prime contractors or consultants, and will provide firms owned by individuals who may be socially and economically disadvantaged, an opportunity to participate on projects in which their participation has been traditionally underutilized.

### **Eligibility**

#### ***(Proof of eligibility is required)***

To be eligible to participate as in the SBP Program, the firm must meet the small business definition as defined by 49 CFR 26.65 and meet one of the criteria listed below (each of the programs listed below are race and gender neutral):

1. Current certification as a DBE pursuant to 49 CFR Part 26
2. Current certification in the Connecticut Department of Administrative Services Small Business Enterprise Program (SBE); or
3. Certified as a Small Business by any state or local governmental agency

Firms must also meet the PNW and Small Business Size standards listed in the solicitation.

### **Fostering Involvement**

The program will be monitored to determine its effectiveness in increasing race neutral small business participation on federal aid projects. This program shall be applicable only to projects that are federally-assisted or fully federally funded.

The CTDOT will further enhance this program by:

- Encouraging the CTDOT personnel to identify additional contracting opportunities that can be reserved for small businesses;
- Monitoring the use of the SBP Program on contracts to determine its impact;

- Reserve construction, maintenance, and professional service projects for small businesses and offer assistance to firms with little or no experience of working with the CTDOT as a prime;
- Participate in outreach and matchmaker events to educate small businesses about the program and the available opportunities;
- Include information about the SBP Program on the CTDOT website including eligibility criteria;
- Foster participation by facilitating community partnering events and project information sessions specifically targeted to the small businesses;
- Host a workshop targeted to small businesses to provide training on how to business with CTDOT.

### **Unbundling**

The CTDOT believes that it is currently meeting the objectives on its professional services activities by ensuring that a reasonable number of prime contracts are considered when it is determined that small businesses, including DBEs, can reasonably perform the work. Initial data gathered on participation levels indicates that between August 2010 and May 2012 a total of 10 SBP Program contracts were awarded to consultants totaling \$22.4 million.

For Construction Contracts:

The CTDOT will review contracts under \$500,000 to determine if they are suitable for unbundling for small business participation.

Criteria to be used will include the following:

- 1) Is the size of the contract conducive to small business participation;
- 2) Availability of small businesses to perform the type of work under the contract;
- 3) Will setting the contract aside for small business participation substantially increase the costs;
- 4) Assess the risk – Is the work schedule critical; will there be work-dependencies between contracts; is work easily broken out (design effort), and identifying the overall risk (high, medium, low).

### **Time Frame**

The CTDOT will make revisions to its current program, upon approval, to ensure compliance with 49 CFR 26. The program will be fully implemented by August 1, 2012.

### **Other**

The CTDOT currently reports all race and gender-neutral participation on federal-aid projects by certified DBEs regardless of whether the project has an assigned DBE goal; this includes projects that have an SBP Program requirement.

The determination of eligibility for the program will be a matter of contractor responsibility and will be a condition of award. The CTDOT's electronic bidding process will have no impact on this program.

A joint venture entity would have to qualify as an SBP Program in accordance with eligibility criteria and provide proof.

Sub-recipients will be required to comply with the requirements of this program as applicable.

*In order to remain within the confines of 49 CFR Part 26 and the State of Connecticut statutes, any section of this plan dealing with contract clauses, overall or contract goals, certification requirements, size standards, small-business set asides, and awarded selection procedures, shall pertain only to United States Department of Transportation federal-aid contracts.*



**STATE OF CONNECTICUT**  
**DEPARTMENT OF TRANSPORTATION**  
**Office of Contract Compliance**



9

Telephone: (860) 594-2169  
Fax: (860) 594-3016  
Mailing Address: Administration Building  
2800 Berlin Turnpike  
Newington, CT 06131

Dear Recipient:

**Subject: Unified Certification Program**

The U.S. Department of Transportation (USDOT) has issued regulations, revised as of July 16, 2003, for its Disadvantaged Business Enterprise (DBE) Program under 46 CFR Part 26. All recipients of USDOT funds must sign an agreement establishing a Unified Certification Program (UCP) in each state under these revised regulations. The UCP shall make all certification decisions on behalf of all USDOT fund recipients in the state of Connecticut with respect to participation in the USDOT DBE Program. This provides "one-step shopping" for applicants for certification.

The Connecticut Department of Transportation (ConnDOT) is certifying agency for the DBE Program in Connecticut, and has developed an Agreement for all USDOT fund recipients to sign in order to be in compliance with 49 CFR Part 26.

Enclosed, for your review, is a copy of the Memorandum of Understanding (MOU) for the Connecticut UCP. The MOU includes an introduction of the program, outlines its purpose and provides the procedures for certification under 49 CFR Part 26. After reviewing the UCP, please sign the enclosed Agreement and return it to the Department of Transportation, Att: Debra Goss, Office of Contract Compliance, 2800 Berlin Turnpike, Newington, CT 06111.

If you have any questions, please feel free to contact Ms. Debra Goss, Manager, Office of Contract Compliance at (860) 594-2169.

Sincerely,

Debra Goss, Manager  
Office of Contract Compliance

## Agreement

As a result of the requirements set forth in 49 CFR 26 (Part 23 for ACDBE), we, the undersigned, agree to participate in the CONNECTICUT DISADVANTAGED BUSINESS ENTERPRISE UNIFIED CERTIFICATION PROGRAM, in accordance with the tenets of this Memorandum of Understanding and agree to abide by its contents.

---

Name

---

Date

---

Title

---

Agency Name

---

Agency Address

---

E-Mail address for Agency Contact Person

State of Connecticut Department of Transportation  
2800 Berlin Turnpike, Newington, CT 06111

MEMORANDUM OF UNDERSTANDING  
FOR THE  
CONNECTICUT DISADVANTAGED BUSINESS ENTERPRISE  
UNIFIED CERTIFICATION PROGRAM

This Memorandum of Understanding (MOU) has been developed so as to establish a Disadvantaged Business Enterprise (DBE) Unified Certification Program (UCP) in the State of Connecticut. The UCP has been prepared in accordance with the requirements of 49 Code of Federal Regulations (CFR) Part 26. All recipients of federal funds from the United States Department of Transportation (USDOT) in the State of Connecticut agree to participate in this UCP. The signatures of all USDOT federal funds recipients are attached to this MOU.

The Regulations of Connecticut State Agencies Section 13a-165 Parts 1-15 prescribes the State of Connecticut's Department of Transportation (ConnDOT) as the administrative agency responsible for certifying DBE's within the State of Connecticut. To this end, the ConnDOT Commissioner has constituted a "DBE Certification Panel" to determine whether a firm/corporation meets the eligibility requirements for certification as a DBE. In addition, the State Regulation has responsibility for the implementation, development, and management of the ConnDOT's DBE Program. Therefore, the ConnDOT is the only entity with the State of Connecticut that will be performing DBE Certifications and no other federal-aid recipients have had nor will have certification responsibilities (at least since 1990).

**The Following Stipulations Apply:**

- The ConnDOT certifies DBE firms/corporations according to the procedures as written in the attachment to this MOU;
- The ConnDOT cooperates fully with the oversight, review, and monitoring activities of the USDOT and its operating administrations;
- The ConnDOT will implement USDOT directives and guidance concerning DBE certification matters;
- The ConnDOT is addressing the resources needs with existing resources;
- All USDOT federal-aid recipients accept as certified all firms that are certified under this UCP;



- This State of Connecticut UCP provides “one-stop shopping” to applicants for DBE certification. This means that an applicant is required to apply only once for a DBE certification that will be honored by all State of Connecticut USDOT federal aid recipients;
- All certifications by this UCP shall be *pre-certification*. Pre-certification means certifications have been made final prior to the due date for bids or offers on a contract on which a firm seeks to participate as a DBE;
- This UCP is not required to process an application for certification from a firm having its principal place of business outside the State of Connecticut if the firm is not certified by the UCP in the State in which the firm maintains its principal place of business. The “home state” UCP shall provide its information and documents concerning the applicant firm with the State of Connecticut’s UCP if the firm applies for DBE certification within the State of Connecticut;
- Subject of USDOT approval as provided for by 49 CFR 26.81, the State of Connecticut UCP may form a regional UCP with two or more State UCPs. Additionally, UCPs may enter into written reciprocity agreements with other UCPs. This written agreement shall outline the specific responsibilities of each participant;
- The State of Connecticut UCP shall maintain a unified DBE directory containing, for all firms certified by the UCP (including those from other States certified under the provisions of 49 CFR 26.81), the information required by 49 CFR 26.31. This DBE Directory shall be made available to the public electronically (on the internet) as well as in print. In the State of Connecticut, operation and maintenance of the directory shall be the responsibility of ConnDOT. The ConnDOT shall update the electronic version of the DBE directory by including additions, deletions and other changes as soon as they occur.



**DOT- Office of Civil Rights: Do You Qualify as a DBE?**

In general to be eligible for the DBE program, persons must own 51% or more of a "small business," establish that they are socially and economically disadvantaged within the meaning of DOT regulations, and prove they control their business. The following general guidelines, taken in part from the applicable regulation (49 C.F.R Part 26); will help business owners determine whether they are eligible for the DBE program:

**Eligibility Guidelines (in general):**

**Ownership-** Your business must be 51% owned by a socially and economically disadvantaged individual(s).

**"Disadvantaged"** – You may be eligible if you are a member of a group of persons the Department considers as disadvantaged. The Department presumes certain groups are disadvantaged, including women, Black Americans, Hispanic Americans, Native Americans, Asian-Pacific Americans, Subcontinent Asian-Pacific Americans, or other minorities found to be disadvantaged by the U.S. Small Business Administration (SBA). Persons who are not members of one of the above groups and own and control their business may also be eligible if they establish their "social" and "economic" disadvantage. The Department notes, for example, that people with disabilities have disproportionately low incomes and high rates of unemployment, and that many may be socially and economically disadvantaged. A determination of whether an individual with a disability meets DBE eligibility criteria is made on a case-by-case basis.

More information on how social and economic disadvantage is determined can be found in Appendix E (<https://www.civilrights.dot.gov/appendix-e-part-26-individual-determinations-social-and-economic-disadvantage>)to 49 CFR Part 26 (<http://www.ecfr.gov/cgi-bin/text-idx?SID=5ae478e27e42dc08bad7352fdd3cfef0&node=49:1.0.1.1.20.6.18.17&rgn=div9>).

**Business Size Determination-** a firm (including its affiliates) must be a small business as defined by SBA standards. It must not have annual gross receipts over \$23,980,000 in the previous three fiscal years (\$56,420,000 for airport concessionaires in general with some exceptions). Under MAP-21, this threshold will be adjusted annually for inflation by the Secretary.

**Personal Net Worth-** Only disadvantaged persons having a personal net worth of less than \$1.32 million can be considered as a potential qualified DBE. Items excluded from a person's net worth calculation include an individual's ownership interest in the applicant firm, and his or her equity in their primary residence.

**Independence-** Only an independent business may be certified as a DBE. An independent business is one the viability of which does not depend on its relationship with another firm or firms.





**UNIFORM CERTIFICATION APPLICATION**  
**DISADVANTAGED BUSINESS ENTERPRISE (DBE) /**  
**AIRPORT CONCESSION DISADVANTAGED BUSINESS ENTERPRISE (ACDBE)**  
**49 C.F.R. Parts 23 and 26**

***Roadmap for Applicants***

**1. Should I apply?**

You may be eligible to participate in the DBE/ACDBE program if:

- The firm is a for-profit business that performs or seeks to perform transportation related work (or a concession activity) for a recipient of Federal Transit Administration, Federal Highway Administration, or Federal Aviation Administration funds.
- The firm is at least 51% owned by a socially and economically disadvantaged individual(s) who also controls it.
- The firm's disadvantaged owners are U.S. citizens or lawfully admitted permanent residents of the U.S.
- The firm meets the Small Business Administration's size standard and does not exceed \$23.98 million in gross annual receipts for DBE (\$56.42 million for ACDBEs). (Other size standards apply for ACDBE that are banks/financial institutions, car rental companies, pay telephone firms, and automobile dealers.)

**2. How do I apply?**

First time applicants for DBE certification must complete and submit this certification application and related material to the certifying agency in your home state and participate in an on-site interview conducted by that agency. The attached document checklist can help you locate the items you need to submit to the agency with your completed application. If you fail to submit the required documents, your application may be delayed and/or denied. Firms already certified as a DBE do not have to complete this form, but may be asked by certifying agencies outside of your home state to provide a copy of your initial application form, supporting documents, and any other information you submitted to your home state to obtain certification or to any other state related to your certification.

**3. Where can I send my application?** [INSERT UCP PARTICIPATING MEMBER CONTACT INFORMATION]

**4. Who will contact me about my application and what are the eligibility standards?**

The DBE and ACDBE Programs require that all U.S. Department of Transportation (DOT) recipients of federal assistance participate in a statewide Unified Certification Program (UCP). The UCP is a one-stop certification program that eliminates the need for your firm to obtain certification from multiple certifying agencies within your state. The UCP is responsible for certifying firms and maintaining a database of certified DBEs and ACDBEs for DOT grantees, pursuant to the eligibility standards found in 49 C.F.R. Parts 23 and 26.

**5. Where can I find more information?**

U.S. DOT—<https://www.civilrights.dot.gov/> (This site provides useful links to the rules and regulations governing the DBE/ACDBE program, questions and answers, and other pertinent information)

SBA—Small Business Size Standards matched to the North American Industry Classification System (NAICS):  
<http://www.census.gov/eos/www/naics/> and <http://www.sba.gov/content/table-small-business-size-standards>.

In collecting the information requested by this form, the Department of Transportation (Department) complies with the provisions of the Federal Freedom of Information and Privacy Acts (5 U.S.C. 552 and 552a). The Privacy Act provides comprehensive protections for your personal information. This includes how information is collected, used, disclosed, stored, and discarded. Your information will not be disclosed to third parties without your consent. The information collected will be used solely to determine your firm's eligibility to participate in the Department's Disadvantaged Business Enterprise Program as defined in 49 CFR §26.5 and the Airport Concession Disadvantaged Business Enterprise Program as defined in 49 CFR §23.3. You may review DOT's complete Privacy Act Statement in the Federal Register published on April 11, 2000 (65 FR 19477).

Under 49 C.F.R. §26.107, dated February 2, 1999 and January 28, 2011, if at any time, the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 2 CFR Parts 180 and 1200, Nonprocurement Suspension and Department, take enforcement action under 49 C.F.R. Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.



**INSTRUCTIONS FOR COMPLETING THE  
DISADVANTAGED BUSINESS ENTERPRISE (DBE)  
AIRPORT CONCESSIONS DISADVANTAGED BUSINESS ENTERPRISE (ACDBE)  
UNIFORM CERTIFICATION APPLICATION**

**NOTE:** All participating firms must be for-profit enterprises. If your firm is not for profit, then you do NOT qualify for the DBE/ACDBE program and should not complete this application. If you require additional space for any question in this application, please attach additional sheets or copies as needed, taking care to indicate on each attached sheet/copy the section and number of this application to which it refers.

**Section 1: CERTIFICATION INFORMATION**

**A. Basic Contact Information**

- (1) Enter the contact name and title of the person completing this application and the person who will serve as your firm's contact for this application.
- (2) Enter the legal name of your firm, as indicated in your firm's Articles of Incorporation or charter.
- (3) Enter the primary phone number of your firm.
- (4) Enter a secondary phone number, if any.
- (5) Enter your firm's fax number, if any.
- (6) Enter the contact person's email address.
- (7) Enter your firm's website addresses, if any.
- (8) Enter the street address of the firm where its offices are physically located (not a P.O. Box).
- (9) Enter the mailing address of your firm, if it is different from your firm's street address.

**B. Prior/Other Certifications and Applications**

- (10) Check the appropriate box indicating whether your firm is currently certified in the DBE/ACDBE programs, and provide the name of the certifying agency that certified your firm. List the dates of any site visits conducted by your home state and any other states or UCP members. Also provide the names of state/UCP members that conducted the review.
- (11) Indicate whether your firm or any of the persons listed has ever been denied certification as a DBE, 8(a), or Small Disadvantaged Business (SDB) firm, or state and local MBE/WBE firm. Indicate if the firm has ever been decertified from one of these programs. Indicate if the application was withdrawn or whether the firm was debarred, suspended, or otherwise had its bidding privileges denied or restricted by any state or local agency, or Federal entity. If your answer is yes, identify the name of the agency, and explain fully the nature of the action in the space provided. Indicate if you have ever appealed this decision to the Department and if so, attach a copy of USDOT's final agency decision(s).

**Section 2: GENERAL INFORMATION**

**A. Business profile:**

- (1) Give a concise description of the firm's primary activities, the product(s) or services the company provides, or type of construction. If your company offers more than one product/service, list primary product or service first (attach additional sheets if necessary). This description may be used in our UCP online directory if you are certified as a DBE.

- (2) If you know the appropriate NAICS Code for the line(s) of work you identified in your business profile, enter the codes in the space provided.
- (3) State the date on which your firm was established as stated in your firm's Articles of Incorporation or charter.
- (4) State the date each person became a firm owner.
- (5) Check the appropriate box describing the manner in which you and each other owner acquired ownership of your firm. If you checked "Other," explain in the space provided.
- (6) Check the appropriate box that indicates whether your firm is "for profit." If you checked "No," then you do NOT qualify for the DBE/ACDBE program and should not complete this application. All participating firms must be for-profit enterprises. If the firm is a for profit enterprise, provide the Federal Tax ID number as stated on your firm's Federal tax return.
- (7) Check the appropriate box that describes the type of legal business structure of your firm, as indicated in your firm's Articles of Incorporation or similar document. Identify all joint venture partners if applicable. If you checked "Other," briefly explain in the space provided.
- (8) Indicate in the spaces provided how many employees your firm has, specifying the number of employees who work on a full-time, part-time, and seasonal basis. Attach a list of employees, their job titles, and dates of employment, to your application.
- (9) Specify the firm's gross receipts for each of the past three years, as stated in your firm's filed Federal tax returns. You must submit complete copies of the firm's Federal tax returns for each year. If there are any affiliates or subsidiaries of the applicant firm or owners, you must provide these firms' gross receipts and submit complete copies of these firm(s) Federal tax returns. Affiliation is defined in 49 C.F.R. §26.5 and 13 C.F.R. Part 121.

**B. Relationships and Dealings with Other Businesses**

- (1) Check the appropriate box that indicates whether your firm is co-located at any of its business locations, or whether your firm shares a telephone number(s), a post office box, any office space, a yard, warehouse, other facilities, any equipment, financing, or any office staff and/or employees with any other business, organization or entity of any kind. If you answered "Yes," then specify the name of the other firm(s) and fully explain the nature of your relationship with these other businesses by identifying the business or person with whom you have any formal, informal, written, or



oral agreement. Provide an explanation of any items shared with other firms in the space provided.

- (2) Check the appropriate box indicating whether any other firm currently has or had an ownership interest in your firm at present or at any time in the past. If you checked yes, please explain.
- (3) Check the appropriate box that indicates whether at present or at any time in the past your firm:
  - (a) ever existed under different ownership, a different type of ownership, or a different name;
  - (b) existed as a subsidiary of any other firm;
  - (c) existed as a partnership in which one or more of the partners are/were other firms;
  - (d) owned any percentage of any other firm; and
  - (e) had any subsidiaries of its own.
- (f) served as a subcontractor with another firm constituting more than 25% of your firm's receipts.

If you answered "Yes" to any of the questions in (3)(a-f), you may be asked to explain the arrangement in detail.

### Section 3: MAJORITY OWNER INFORMATION

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below (if your firm has more than one owner, provide completed copies of this section for each owner):

#### A. Identify the majority owner of the firm holding 51% or more ownership interest

- (1) Enter the full name of the owner.
- (2) Enter his/her title or position within your firm.
- (3) Give his/her home phone number.
- (4) Enter his/her home (street) address.
- (5) Indicate this owner's gender.
- (6) Identify the owner's ethnic group membership. If you checked "Other," specify this owner's ethnic group/identity not otherwise listed.
- (7) Check the appropriate box to indicate whether this owner is a U.S. citizen or a lawfully admitted permanent resident. If this owner is neither a U.S. citizen nor a lawfully admitted permanent resident of the U.S., then this owner is NOT eligible for certification as a DBE owner.
- (8) Enter the number of years during which this owner has been an owner of your firm.
- (9) Indicate the percentage of the total ownership this person holds and the date acquired, including (if appropriate), the class of stock owned.
- (10) Indicate the dollar value of this owner's initial investment to acquire an ownership interest in your firm, broken down by cash, real estate, equipment, and/or other investment. Describe how you acquired your business and attach documentation substantiating this investment.

#### B. Additional Owner Information

- (1) Describe the familial relationship of this owner to each other owner of your firm and employees.
- (2) Indicate whether this owner performs a management or supervisory function for any other business. If you

checked "Yes," state the name of the other business and this owner's function/title held in that business.

- (3) (a) Check the appropriate box that indicates whether this owner owns or works for any other firm(s) that has any relationship with your firm. If you checked "Yes," identify the name of the other business, the nature of the business relationship, and the owner's function at the firm.
  - (b) If the owner works for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week, please identify this activity.
- (4) (a) Provide the personal net worth of the owner applying for certification in the space provided. Complete and attach the accompanying "Personal Net Worth Statement for DBE/ACDBE Program Eligibility" with your application. Note, complete this section and accompanying statement only for each owner applying for DBE qualification (i.e., for each owner claiming to be socially and economically disadvantaged).
  - (b) Check the appropriate box that indicates whether any trust has been created for the benefit of the disadvantaged owner(s). If you answered "Yes," you may be asked to provide a copy of the trust instrument.
- (5) Check the appropriate to indicate whether any of your immediate family members, managers, or employees, own, manage, or are associated with another company. Immediate family member is defined in 49 C.F.R. §26.5. If you answered "Yes," provide the name of each person, your relationship to them, the name of the company, the type of business, and whether they own or manage the company.

### Section 4: CONTROL

#### A. Identify the firm's Officers and Board of Directors

- (1) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each officer.
- (2) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each individual serving on your firm's Board of Directors.
- (3) Check the appropriate box to indicate whether any of your firm's officers and/or directors listed above performs a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
- (4) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above own or work for any other firm(s) that has a relationship with your firm. (e.g., ownership interest, shared office space, financial investments, equipment leases, personnel sharing, etc.) If you answered "Yes," identify the name of the firm, the individual's name, and the nature of his/her business relationship with that other firm.



## B. Duties of Owners, Officers, Directors, Managers and Key Personnel

(1), (2) Specify the roles of the majority and minority owners, directors, officers, and managers, and key personnel who control the functions listed for the business. Submit résumés for each owner and non-owner identified below. State the name of the individual, title, race and gender and percentage ownership if any. Circle the frequency of each person's involvement as follows: "always, frequently, seldom, or never" in each area.

Indicate whether any of the persons listed in this section perform a management or supervisory function for any other business. Identify the person, business, and their title/function. Identify if any of the persons listed above own or work for any other firm(s) that has a relationship with this firm (e.g. ownership interest, shared office space, financial investment, equipment, leases, personnel sharing, etc.) If you answered "Yes," describe the nature of his/her business relationship with that other firm.

C. Inventory: Indicate firm inventory in these categories:

### (1) Equipment and Vehicles

State the make and model, and current dollar value of each piece of equipment and motor vehicle held and/or used by your firm. Indicate whether each piece is either owned or leased by your firm or owner, whether it is used as collateral, and where this item is stored.

### (2) Office Space

State the street address of each office space held and/or used by your firm. Indicate whether your firm or owner owns or leases the office space and the current dollar value of that property or its lease.

### (3) Storage Space

State the street address of each storage space held and/or used by your firm. Indicate whether your firm or owner owns or leases the storage space and the current dollar value of that property or its lease. Provide a signed lease agreement for each property.

D. Does your firm rely on any other firm for management functions or employee payroll?

Check the appropriate box that indicates whether your firm relies on any other firm for management functions or for employee payroll. If you answered "Yes," you may be asked to explain the nature of that reliance and the extent to which the other firm carries out such functions.

## E. Financial / Banking Information

Banking Information. State the name, City and State of your firm's bank. In the space provided, identify the persons able to sign checks on this account. Provide bank authorization and signature cards

Bonding Information. State your firm's bonding limits (in dollars), specifying both the aggregate and project limits.

F. Sources, amounts, and purposes of money loaned to your firm, including the names of persons or firms guaranteeing the loan.

State the name and address of each source, the name of person securing the loan, original dollar amount and the current balance of each loan, and the purpose for which each loan was made to your firm. Provide copies of signed loan agreements and security agreements

G. Contributions or transfers of assets to/from your firm and to/from any of its owners or another individual over the past two years:

Indicate in the spaces provided, the type of contribution or asset that was transferred, its current dollar value, the person or firm from whom it was transferred, the person or firm to whom it was transferred, the relationship between the two persons and/or firms, and the date of the transfer.

H. Current licenses/permits held by any owner or employee of your firm.

List the name of each person in your firm who holds a professional license or permit, the type of permit or license, the expiration date of the permit or license, and issuing State of the license or permit. Attach copies of licenses, license renewal forms, permits, and haul authority forms.

I. Largest contracts completed by your firm in the past three years, if any.

List the name of each owner or contractor for each contract, the name and location of the projects under each contract, the type of work performed on each contract, and the dollar value of each contract.

J. Largest active jobs on which your firm is currently working.

For each active job listed, state the name of the prime contractor and the project number, the location, the type of work performed, the project start date, the anticipated completion date, and the dollar value of the contract.

## AIRPORT CONCESSION (ACDBE) APPLICANTS

Identify the concession space, address and location at the airport, the value of the property or lease, and fees/lease payments paid to the airport. Provide information concerning any other airport concession businesses the applicant firm or any affiliate owns and/or operates, including name, location, type of concession, and start date of the concession enterprise.

## AFFIDAVIT & SIGNATURE

The Affidavit of Certification must accompany your application for certification. Carefully read the attached affidavit in its entirety. Fill in the required information for each blank space, and sign and date the affidavit in the presence of a Notary Public, who must then notarize the form.

Section 1: CERTIFICATION INFORMATION



A. Basic Contact Information

(1) Contact person and Title: \_\_\_\_\_ (2) Legal name of firm: \_\_\_\_\_

(3) Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (4) Other Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (5) Fax #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

(6) E-mail: \_\_\_\_\_ (7) Firm Websites: \_\_\_\_\_

(8) Street address of firm (No P.O. Box): \_\_\_\_\_ City: \_\_\_\_\_ County/Parish: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(9) Mailing address of firm (if different): \_\_\_\_\_ City: \_\_\_\_\_ County/Parish: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

B. Prior/Other Certifications and Applications

(10) Is your firm currently certified for any of the following U.S. DOT programs?

DBE  ACDBE Names of certifying agencies: \_\_\_\_\_

⊗ If you are certified in your home state as a DBE/ACDBE, you do not have to complete this application for other states. Ask your state UCP about the interstate certification process.

List the dates of any site visits conducted by your home state and any other states or UCP members:

Date \_\_\_/\_\_\_/\_\_\_ State/UCP Member: \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_ State/UCP Member: \_\_\_\_\_

(11) Indicate whether the firm or any persons listed in this application have ever been:

- (a) Denied certification or decertified as a DBE, ACDBE, 8(a), SDB, MBE/WBE firm?  Yes  No
- (b) Withdrawn an application for these programs, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?  Yes  No

If yes, explain the nature of the action. (If you appealed the decision to DOT or another agency, attach a copy of the decision, \_\_\_\_\_

Section 2: GENERAL INFORMATION

A. Business Profile: (1) Give a concise description of the firm's primary activities and the product(s) or service(s) it provides. If your company offers more than one product/service, list the primary product or service first. Please use additional paper if necessary. This description may be used in our database and the UCP online directory if you are certified as a DBE or ACDBE.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) Applicable NAICS Codes for this line of work include: \_\_\_\_\_

(3) This firm was established on \_\_\_/\_\_\_/\_\_\_ (4) I/We have owned this firm since: \_\_\_/\_\_\_/\_\_\_

(5) Method of acquisition (Check all that apply):

- Started new business  Bought existing business  Inherited business  Secured concession
- Merger or consolidation  Other (explain) \_\_\_\_\_



(6) Is your firm "for profit"?  Yes  No → Federal Tax ID# \_\_\_\_\_

⊗ STOP! If your firm is NOT for-profit, then you do NOT qualify for this program and should not fill out this application.

(7) Type of Legal Business Structure: (check all that apply):

- Sole Proprietorship
- Partnership
- Limited Liability Company
- Applying as an ACDBE
- Limited Liability Partnership
- Corporation
- Joint Venture (Identify all JV partners \_\_\_\_\_)
- Other, Describe \_\_\_\_\_

(8) Number of employees: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Seasonal \_\_\_\_\_ Total \_\_\_\_\_  
(Provide a list of employees, their job titles, and dates of employment, to your application).

(9) Specify the firm's gross receipts for the last 3 years. (Submit complete copies of the firm's Federal tax returns for each year. If there are affiliates or subsidiaries of the applicant firm or owners, you must submit complete copies of these firms' Federal tax returns).

Year _____	Gross Receipts of Applicant Firm \$ _____	Gross Receipts of Affiliate Firms \$ _____
Year _____	Gross Receipts of Applicant Firm \$ _____	Gross Receipts of Affiliate Firms \$ _____
Year _____	Gross Receipts of Applicant Firm \$ _____	Gross Receipts of Affiliate Firms \$ _____

**B. Relationships and Dealings with Other Businesses**

(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office or storage space, yard, warehouse, facilities, equipment, inventory, financing, office staff, and/or employees with any other business, organization, or entity?  Yes  No  
If Yes, explain the nature of your relationship with these other businesses by identifying the business or person with whom you have any formal, informal, written, or oral agreement. Also detail the items shared.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(2) Has any other firm had an ownership interest in your firm at present or at any time in the past?  
 Yes  No If Yes, explain \_\_\_\_\_

- (3) At present, or at any time in the past, has your firm:
- (a) Ever existed under different ownership, a different type of ownership, or a different name?  Yes  No
  - (b) Existed as a subsidiary of any other firm?  Yes  No
  - (c) Existed as a partnership in which one or more of the partners are/were other firms?  Yes  No
  - (d) Owned any percentage of any other firm?  Yes  No
  - (e) Had any subsidiaries?  Yes  No
  - (f) Served as a subcontractor with another firm constituting more than 25% of your firm's receipts?  Yes  No

(If you answered "Yes" to any of the questions in (2) and/or (3)(a)-(f), you may be asked to provide further details and explain whether the arrangement continues).





Section 3: MAJORITY OWNER INFORMATION

A. Identify the majority owner of the firm holding 51% or more ownership interest.

(1) Full Name: \_\_\_\_\_ (2) Title: \_\_\_\_\_ (3) Home Phone #: ( ) \_\_\_\_\_ - \_\_\_\_\_  
(4) Home Address (Street and Number): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(5) Gender:  Male  Female  
(6) Ethnic group membership (Check all that apply):  
 Black  Hispanic  
 Asian Pacific  Native American  
 Subcontinent Asian  
 Other (specify) \_\_\_\_\_  
(7) U.S. Citizenship:  
 U.S. Citizen  
 Lawfully Admitted Permanent Resident

(8) Number of years as owner: \_\_\_\_\_  
(9) Percentage owned: \_\_\_\_\_ %  
Class of stock owned: \_\_\_\_\_  
Date acquired \_\_\_\_\_  
(10) Initial investment to acquire ownership interest in firm:  

Type	Dollar Value
Cash	\$ _____
Real Estate	\$ _____
Equipment	\$ _____
Other	\$ _____

  
Describe how you acquired your business:  
 Started business myself  
 It was a gift from: \_\_\_\_\_  
 I bought it from: \_\_\_\_\_  
 I inherited it from: \_\_\_\_\_  
 Other \_\_\_\_\_  
*(Attach documentation substantiating your investment)*

B. Additional Owner Information

(1) Describe familial relationship to other owners and employees:  
\_\_\_\_\_  
\_\_\_\_\_

(2) Does this owner perform a management or supervisory function for any other business?  Yes  No  
If Yes, identify: Name of Business: \_\_\_\_\_ Function/Title: \_\_\_\_\_

(3)(a) Does this owner own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)  Yes  No  
Identify the name of the business, and the nature of the relationship, and the owner's function at the firm:  
\_\_\_\_\_

(b) Does this owner work for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week? If yes, identify this activity: \_\_\_\_\_

(4)(a) What is the personal net worth of this disadvantaged owner applying for certification ? \$ \_\_\_\_\_

(b) Has any trust been created for the benefit of this disadvantaged owner(s)?  Yes  No  
*(If Yes, you may be asked to provide a copy of the trust instrument).*

(5) Do any of your immediate family members, managers, or employees own, manage, or are associated with another company?  Yes  No If Yes, provide their name, relationship, company, type of business, and indicate whether they own or manage the company: *(Please attach extra sheets, if needed):* \_\_\_\_\_



Section 3: OWNER INFORMATION, Cont'd.

A. Identify all individuals, firms, or holding companies that hold LESS THAN 51% ownership interest in the firm (Attach separate sheets for each additional owner)

(1) Full Name: \_\_\_\_\_ (2) Title: \_\_\_\_\_ (3) Home Phone #: \_\_\_\_\_

(4) Home Address (Street and Number): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(5) Gender:  Male  Female

(6) Ethnic group membership (Check all that apply)

- Black  Hispanic
 Asian Pacific  Native American
 Subcontinent Asian
 Other (specify) \_\_\_\_\_

(7) U.S. Citizenship:

- U.S. Citizen
 Lawfully Admitted Permanent Resident

(8) Number of years as owner: \_\_\_\_\_

(9) Percentage owned: \_\_\_\_\_ %

Class of stock owned: \_\_\_\_\_

Date acquired \_\_\_\_\_

Table with 3 columns: (10) Initial investment to acquire ownership interest in firm, Type, Dollar Value. Rows include Cash, Real Estate, Equipment, and Other.

Describe how you acquired your business:

- Started business myself
 It was a gift from: \_\_\_\_\_
 I bought it from: \_\_\_\_\_
 I inherited it from: \_\_\_\_\_
 Other \_\_\_\_\_

(Attach documentation substantiating your investment)

B. Additional Owner Information

(1) Describe familial relationship to other owners and employees:

(2) Does this owner perform a management or supervisory function for any other business?  Yes  No

If Yes, identify: Name of Business: \_\_\_\_\_ Function/Title: \_\_\_\_\_

(3)(a) Does this owner own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)  Yes  No

Identify the name of the business, and the nature of the relationship, and the owner's function at the firm:

(b) Does this owner work for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week? If yes, identify this activity: \_\_\_\_\_

(4)(a) What is the personal net worth of this disadvantaged owner applying for certification? \$ \_\_\_\_\_

(b) Has any trust been created for the benefit of this disadvantaged owner(s)?  Yes  No

(If Yes, you may be asked to provide a copy of the trust instrument).

(5) Do any of your immediate family members, managers, or employees own, manage, or are associated with another company?  Yes  No If Yes, provide their name, relationship, company, type of business, and indicate whether they own or manage: (Please attach extra sheets, if needed): \_\_\_\_\_

**Section 4: CONTROL**



**A. Identify your firm's Officers and Board of Directors** (If additional space is required, attach a separate sheet):

	Name	Title	Date Appointed	Ethnicity	Gender
<b>(1) Officers of the Company</b>	(a)				
	(b)				
	(c)				
	(d)				
<b>(2) Board of Directors</b>	(a)				
	(b)				
	(c)				
	(d)				

**(3) Do any of the persons listed above perform a management or supervisory function for any other business?**

Yes  No If Yes, identify for each:

Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_ Function: \_\_\_\_\_

Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_ Function: \_\_\_\_\_

**(4) Do any of the persons listed in section A above own or work for any other firm(s) that has a relationship with this firm?** (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)

Yes  No If Yes, identify for each:

Firm Name: \_\_\_\_\_ Person: \_\_\_\_\_

Nature of Business Relationship: \_\_\_\_\_

**B. Duties of Owners, Officers, Directors, Managers, and Key Personnel**

**1. (Identify your firm's management personnel who control your firm in the following areas (Attach separate sheets as needed).)**

A = Always F = Frequently	S = Seldom N = Never	Majority Owner (51% or more)				Minority Owner (49% or less)			
		Name: _____	Title: _____	Percent Owned: _____		Name: _____	Title: _____	Percent Owned: _____	
Sets policy for company direction/scope of operations		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Bidding and estimating		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Major purchasing decisions		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Marketing and sales		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Supervises field operations		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Attend bid opening and lettings		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Perform office management (billing, accounts receivable/payable, etc.)		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Hires and fires management staff		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Hire and fire field staff or crew		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Designates profits spending or investment		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Obligates business by contract/credit		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Purchase equipment		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Signs business checks		A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>

**2. Complete for all Officers, Directors, Managers, and Key Personnel who control the following functions for the firm. (Attach separate sheets as needed).**

<b>A = Always</b> <b>S = Seldom</b> <b>F = Frequently</b> <b>N = Never</b>	Officer/Director/Manager/Key Personnel				Officer/Director/Manager/Key Personnel			
	Name: _____				Name: _____			
	Title: _____				Title: _____			
	Race and Gender: _____				Race and Gender: _____			
	Percent Owned: _____				Percent Owned: _____			
Sets policy for company direction/scope of operations	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Bidding and estimating	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Major purchasing decisions	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Marketing and sales	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Supervises field operations	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Attend bid opening and lettings	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Perform office management (billing, accounts receivable/payable, etc.)	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Hires and fires management staff	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Hire and fire field staff or crew	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Designates profits spending or investment	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Obligates business by contract/credit	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Purchase equipment	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>
Signs business checks.	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>	A <input type="checkbox"/>	F <input type="checkbox"/>	S <input type="checkbox"/>	N <input type="checkbox"/>

Do any of the persons listed in B1 or B2 perform a management or supervisory function for any other business? If Yes, identify the person, the business, and their title/function: \_\_\_\_\_

Do any of the persons listed above own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.) If Yes, describe the nature of the business relationship: \_\_\_\_\_

**C. Inventory:** Indicate your firm's inventory in the following categories (Please attach additional sheets if needed):

**1. Equipment and Vehicles**

Make and Model	Current Value	Owned or Leased by Firm or Owner?	Used as collateral?	Where is item stored?
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				
7. _____				
8. _____				
9. _____				

**2. Office Space**

Street Address	Owned or Leased by Firm or Owner?	Current Value of Property or Lease
_____		
_____		
_____		



**3. Storage Space** (Provide signed lease agreements for the properties listed)

Street Address	Owned or Leased by Firm or Owner?	Current Value of Property or Lease
----------------	--------------------------------------	------------------------------------

---



---

**D. Does your firm rely on any other firm for management functions or employee payroll?**  Yes  No

**E. Financial/Banking Information** (Provide bank authorization and signature cards)

Name of bank: \_\_\_\_\_ City and State: \_\_\_\_\_  
The following individuals are able to sign checks on this account: \_\_\_\_\_

Name of bank: \_\_\_\_\_ City and State: \_\_\_\_\_  
The following individuals are able to sign checks on this account: \_\_\_\_\_

**Bonding Information:** If you have bonding capacity, identify the firm's bonding aggregate and project limits:  
Aggregate limit \$ \_\_\_\_\_ Project limit \$ \_\_\_\_\_

**F. Identify all sources, amounts, and purposes of money loaned to your firm including from financial institutions. Identify whether you the owner and any other person or firm loaned money to the applicant DBE/ACDBE. Include the names of any persons or firms guaranteeing the loan, if other than the listed owner.**  
(Provide copies of signed loan agreements and security agreements).

Name of Source	Address of Source	Name of Person Guaranteeing the Loan	Original Amount	Current Balance	Purpose of Loan
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

**G. List all contributions or transfers of assets to/from your firm and to/from any of its owners or another individual over the past two years** (Attach additional sheets if needed):

Contribution/Asset	Dollar Value	From Whom Transferred	To Whom Transferred	Relationship	Date of Transfer
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

**H. List current licenses/permits held by any owner and/or employee of your firm**  
(e.g. contractor, engineer, architect, etc.) (Attach additional sheets if needed):

Name of License/Permit Holder	Type of License/Permit	Expiration Date	State
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____



**I. List the three largest contracts completed by your firm in the past three years, if any:**

Name of Owner/Contractor	Name/Location of Project	Type of Work Performed	Dollar Value of Contract
1.			
2.			
3.			

**J. List the three largest active jobs on which your firm is currently working:**

Name of Prime Contractor and Project Number	Location of Project	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
1.					
2.					
3.					

**AIRPORT CONCESSION (ACDBE) APPLICANTS ONLY MUST COMPLETE THIS SECTION**

**Identify the following information concerning the ACDBE applicant firm:**

<u>Concession Space</u>	<u>Address / Location at Airport</u>	<u>Value of Property or Lease</u>	<u>Fees/Lease Payments Paid to the Airport</u>

**Provide information concerning any other airport concession businesses the applicant firm or any affiliate owns and/or operates, including name, location, type of concession, and start date of concession**

<u>Name of Concession</u>	<u>Location</u>	<u>Type of Concession</u>	<u>Start Date of Concession</u>



### AFFIDAVIT OF CERTIFICATION

*This form must be signed and notarized for each owner upon which disadvantaged status is relied.*

**A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (full name printed),  
swear or affirm under penalty of law that I am  
\_\_\_\_\_ (title) of the applicant firm  
\_\_\_\_\_ and that I  
have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract, subcontract, concession lease or sublease, I agree to promptly and directly provide the prime contractor, if any, and the Department, recipient agency, or federal funding agency on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the recipient agency or Unified Certification Program of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership changes, address/telephone number, personal net worth exceeding \$1.32 million, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

I certify that I am a socially and economically disadvantaged individual who is an owner of the above-referenced firm seeking certification as a Disadvantaged Business Enterprise or Airport Concession Disadvantaged Business Enterprise. In support of my application, I certify that I am a member of one or more of the following groups, and that I have held myself out as a member of the group(s): (Check all that apply):

- Female     Black American     Hispanic American
- Native American     Asian-Pacific American
- Subcontinent Asian American     Other (specify)

I certify that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified above, without regard to my individual qualities.

I further certify that my personal net worth does not exceed \$1.32 million, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I declare under penalty of perjury that the information provided in this application and supporting documents is true and correct.

Signature \_\_\_\_\_ (DBE/ACDBE Applicant)      \_\_\_\_\_ (Date)

#### NOTARY CERTIFICATE



## UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST

In order to complete your application for DBE or ACDBE certification, you must attach copies of all of the following **REQUIRED** documents. A failure to supply any information requested by the UCP may result in your firm denied DBE/ACDBE certification.

### Required Documents for All Applicants

- Résumés (that include places of employment with corresponding dates), for all owners, officers, and key personnel of the applicant firm
- Personal Net Worth Statement for each socially and economically disadvantaged owners comprising 51% or more of the ownership percentage of the applicant firm.
- Personal Federal tax returns for the past 3 years, if applicable, for each disadvantaged owner
- Federal tax returns (and requests for extensions) filed by the firm and its affiliates with related schedules, for the past 3 years.
- Documented proof of contributions used to acquire ownership for each owner (e.g., both sides of cancelled checks)
- Signed loan and security agreements, and bonding forms
- List of equipment and/or vehicles owned and leased including VIN numbers, copy of titles, proof of ownership, insurance cards for each vehicle.
- Title(s), registration certificate(s), and U.S. DOT numbers for each truck owned or operated by your firm
- Licenses, license renewal forms, permits, and haul authority forms
- Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past 2 years
- DBE/ACDBE and SBA 8(a), SDB, MBE/WBE certifications, denials, and/or decertifications, if applicable; and any U.S. DOT appeal decisions on these actions.
- Bank authorization and signatory cards
- Schedule of salaries (or other remuneration) paid to all officers, managers, owners, and/or directors of the firm
- List of all employees, job titles, and dates of employment.
- Proof of warehouse/storage facility ownership or lease arrangements

### Partnership or Joint Venture

- Original and any amended Partnership or Joint Venture Agreements

### Corporation or LLC

- Official Articles of Incorporation (signed by the state official)
- Both sides of all corporate stock certificates and your firm's stock transfer ledger
- Shareholders' Agreement(s)
- Minutes of all stockholders and board of directors meetings

- Corporate by-laws and any amendments
- Corporate bank resolution and bank signature cards
- Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

### Optional Documents to Be Provided on Request

The UCP to which you are applying may require the submission of the following documents. If requested to provide these document, you must supply them with your application or at the on-site visit.

- Proof of citizenship
- Insurance agreements for each truck owned or operated by your firm
- Audited financial statements (if available)
- Personal Federal Tax returns for the past 3 years, if applicable, for other disadvantaged owners of the firm.
- Trust agreements held by any owner claiming disadvantaged status
- Year-end balance sheets and income statements for the past 3 years (or life of firm, if less than three years)

### Suppliers

- List of product lines carried and list of distribution equipment owned and/or leased





U.S. Department of  
Transportation

**Personal Net Worth Statement  
For DBE/ACDBE Program Eligibility**

As of \_\_\_\_\_

OMB APPROVAL NO:

EXPIRATION DATE:

This form is used by all participants in the U.S. Department of Transportation's Disadvantaged Business Enterprise (DBE) Programs. Each individual owner of a firm applying to participate as a DBE or ACDBE, whose ownership and control are relied upon for DBE certification must complete this form. Each person signing this form authorizes the Unified Certification Program (UCP) recipient to make inquiries as necessary to verify the accuracy of the statements made. The agency you apply to will use the information provided to determine whether an owner is economically disadvantaged as defined in the DBE program regulations 49 C.F.R. Parts 23 and 26. Return form to appropriate UCP certifying member, not U.S. DOT.

Name		Business Phone
Residence Address (As reported to the IRS) City, State and Zip Code		Residence Phone
Business Name of Applicant Firm		
Spouse's Full Name (Marital Status: Single, Married, Divorced, Union)		

ASSETS		(Omit Cents)	LIABILITIES		(Omit Cents)
Cash and Cash Equivalents	\$		Loan on Life Insurance (Complete Section 5)	\$	
Retirement Accounts (IRAs, 401Ks, 403Bs, Pensions, etc.) (Report full value minus tax and interest penalties that would apply if assets were distributed today) (Complete Section 3)	\$		Mortgages on Real Estate Excluding Primary Residence Debt (Complete Section 4)	\$	
Brokerage, Investment Accounts	\$		Notes, Obligations on Personal Property (Complete Section 6)	\$	
Assets Held in Trust	\$		Notes & Accounts Payable to Banks and Others (Complete Section 2)	\$	
Loans to Shareholders & Other Receivables (Complete section 6)	\$		Other Liabilities (Complete Section 8)	\$	
Real Estate Excluding Primary Residence (Complete Section 4)	\$		Unpaid Taxes (Complete Section 8)	\$	
Life Insurance (Cash Surrender Value Only) (Complete Section 5)	\$				
Other Personal Property and Assets (Complete Section 6)	\$				
Business Interests Other Than the Applicant Firm (Complete Section 7)	\$				
Total Assets	\$		Total Liabilities	\$	
			<b>NET WORTH</b>		

**Section 2. Notes Payable to Banks and Others**

Name of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Brokerage and custodial accounts, stocks, bonds, retirement accounts. (Full Value) (Use attachments if necessary).**

Name of Security / Brokerage Account / Retirement Account	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

**Section 4. Real Estate Owned (Including Primary Residence, Investment Properties, Personal Property Leased or Rented for Business Purposes, Farm Properties, or any Other Income Producing property). (List each parcel separately. Add additional sheets if necessary).**

	Primary Residence	Property B	Property C
Type of Property			
Address			
Date Acquired and Method of Acquisition (purchase, inherit, divorce, gift, etc.)			
Names on Deed			
Purchase Price			
Present Market Value			
Source of Market Valuation			
Name of all Mortgage Holders			
Mortgage Acc. # and balance (as of date of form)			
Equity line of credit balance			
Amount of Payment Per Month/Year (Specify)			

**Section 5. Life Insurance Held (Give face amount and cash surrender value of policies, name of insurance company and beneficiaries).**

Insurance Company	Face Value	Cash Surrender Amount	Beneficiaries	Loan on Policy Information

**Section 6. Other Personal Property and Assets (Use attachments as necessary)**

Type of Property or Asset	Total Present Value	Amount of Liability (Balance)	Is this asset insured?	Lien or Note amount and Terms of Payment
Automobiles and Vehicles (including recreation vehicles, motorcycles, boats, etc.) Include personally owned vehicles that are leased or rented to businesses or other individuals.				
Household Goods / Jewelry				
Other (List)				
Accounts and Notes Receivables				

**Section 7. Value of Other Business Investments, Other Businesses Owned (excluding applicant firm)**

Sole Proprietorships, General Partners, Joint Ventures, Limited Liability Companies, Closely-held and Public Traded Corporations

**Section 8. Other Liabilities and Unpaid Taxes (Describe)**

**Section 9. Transfer of Assets: Have you within 2 years of this personal net worth statement, transferred assets to a spouse, domestic partner, relative, or entity in which you have an ownership or beneficial interest including a trust? Yes  No  If yes, describe.**

I declare under penalty of perjury that the information provided in this personal net worth statement and supporting documents is complete, true and correct. I certify that no assets have been transferred to any beneficiary for less than fair market value in the last two years. I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application and this personal net worth statement, and I authorize such agency to contact any entity named in the application or this personal financial statement, including the names banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility. I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

**NOTARY CERTIFICATE:**

(Insert applicable state acknowledgment, affirmation, or oath)

Signature (DBE/ACDBE Owner)

Date

In collecting the information requested by this form, the Department of Transportation complies with Federal Freedom of Information and Privacy Act (5 U.S.C. 552 and 552a) provisions. The Privacy Act provides comprehensive protections for your personal information. This includes how information is collected, used, disclosed, stored, and discarded. Your information will not be disclosed to third parties without your consent. The information collected will be used solely to determine your firm's eligibility to participate in the Disadvantaged Business Enterprise (DBE) Program or Airport Concessionaire DBE Programs as defined in 49 C.F.R. Parts 23 and 26. You may review DOT's complete Privacy Act Statement in the Federal Register published on April 11, 2000 (65 FR 19477).



## General Instructions for Completing the Personal Net Worth Statement for DBE/ACDBE Program Eligibility

Please do not make adjustments to your figures pursuant to U.S. DOT regulations 49 C.F.R. Parts 23 and 26. The agency that you apply to will use the information provided on your completed Personal Net Worth (PNW) Statement to determine whether you meet the economic disadvantage requirements of 49 C.F.R. Parts 23 and 26. If there are discrepancies or questions regarding your form, it may be returned to you to correct and complete again.

An individual's personal net worth according to 49 C.F.R. Parts 23 and 26 includes only his or her own share of assets held separately, jointly, or as community property with the individual's spouse and excludes the following:

- Individual's ownership interest in the applicant firm;
- Individual's equity in his or her primary residence;
- Tax and interest penalties that would accrue if retirement savings or investments (e.g., pension plans, Individual Retirement Accounts, 401(k) accounts, etc.) were distributed at the present time.

Indicate on the form, if any items are jointly owned. If the personal net worth of the majority owner(s) of the firm exceeds \$1.32 million, as defined by 49 C.F.R. Parts 23 and 26, the firm is not eligible for DBE or ACDBE certification. If the personal net worth of the majority owner(s) exceeds the \$1.32 million cap at any time after your firm is certified, the firm is no longer eligible for certification. Should that occur, it is your responsibility to contact your certifying agency in writing to advise that your firm no longer qualifies as a DBE or ACDBE. You must fill out all line items on the Personal Net Worth Statement.

If necessary, use additional sheets of paper to report all information and details. If you have any questions about completing this form, please contact one of the UCP certifying agencies.

### Assets

All assets must be reported at their current fair market values as of the date of your statement. *Assessor's assessed value for real estate, for example, is not acceptable.* Assets held in a trust should be included.

**Cash and Cash Equivalents:** On page 1, enter the total amount of cash or cash equivalents in bank accounts, including checking, savings, money market, certificates of deposit held domestic or foreign. Provide copies of the bank statement.

**Retirement Accounts, IRA, 401Ks, 403Bs, Pensions:** On page 1, enter the full value minus tax and interest penalties that would apply if assets were distributed as of the date of the form. Describe the number of shares, name of securities, cost market value, date of quotation, and total value in section 3 on page 2.

**Brokerage and Custodial Accounts, Stocks, Bonds, Retirement Accounts:** Report total value on page 1, and on page 2, section 3, enter the name of the security, brokerage account, retirement account, etc.; the cost; market value of the asset; the date of quotation; and total value as of the date of the PNW statement.

**Assets Held in Trust:** Enter the total value of the assets held in trust on page 1, and provide the names of beneficiaries and trustees, and other information in Section 6 on page 3.

**Loans to Shareholders and Other Receivables not listed:** Enter amounts loaned to you from your firm, from any other business entity in which you hold an ownership interest, and other receivables not listed above. Complete Section 6 on page 3.

**Real Estate:** The total value of real estate excluding your primary residence should be listed on page 1. In section 4 on page 2, please list your primary residence in column 1, including the address, method of acquisition, date of acquired, names of deed, purchase price, present fair market value, source of market valuation, names of all mortgage holders, mortgage account number and balance, equity line of credit balance, and amount of payment. List this information for all real estate held. Please ensure that this section contains all real estate owned, including rental properties, vacation properties, commercial properties, personal property leased or rented for business purposes, farm properties and any other income producing properties, etc. Attach additional sheets if needed.

**Life Insurance:** On page 1, enter the cash surrender value of this asset. In section 5 on page 2, enter the name of the insurance company, the face value of the policy, cash surrender value, beneficiary names, and loans on the policy.

**Other Personal Property and Assets:** Enter the total value of personal property and assets you own on page 1. Personal property includes motor vehicles, boats, trailers, jewelry, furniture, household goods, collectibles, clothing, and personally owned vehicles that are leased or rented to businesses or other individuals. In section 6 on page 3, list these assets and enter the present value, the balance of any liabilities, whether the asset is insured, and lien or note information and terms of payments. For accounts and notes receivable, enter the total value of all monies owed to you personally, if any. This should include shareholder loans to the applicant firm, if those exist. If the asset is insured, you may be asked to provide a copy of the policy. You may also be asked to provide a copy of any liens or notes on the property.

**Other Business Interests Other than Applicant Firm:** On page 1, enter the total value of your other business investments (excluding the applicant firm). In section 7 on page 3, enter information concerning the businesses you

hold an ownership interest in, such as sole proprietorships, partnerships, joint ventures, corporations, or limited liability corporations (other than the applicant firm). Do not reduce the value of these entries by any loans from the outside firm to the DBE/ACDBE applicant business.

### **Liabilities**

**Mortgages on Real Estate:** Enter the total balance on all mortgages payable on real estate on page 1.

**Loans on Life Insurance:** Enter the total value of all loans due on life insurance policies on page 1, and complete section 5 on page 2.

**Notes & Accounts Payable to Bank and Others:** On page 1, section 2, enter details concerning any liability, including name of noteholders, original and current balances, payment terms, and security/collateral information. The entries should include automobile installment accounts. This should not, however, include any mortgage balances as this information is captured in section 4. Do not include loans for your business or mortgages for your properties in this section. You may be asked to submit copy of note/security agreement, and the most recent account statement.

**Other Liabilities:** On page 1, enter the total value due on all other liabilities not listed in the previous entries. In section 8, page 3, report the name of the individual obligated, names of co-signers, description of the liability, the name of the entity owed, the date of the obligation, payment amounts and terms. Note: Do not include contingent liabilities in this section. Contingent liabilities are liabilities that belong to you only if an event(s) should occur. For example, if you

have co-signed on a relative's loan, but you are not responsible for the debt until your relative defaults, that is a contingent liability. Contingent liabilities do not count toward your net worth until they become actual liabilities.

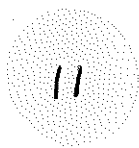
**Unpaid Taxes:** Enter the total amount of all taxes that are currently due, but are unpaid on page 1, and complete section 8 on page 3. Contingent tax liabilities or anticipated taxes for current year should not be included. Describe in detail the name of the individual obligated, names of co-signers, the type of unpaid tax, to whom the tax is payable, due date, amount, and to what property, if any, the tax lien attaches. If none, state "NONE." You must include documentation, such as tax liens, to support the amounts.

### **Transfers of Assets:**

**Transfers of Assets:** If you checked the box indicating yes on page 3 in this category, provide details on all asset transfers (within 2 years of the date of this personal net worth statement) to a spouse, domestic partner, relative, or entity in which you have an ownership or beneficial interest including a trust. Include a description of the asset; names of individuals on the deed, title, note or other instrument indicating ownership rights; the names of individuals receiving the assets and their relation to the transferor; the date of the transfer; and the value or consideration received. Submit documentation requested on the form related to the transfer.

### **Affidavit**

Be sure to sign and date the statement. The Personal Net Worth Statement must be notarized



**No Change Affidavit**

I \_\_\_\_\_, swear<sup>1</sup> (or affirm) that there have been no changes in \_\_\_\_\_ circumstances affecting its ability to meet the size, disadvantaged status, ownership, or control requirements of 49 CFR Part 26 and 13 CFR Part 121. I swear (or affirm) there have been no material changes in the information provided with \_\_\_\_\_ application for certification, except for any changes about which I have provided written notice to \_\_\_\_\_ pursuant to 49 CFR § 26.83(i).

I swear (or affirm) that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified in 49 CFR § 26.5, without regard to my individual qualities. I further swear (or affirm) that my personal net worth does not exceed \$1.32 million, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I specifically swear (or affirm) \_\_\_\_\_ continues to meet the Small Business Administration (SBA) business size criteria and the overall gross receipts cap of 49 CFR Part 26 and \_\_\_\_\_ average annual gross receipts (as defined by SBA rules) over the previous three fiscal years do not exceed \$\_\_\_\_\_

I provide the attached size and gross receipts documentation to support this affidavit.

Signature \_\_\_\_\_ Date \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, before me appeared (name) \_\_\_\_\_, to me personally known, who, being duly sworn, did execute the foregoing affidavit and did state that he or she was properly authorized by (name of firm) \_\_\_\_\_, to execute the affidavit and did so as his or her free act and deed.

(SEAL/STAMP)

Notary Public \_\_\_\_\_ Commission Expires \_\_\_\_\_

<sup>1</sup> Knowingly and willfully providing false information to the Federal government is a violation of 18 U.S.C. Section 1001 (False Statements) and could subject you to fines, imprisonment or both.

**49 CFR § 26.85, INTERSTATE CERTIFICATION**

**ConnDOT chooses to review all out-of-state applications as provided in § 26.85(c). The following applies with respect to any firm that is currently certified in its home state and wishes to become certified by the ConnDOT DBE Program. All such firms:**

- (1) Must provide to ConnDOT a complete copy of your home state application form, all supporting documents and any other information related to your firm's certification that you have submitted to your home state or any other state. This includes affidavits of no change and any notices of changes that you have submitted to your home state, as well as any correspondence you have had with your home state UCP or any other recipient concerning your application or status as a DBE firm.
- (2) Must provide to ConnDOT any notices or correspondence from states other than your home state relating to your status as an applicant or certified DBE in those states. If you have been denied certification or were decertified in another state, or are subject to a decertification action there, you must inform ConnDOT of this fact and provide all documentation concerning this action to ConnDOT.
- (3) Must submit the below affidavit sworn to by all of the firm's owners before a person who is authorized by State law to administer oaths or an unsworn declaration executed under penalty of perjury of the laws of the United States.
- (4) If you have filed a certification appeal with USDOT, you must inform ConnDOT of the fact and provide your letter of appeal and USDOT's response to ConnDOT.

**AFFIDAVIT OF CERTIFICATION FOR OUT-OF-STATE APPLICANTS**

*This form must be signed and sworn to be each owner of the applicant firm. Use additional forms if necessary.*

**ANY MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION OR AFFIDAVIT IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (print full name), declare under penalty of law that I have submitted all of the information required by 49 CFR 26.85(c). This information is complete and, in the case of the requirements of § 26.85(c)(1), is identical to the information which served as the basis for my home state certification. Further, I declare under penalty of perjury that all facts in my most recent on-site report remain true and correct.

Executed \_\_\_\_\_  
(Date)

**NOTARY CERTIFICATE**

Signature \_\_\_\_\_  
(Applicant Owner)

**Connecticut Department of Transportation**  
**Disadvantaged Business Enterprise Goal and Methodology Report - FHWA**  
**FFY 2016 – 2018**

**Amount of Goal**

The State of Connecticut Department of Transportation's (CTDOT) overall goal for DBE Participation for the Federal Fiscal Years (FFY) October 1, 2015 through September 30, 2018 is **13%** of the Federal financial assistance CTDOT will expend on DOT-assisted contracts.

**Local Market Area**

In order to determine the appropriate market area for Connecticut, whether it is the political borders of the State or whether CTDOT should also look at neighboring areas (such as NY, RI or MA) for available firms, we looked at the bid amounts of the Prime Contractors and the subcontract amounts for all DBE Contractors for the past three years and separated these figures according to the home-state of the Prime or DBE firm.

In addition to looking at the dollar value of the projects, we also calculated the percentages for the number of projects per state and the number of contractors per state. We calculated these figures to compensate for highly priced projects (specifically 92-522, performed by a Massachusetts firm, and 151-273, performed by a joint venture between a CT and NY firm) that would otherwise unduly skew the data. Based on our calculations, the majority of projects are being awarded to CT Prime Contractors and an overwhelming percentage of dollars are going to DBE firms from the State of CT. Therefore, there is not a need to expand CTDOT's Local Market Area beyond the borders of the State. Though the Local Market Area is confined to the state of CT, when determining the ready, willing, and able list, CTDOT examined all firms who bid, performed work, or expressed interest in CTDOT projects, including those outside of CT borders.

**FHWA Local Market Area – Prime Contractors**

State of Prime	# of Projects	% of Projects	# of Firms	% of Firms	\$ Amount	\$ Percentage
CT	88	80%	40	78.4%	\$458,689,304.01	61.1%
MA	16	14.5%	7	13.7%	\$152,000,108.08	20.2%
NY	2	1.8%	2	3.9%	\$133,641,771.00	17.8%
PA	4	3.6%	2	3.9%	\$6,843,154.47	0.9%
<b>Total</b>	<b>110</b>		<b>51</b>		<b>\$751,174,337.56</b>	

**FHWA Local Market Area – DBE Subcontractors**

State of DBE	# of Firms	% of Firms	\$ Amount	\$ Percentage
CT	43	82.7%	\$85,854,347.79	98.4%
MA	4	7.7%	\$664,095.25	0.8%
ME	2	3.8%	\$294,648.63	0.3%
NJ	1	1.9%	\$379,118.00	0.4%
RI	1	1.9%	\$59,348.79	0.1%
NY	1	1.9%	\$18,600.00	0.0%
<b>Total</b>	<b>52</b>		<b>\$87,270,158.46</b>	



## Methodology Used to Calculate Overall Goal

### **Step 1:**

The process for calculating the goal begins with creating an available firm “universe” consisting of all firms that are “ready, willing and able” to perform on FHWA projects, and from this listing determine what percentage of the firms were DBE certified. CTDOT created this “universe” by beginning with the database compiled from the responses of the Vendor Profile Survey that CTDOT sent out this year. The Vendor Profile Survey is also posted on the CTDOT website and is provided to firms seeking contracting opportunities with the Department. All firms who have performed work, submitted bids, are currently listed in the CTDOT Vendor Profile database or firms that have Affirmative Action Plans on file with the Office of Contract Compliance receive Vendor Profile Surveys. CTDOT provides equal opportunity to all firms, DBE and non-DBE, for completion of the surveys, in order to ensure the responses are a fair representation of the participating firms. The Office of Contract Compliance does emphasize the importance of filling out the surveys to all firms at events where contractors, DBE and non-DBE, are present, in order for CTDOT to receive important information regarding the firms. The Department receives Vendor Profile Surveys throughout the year, and every three years a major mailing is sent to all firms having vendor profile data on file. This information is used to update the information maintained in the Department’s database. The Vendor Profile Survey included questions such as whether they worked, were interested in performing work, were capable of working, or submitted bids in the past year; the type of work they perform (contractor, supplier, consultant, etc.); the Federal Modals they work (Highway, Transit); their NAICS code; and whether they were a DBE. We also ask for a list of subcontractors that they do business with and we forward Vendor Profile Surveys to those firms if they are not already in the database.

In order to ensure a more complete “universe”, CTDOT also collected names of firms provided by the Office of Contracts and Office of Construction, both contractors and subcontractors, who either submitted bids or performed work on FHWA projects over the past three years, and included them in the Vendor Profile database in the event they had not submitted a Vendor Profile Survey. We also received a similar listing of consulting firms that bid or performed work on FHWA projects over the past three years from CTDOT’s Agreements Office. Utilizing the firms’ websites, we examined and verified the firms’ scope of work and which Transportation Mode they performed work for. They were then included in the appropriate categories. After verifying all of the listed DBE firms were still certified, we now had our listings of “ready, willing, and able” firms that we could use to calculate the availability of DBEs to meet the Department’s goals.

In order to accurately reflect the available firms for these projects, we first filtered the Vendor Profile database to only include contractors, subcontractors and consultants who performed or were interested in performing work, were capable of performing work, or bid on projects for Federal Highway jobs. We then performed separate calculations for the firms that could work on Construction Projects from the firms who performed on Consultant Agreements. For the Construction Projects, this would include Contractors (including subcontractors), Trucking firms, and Construction related Suppliers/Manufacturers. In order to ensure an accurate count, and to avoid double-counting, we counted the firms under the type of work they most frequently perform. For the Consultants, we included any firm that performed Consulting or Professional Services

For each category, we then identified which firms were certified as DBE and calculated the percentages.

**Number of "Ready, Willing, and Able" Firms and DBE Firms**

Category	# of Firms	# of DBE Firms
Contractors	434	52
Suppliers/Manufacturers	47	9
Trucking Firms	41	9
<b>Total</b>	<b>522</b>	<b>70</b>
Consultants	237	38

**Percentage Calculation:**  $70/522 = 13.4\%$  DBE Firms for Construction  
 $61/481 = 12.7\%$  DBE Firms for Contractors/Suppliers/  
 Manufacturers  
 $9/41 = 22\%$  DBE Firms for Trucking  
 $38/237 = 16\%$  DBE Firms for Consultant

CTDOT also looked at potential DBE firms that were not currently certified. We examined firms that were currently certified in the SBE program as minority or female owned businesses and were also certified to perform DOT work, but were not part of the DBE program. Included in this list were firms that were already decertified from the DBE program (including failure to maintain ability to perform work in the area of certification and exceeding the PNW requirement), firms that were not related to the Construction/Consulting industries (jobs services, livery service, office supplies, etc.), firms that performed work for other agencies (FAA), and firms that though they met the SBE requirement, would not be eligible for the DBE Program. In order to ensure that the goals were not inflated based upon contingent circumstances, CTDOT based our goals on the current market of "ready, willing and able" firms. Since none of the SBE Firms met the eligibility requirements for the DBE Program, they were not included as part of the calculations for "ready, willing, and able" firms. In the event there should be a statistically significant increase of available/eligible DBE firms, the Department will make the necessary adjustments and submit an amended goal to FHWA.

**Weighting:**

Following the suggestions provided by the Office of Small and Disadvantaged Business Utilization, CTDOT performed calculations to weight these firms based on their availability in order to determine the most accurate predictions for providing work to these firms. Though each individual project will still have their goal determined on an individual basis allowing for all DBE participation possible, it is important to create as accurate a picture of the overall general availability, in order to create a goal that both maximizes opportunities, but also will be realistically obtainable for both the DOT and the prime contractors. For the sake of weighting, Contractors and Suppliers/Manufacturers were combined as these firms are commonly used on construction projects, with Trucking Firms being included with the construction projects, but at a reduced percentage (approximately 5%), in order to accurately reflect their more limited participation on projects. The 5% for Trucking firms was calculated based on the average participation of trucking firms for Construction projects. Some projects planned for the next three years would not require trucking, while some would require greater trucking participation, but on the whole 5% of the total contract dollars would go towards trucking subcontractors. Due to the nature of their work, consultants and professional services were included with the Consultant Agreements, and weighted separately as well.

In order to determine this projected availability, CTDOT utilized the Department's Obligation List. This list contains all up-coming projects for the State and their various stages of development. The listing provided project #, town, project description, phase, dollar estimates, schedule of

submittal/advertising dates, and were divided according to the type of project, the federal fiscal year it was planned for, and the status of the project based on its funding availability.

In addition to selecting projects that would only occur within the next three fiscal years, the period of time for the Department's goal, we further narrowed the listing by limiting this to projects with federal funding attached and were categorized as "Fundable" or the money was already secured. We then created a database of these selected projects, listing the project #, the town, the district, the category (or type of project, ex. On-System Bridge or National Highway System), the description of the work, the total dollar amount, the federal dollar amount, and the scheduled date for federal authorization. We designated the projects according to whether they would require contractors or consultants, and created additional categories in order to separate projects that traditionally did not provide any subcontracting opportunities, not only for the DBEs but for all firms.

We had two categories for projects in the Construction phase for contracting work: Construction and Maintenance. We defined Maintenance as the projects that would offer very little subcontracting opportunities. This is due to the length of project, manner of work, and the type of contractors who bid on the project. We based which projects were selected as not having subcontracting opportunities through conversations with Capital Design, who were able to provide further descriptions for what the projects would most likely require (some of the projects are still in the design phase), and through our own knowledge of what work the DBE firms could perform and what work is currently unrepresented. Though these projects were removed as not having subcontracting opportunities for the purpose of calculating an accurate overall goal for the next three years, this does not limit the potential to still add DBE subcontracting opportunities to any and all future projects, should availability for DBEs be determined at the time of setting the goal. These included nine pedestrian improvement projects, four modernization of railroad crossings, two ADA curb ramp installations, and two installations of rumble strips. Each of these projects were predicted as requiring only one or two firms to perform the work and there are currently no DBE firms certified to perform this type of work.

We also had separate categories for projects at the PE (preliminary engineering) phase, which would be the types of projects available for Consultants, and projects at the ROW (rights of way) phase, which would not allow for any subcontracting opportunities for CTDOT's certified DBE consultants or subcontracting consultants in general.

Once the projects were divided according to category, we then calculated what percentage of the Federal Dollars would be going to each type of project, in order to determine what percentage of future project dollars would be available for DBE subcontracting opportunities, based on the two primary types of DBE firms – the DBE contractors/trucking/suppliers and the DBE consultants. Though CTDOT is utilizing the Future Projects and amount of Federal Assistance to determine the availability for opportunities, we are not altering the goal based on increases/decreases in Federal support. We are strictly using the future projects to weight separately the availability of construction projects versus consultant agreements.

**Calculations for Upcoming Projects for FFY 2013-2015**

**Project Contract/Consultant Agreement Breakdown**

<b>Total Federal Dollars</b>	<b>\$1,487,784,545</b>	
<b>Project Contracts</b>	<b>\$1,427,799,265</b>	<b>96%</b>
<b>Consultant Agreements</b>	<b>\$59,985,280</b>	<b>4%</b>

**Project Contract Calculations**

<b>Project Contracts</b>	\$1,427,799,265
<b>Maintenance Projects</b>	\$17,095,938
<b>Construction Projects</b>	\$1,427,799,265 - \$17,095,938 = <b>\$1,410,703,327</b>
<b>Construction Project Percentage</b>	\$1,410,703,327/\$1,487,784,545 = <b>94.8%</b>

94.8% would be the percent of Federal Dollars available for Construction Projects with subcontracting opportunities.

The 94.8% for Construction Projects needed to be further broken down to reflect the 95% availability for Contractors/Suppliers/Manufacturers and the 5% availability for Trucking Firms.

**Contractors/Suppliers/Manufacturers:  $94.8 \times .95 = 90.1\%$**   
**Trucking Firms:  $94.8 \times .05 = 4.7\%$**

**Consultant Agreement Calculations**

<b>Consultant Agreements</b>	\$59,985,280
<b>Rights of Way Projects</b>	\$7,043,500
<b>PE Consultant Agreements</b>	\$59,985,280 - \$7,043,500 = <b>\$52,941,780</b>
<b>PE Consultant Agreement Percentage</b>	\$52,941,780/\$1,487,784,545 = <b>3.6%</b>

3.6% would be the percent of Federal Dollars available for PE Consultant Agreements with subcontracting opportunities.

In order to calculate the base figure FHWA DBE goal for the Department, we needed to prepare the weighted values for the DBE Percentages of Construction Projects and Consultant Agreements, in order to provide a more accurate picture of available subcontracting opportunities for the DBE firms. To do this, we multiplied the percentage of available DBE firms by the percentage of total Federal Dollars available, for the corresponding type of project.

**Overall DBE Goal = (Percent of Available Construction Project DBE Contractors/Suppliers/Manufacturers x Percent of Federal Dollars for Construction/Supplier/ Manufacture Firms on Projects) + (Percent of Available Construction Project DBE Trucking firms x Percent of Federal Dollars for Trucking firms on Projects) + (Percent of Available Consultant Agreement DBE Firms x Percent of Federal Dollars for Consultant Agreements)**

**FHWA Base Figure DBE Goal Calculation**

<b>Percent of Available DBE Firms for Contractors/Suppliers/Manufacturers</b>	12.7
<b>Percent of Federal Dollars for Contractors/Suppliers/Manufacturers on Construction Projects</b>	90.1
<b>Percent of Available DBE Firms for Trucking</b>	22
<b>Percent of Federal Dollars for Trucking on Construction Projects</b>	4.7
<b>Percent of Available DBE Firms for Consultant Agreements</b>	16

<b>Percent of Federal Dollars for Consultant Agreements</b>	3.6
<b>FHWA Base Figure DBE Goal</b>	$(12.7 \times .901) + (22 \times .047) + (16 \times .036)$ 11.4 + 1 + .6 = 13%

13% is the base figure for the FHWA DBE Goal.

**Step 2:**

After calculating the base figure for the DBE Goal, we examined evidence to determine if any adjustment was needed, in order to improve the precision of the goal, based on all other available evidence. FHWA recommended using a Disparity Study, in order to gain the best possible statistical study of the existence of discrimination in contracting, and the most accurate figures as to the ready, willing, and able DBE firms compared to the available opportunities and actual participation. However, as of the completion of this report, the state of Connecticut has not yet performed a disparity study. Without a disparity study, examining figures provided by a census study, such as whether there has been an increase or decrease in minority population in CT, whether there has been an increase or decrease in minority owned-businesses, etc. would be without the necessary context to determine whether these numbers reveal any evidence of discrimination or proof of being economically and socially disadvantaged. As a result, these numbers are likely to not provide relevant and reliable data needed for determining whether adjustments to CTDOT's goal are necessary. Therefore, CTDOT examined our goals and participation achievements for the past four years, to provide accurate and relevant data for determining whether the present goal is reasonable in light of the actual monetary payments to DBE Firms over the past four years.

**FHWA DBE Goals and Participation Achievement for FFY 2012-2015 (in progress)**

FFY	DBE Goal %	Total DBE Participation	Total Prime Contract Dollar Value	DBE Participation Achieved %
<b>FFY 2012</b>	11	\$113,359,458.44	\$296,208,642.8	38.3
<b>FFY 2013</b>	10.7	\$43,234,966	\$325,358,991	13.3
<b>FFY 2014</b>	10.7	\$41,861,228	\$315,029,145	13.3
<b>FFY 2015 (in progress*)</b>	10.7	\$516,360.02	\$42,534,005.94	1.2

\*2015 participation achievement numbers current as of March 31, 2015.

Based on these figures, we calculate the median of participation achievement amount, in order to gather the most accurate figure for how CTDOT has performed in the past regarding the achievement of the DBE goals through DBE participation (both race neutral and race conscious). Since we have four years' worth of data, the median is calculated by averaging the two numbers in the middle of the series.

$$(13.3 + 13.3)/2 = 13.3\%$$

13.3% is the median number for past participation, meaning a difference of .3% from our calculated goal of 13%, based on the percent of "ready, willing, and able" firms for the expected future federally funded CTDOT projects. Given the minimum disparity between these two numbers, CTDOT does not believe it is necessary to adjust the goal calculation from the base figure.

13% is the Overall FHWA DBE Goal that CTDOT is required to meet for the next three Fiscal Years.

**Breakout of Estimated Race-Neutral & Race Conscious Participation**

CTDOT will meet the maximum feasible portion of its overall goal through the use of race-neutral means to facilitate DBE participation. CTDOT uses the following race-neutral means to increase DBE Participation:

1. We will continue to seek out small businesses, owned and controlled by minorities and females, which provide goods and services in areas traditionally underutilized.
2. We offer open houses to these firms allowing them the opportunity to learn how the Department does business and about procurement availabilities. In addition, these open houses provide the opportunity to meet the various department personnel who have procurement responsibilities, as well as meet with prospective prime contractors for potential subcontracting opportunities.
3. We will continue to participate and market the DBE program at workshops and conferences targeted to small business enterprises.
4. We have developed a race neutral program to provide opportunities for small businesses, including those that are certified as DBEs, to participate on CTDOT projects. This program has been instituted as the Small Business Participation Program.

The following is a summary of the basis of our estimated break-out of race-neutral and race conscious DBE participation: In order to calculate what the race-neutral percentage should be for this year, we examined the race-neutral amount achieved on FHWA projects during the past three fiscal years. CTDOT took the total amount of dollars that went to DBE firms through race neutral means and divided it by the total amount of Federal Dollars. Since the overall goals have been the same throughout this period, this should give CTDOT a good indication of how much race neutral participation we are able to get utilizing the previously described methods, as well as the participation on Prime Contracts/Agreements by DBEs and the encouragement of additional DBE participation through the life of a project. The average total will equal the estimated race-neutral participation for the next three fiscal years.

**Breakout of Race Neutral/Race Conscious Participation Calculation**

<b>FFY 2013 Race-Neutral Dollars</b>	\$12,110,446
<b>FFY 2013 Total Dollars</b>	\$154,016,028
<b>FFY 2014 Race-Neutral Dollars</b>	\$13,545,658
<b>FFY 2014 Total Dollars</b>	\$240,950,269
<b>FFY 2015 Race-Neutral Dollars*</b>	\$8,856,740
<b>FFY 2015 Total Dollars*</b>	\$346,887,014
<b>Total Race-Neutral Dollars</b>	\$12,110,446 + \$13,545,658 + \$8,856,740 = \$34,512,844
<b>Total Total Dollars</b>	\$154,016,028 + \$240,950,269 + \$346,887,014 = \$741,853,311
<b>Average Race-Neutral Participation</b>	\$34,512,844 ÷ \$741,853,311 = 4.7%

<b>FFY 2015 – 2018 Overall DBE Goal</b>	13%
<b>FFY 2013 – 2015 Race Conscious Calculation</b>	13 – 4.7 = <b>8.3%</b>

\*2015 participation achievement numbers current as of March 31, 2015.

**Race Neutral Participation = 4.7%; Race Conscious Participation = 8.3%**

We will adjust the estimated break-out of race-neutral and race-conscious participation as needed to reflect the actual DBE participation over the course of the fiscal year, and we will track and report the race-neutral and race-conscious participation separately. For reporting purposes, race-neutral DBE participation includes, but is not necessarily limited to, the following: DBE participation through the awarding of a federal-aid prime contract that a DBE obtains through the customary competitive procurement procedures; a DBE participating as a subcontractor on a federal-aid prime contract that does not carry a DBE goal; DBE participation as a subcontractor on a federal-aid contract that has already exceeded its contract goal; and DBE participation through a subcontract from a prime contractor that did not consider the firm’s DBE status in selecting the firm.

CTDOT will use contract goals to meet any portion of the overall goal that cannot be attained through using race-neutral means. Race-conscious contract goals are established in order that, over the period to which the overall goal applies, they will cumulatively result in meeting the portion of the overall goal that is not projected to be met through the use of race-neutral means.

CTDOT will establish contract goals only on those DOT-assisted contracts that have subcontracting possibilities. The Department will not seek to assign a contract goal on every contract. Goals will be set to assure the Department meets its overall DBE goal and to augment the race-neutral goal achievement.

We will express our contract goals as a percentage of the total amount of a DOT-assisted contract.

**Consultation with Stakeholders**

Prior to submitting the goal to FHWA, CTDOT held two meetings to discuss the methodology: The attendees included contractors, consultants, subcontractors, DBE firms, Minority/Female Organizations, Federal and State Agency Representatives, and other interested parties. The Department has consulted with minority and woman owned firms in addition to industry organizations and business groups regarding the Department’s goal setting process and methodology, through several Task Force Meetings held over the past three years. The methodology proposed in this submission was discussed in depth at the DBE Task Force Meeting, which was held on July 16, 2015. All DBE Firms (contractors and consultants) were invited, as well as various Prime Contractors, Greater New England Minority Supplier Development Council, Center for Latino Progress, City of Bridgeport – Small and Minority Business Resource Center, Connecticut Construction Industry Association, Central Connecticut State University – Institute of Business Development, City of Hartford, City of New Haven – Commission on Equal Opportunities, City of New Haven – Small Business Construction Program, City of Stamford, Greater Hartford Transit District, Greater New Haven Transit District, Northeastern Connecticut Transit District, Windham Regional Transit District, Capital Workforce, Connecticut Business and Industry Association, Connecticut Procurement Technical Assistance Program, CT Transit, Connecticut Technical High School System, Local Unions, New England Laborers Apprenticeship, Northeast Transportation Resource Center, Business Resource Center for Small Businesses – Hartford, and The Metropolitan

District. All invitees were provided with a copy of the proposed methodology and the proposed goals. The following people attended the meeting:

<b>Name</b>	<b>Company/Organization</b>
Dyshann Anderson	AquaStone Graphic Arts & Print, LLC
Tim Arborio	Arborio Corp
Kelly DiCioccio	Arborio Corp
Don Shubert	CT Construction Industries Assoc.
Sebastian Amenta	Comprehensive Environmental, Inc. (CEI)
Gloria Pereira	DP & Sons Construction Co. LLC
Mark Neri	Garg Consulting Services
Andres Lopez	Greater New England Minority Supplier Development Council (GNEMSDC)
Sandy Fry	Greater Hartford Transit District
Lori Richards	Greater New Haven Transit District
Renee LaPointe	CT Transit
Steve Jenkins	Manafort Brothers Inc.
Ida Mussen	O&G Industries
Enrique Millares	Quaker Corp.
Edna Clunie	REC Trucking
Lucy Hernandez	Santoro
Ryan Walker	The Middlesex Corporation
Nikhil Vyas	VB Tech Corp
Manish Bhardwaj	Vista IT Solutions
Amanda Marino	VN Engineers
Jocelyn Chance	JFC Construction
Heidi Balch	CT Technical High School System (CTHSS)

The goals and methodology were discussed at the CTDOT DBE Compliance Seminar, which took place at Connecticut Construction Industries Association (CCIA), 912 Silas Deane Highway, Wethersfield, CT; on July 23, 2015. Invitations were sent out to all CCIA members, which includes nearly all Prime Contractors who perform CTDOT work. The following people attended the meeting:

<b>Name</b>	<b>Company/Organization</b>
Ray Boa	A&J Construction
Kelly DiCioccio	Arborio Corporation
James S. Needham	Brunalli Construction
Clifford Winkel	CDS LLC
Ralph A. Phillips, Jr.	Collins Engineers, Inc.
Daniel O'Connell	Dimeo Construction Company
Colleen Roja	Galasso Materials
Donna Griggs	Galasso Materials
David DeBassio	Hinckley Allen
Nancy D'Addabbo	Infrastructure Materials Management, LLC
Kai Earle	Lane Construction
Steve Jenkins	Manafort Brothers Incorporated
Christine McAllen	McAllen Building



Carolyn Young	Michelson, Kane, Royster & Barger, P.C.
Karin Marshall	Middlesex Company
Karen Baracliff	Nano Construction
Paul Balavender	O&G Industries, Inc.
John Gemetro	O&G Industries, Inc.
Mary O'Dea	Palmer Paving Corporation
Ryan Nadeau	Rotha Contracting Company, Inc.
Janet Mrozowski	Tilcon Connecticut
Tracey Mills	US DOL – OFCCP
Doug Cunningham	Walsh Construction
Jared Cohane	Hinckely Allen
Sandy David	ADF Industries

During the meetings, the participants raised the following questions and concerns regarding the goal methodology and the DBE program in general:

- The Vendor Profile Survey, how it was executed and the importance of completing the survey. CTDOT explained that the Vendor Profiles were sent to every contractor, subcontractor, consultant, sub-consultant, supplier, vendor and manufacturer performing work for the Department and includes both DBE and non-DBE firms, in order to ensure the broadest representation possible. We emphasized the importance of filling these out, specifying that the more responses we received to the Vendor Profile Survey, the more accurate picture of the firms that were ready, willing, and able to perform work in the state would be, and it would not be weighted too significantly by only the firms that actually perform work.
- Race-neutral participation, how it is captured by CTDOT and how it affects the contract goals. CTDOT explained that it was working diligently to ensure race neutral participation was being fully counted on all projects. In addition, the program's intention is to be met through race-neutral means first, and while this cannot be met yet, CTDOT is seeing greater race-neutral participation, particularly on the consulting side, and due to this increase, can be setting goals based on the race-conscious figure, rather than the overall. CTDOT will continue to track race-neutral participation throughout the fiscal year, and will set contract goals based on whether race-neutral participation is meeting, exceeding, or falling behind the predicted figures.
- The SBPP program, which can broaden the eligible field of participants on federally funded contract, and that all participation performed by DBE firms under this program would count on the race-neutral side.
- Whether goal participation could be counted cumulatively. CTDOT explained that though the goal was good for three years, the goal must be met (not exceeded or less than) each fiscal year by the Department. As for contract goals, CTDOT explained that since the goals were contract requirements, each contract goal must be counted separately. CTDOT also explained the good faith effort process in detail, to clarify that though a goal may not be met on a specific project, as long as proper efforts and documentation occurred, a shortfall did not necessarily equate sanctions.
- The pre-award GFE process was also explained in detail to address concerns regarding potential difficulty some firms had in meeting a contract goal at the bid phase.

Despite these questions and concerns, there were none regarding our specific methodology for calculating the goal, nor were there any suggestions for how we could improve or change our methodology for the future.

The Department published the goals on its website on July 2, 2016, as well as including contact information should the public have any questions or comment on the goals, or desire to see the methodology in full. We have attached a print-out of the notification. To date, we received no comments regarding our notice, nor did we receive any requests to inspect our documents or the methodology for calculating our goals.

We will continue to monitor the specific projects, to ensure the nature of the projects and federal participation is not changing which would alter our calculations. As well, we will monitor the race neutral participation throughout the three years, to better evaluate the race conscious goals on specific projects and determine whether we need to increase or decrease them in order to meet our overall goal.



(860) 594-2169

**Subject: Submission of Bidders List Information  
Vendor Profile Sheet**

**NOTICE TO ALL:  
CONTRACTORS/SUBCONTRACTORS/CONSULTANTS/SUPPLIERS/VENDORS**

In order to comply with the Federal Regulations concerning obtaining contractor data, pursuant to 49 CFR part 26, we are required to maintain a listing of all contractors; subcontractors; consultants; suppliers; and vendors who are ready willing and able to perform work on Connecticut Department of Transportation (ConnDOT) projects and assignments.

**All firms that participate on ConnDOT projects, regardless of tier (general contractor; subcontractor; consultant; subconsultant or supplier), must complete the attached Contractor/Vendor Profile Sheet. Firms that have submitted in the past must submit an updated Vendor Profile Sheet.**

When completing the Profile Sheet, please verify the accuracy of the information that you are providing. It is important to have accurate information when including your firm in our database of ready willing and able firms.

The Profile Sheet is also available on the ConnDOT's Web Site [www.ct.gov/dot](http://www.ct.gov/dot). To access the Profile Sheet go to "General Information" then go to "Vendor Profile Sheet".

This form should be mailed to Debra Goss, Division of Contract Compliance, P.O. Box 317546, Newington, CT 06131-7546. If you have any questions please contact me at the number above. Thank you for your cooperation.

Sincerely,

Debra Goss, Manager  
Division of Contract Compliance  
Bureau of Finance and Administration

# Connecticut Department of Transportation

## Contractor/Vendor Profile Sheet

Please submit completed form to:

Constance Miano  
Connecticut Department of Transportation  
Division of Contract Compliance  
P.O. Box 317546  
Newington, Connecticut 06131-7546

Telephone: (860) 594-2177  
Fax: (860) 594-3016

### Confidential Information Notice

To the extent permitted by law, the information that you provide will be held in confidence and will not be shared with other firms without your prior written consent.

A. Firm Name: \_\_\_\_\_

Federal EIN or SSN Number: \_\_\_\_\_

Primary/Principal Business Address

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Mailing Address if different than above

Address (Line 1) \_\_\_\_\_

Address (Line 2) \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Please provide the following information for the contact person for this survey

Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

E-Mail \_\_\_\_\_

Does your firm have a Web Site? YES \_\_\_\_\_ or NO \_\_\_\_\_

If "Yes," what is the URL address? \_\_\_\_\_

B. Is your firm registered with the Connecticut Secretary of the State? YES \_\_\_ or NO \_\_\_

Is your firm certified as a Disadvantaged Business Enterprise ("DBE")? YES \_\_\_ or NO \_\_\_

If "Yes," by what agency is your firm certified? \_\_\_\_\_

If "Yes" please list each State that you are certified in: \_\_\_\_\_

Is your firm certified by the U.S. Small Business Administration as an

8(a) Business Development ("8(a) BD")? YES \_\_\_ or NO \_\_\_

or

Small Disadvantaged Business ("SDB")? YES \_\_\_ or NO \_\_\_

Is your firm certified as a small, woman, minority or disabled owned Business by the Connecticut Department of Administrative Services (DAS)? YES \_\_\_ or NO \_\_\_

If "Yes," are you a Small Business \_\_\_; Minority Owned Business \_\_\_; or a Woman Owned Business \_\_\_

In what year did your business start under the current name? \_\_\_\_\_ (year)

### C. Gross Annual Receipts

To maintain eligibility to receive certain Federal funds, the Connecticut Department of Transportation (ConnDOT) is required by the USDOT to keep on file information regarding the annual gross receipts of firms bidding on prime contracts and/or bidding or quoting subcontracts at any tier.

Under the State's Freedom of Information Act, Connecticut General Statutes Chapter 14, Sections 1-200 through 1-241, this information may be subject to disclosure unless it qualifies as a trade secret under Section 1-210(b)(5), which exempts from a disclosure "commercial or financial information given in confidence, not required by statute." Therefore, please answer the following questions concerning your firm's annual gross receipts:

1. Do you consider this information to be sensitive commercial or financial information? YES \_\_\_ or No \_\_\_

2. Are you submitting this information in confidence? YES \_\_\_ or No \_\_\_

3. In what category are your firm's annual gross receipts?

- \_\_\_\_\_ Less than \$1 Million
- \_\_\_\_\_ More than \$1 Million and Less than \$5 Million
- \_\_\_\_\_ More than \$5 Million and Less than \$10 Million
- \_\_\_\_\_ More than \$10 Million and Less than \$15 Million
- \_\_\_\_\_ More than \$15 Million and Less than \$20 Million
- \_\_\_\_\_ More than \$20 Million

Please answer the following questions about your firm's business activities:

1. Please enter the North American Industry Classification System (NAICS) code reported on your firm's most current Federal Tax return and any other NAICS codes that best describe your business activities.  
www.census.gov/epcd/www/naics.html  
 (required information)

2. Within the last year has your firm quoted work or given notice of interest for a local agency (city, town or other political subdivision of the State of Connecticut) construction project whether successful or not? (This can include subcontracting, trucking, bonding services, material quotes and/or professional services regardless of tier) YES \_\_\_ or NO \_\_\_

3. Within the last two years has your firm quoted work or given notice of interest to ConnDOT or a Prime Contractor or Consultant for a ConnDOT construction project or professional services agreement whether successful or not? This can include subcontracting, trucking, bonding services, material quotes and/or professional services regardless of tier?

If your answer is "No," skip to question #5. YES \_\_\_ or NO \_\_\_

4. If your answer to question #3 is "Yes," please answer the following:

a. Approximately how many times in the past year has your firm quoted work, materials, products or services for a ConnDOT project or professional services agreement at any level whether successful or not? \_\_\_\_\_

b. You have quoted work to ConnDOT as? Check all that apply:

*Prime - You submit bids, proposals and/or RFQs directly to ConnDOT*  
*1<sup>st</sup> Tier - You are a subcontractor, consultant; and/or supplier to a Prime*  
*Lower Tier - You are a subcontractor; consultant; and or supplier to a subcontractor*

A Contractor:	Prime ___	1 <sup>st</sup> Tier ___	Lower Tier ___
A Consultant:	Prime ___	1 <sup>st</sup> Tier ___	Lower Tier ___
A Supplier:	Prime ___	1 <sup>st</sup> Tier ___	Lower Tier ___
A Manufacturer:	Prime ___	1 <sup>st</sup> Tier ___	Lower Tier ___
Trucking Firm:	Prime ___	1 <sup>st</sup> Tier ___	Lower Tier ___
A Broker:	Prime ___	1 <sup>st</sup> Tier ___	Lower Tier ___
Other (Describe):	_____		

5. In which area(s) does your firm actively bid to perform work or provide materials, products or services on ConnDOT projects?

Construction \_\_\_\_\_  
 Maintenance \_\_\_\_\_  
 Procurement \_\_\_\_\_  
 Professional and/or Consulting Services \_\_\_\_\_  
 Other (Describe): \_\_\_\_\_

6. Please identify the types of transportation projects on which your firm performs work. (Please check all that apply.)

Highway Related \_\_\_\_\_

Transit Related \_\_\_\_\_

Rail Related \_\_\_\_\_

Airport related \_\_\_\_\_

7. Please identify the geographic area(s) in Connecticut where your firm can perform work. Check all that apply.

Hartford County \_\_\_\_\_

Fairfield County \_\_\_\_\_

Litchfield County \_\_\_\_\_

Middlesex County \_\_\_\_\_

New Haven County \_\_\_\_\_

New London County \_\_\_\_\_

Tolland County \_\_\_\_\_

Windham County \_\_\_\_\_



Please identify any firm that provides quotes to your company when your firm bids on ConnDOT construction projects or professional services agreements.

Firm Name: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

\_\_\_\_\_  
Firm Name: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

\_\_\_\_\_  
Firm Name: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

\_\_\_\_\_  
Firm Name: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

\_\_\_\_\_  
Firm Name: \_\_\_\_\_

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

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

Phone No.: \_\_\_\_\_

Fax No.: \_\_\_\_\_

---

---

Firm Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Fax No.: \_\_\_\_\_

---

---

Firm Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Fax No.: \_\_\_\_\_

---

---

Firm Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Fax No.: \_\_\_\_\_

---

---

Firm Name: \_\_\_\_\_  
Business Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_  
Fax No.: \_\_\_\_\_

(Please provide additional pages if necessary)

15

BUREAU REPORT TO DBE SCREENING COMMITTEE

To: Mr. Charles Roman

Date:

Interim Chairperson, Screening Committee

Subject:

From:

cc: Constance Milano

Phone #

Meeting Date:

Type of Opportunity: (Check)  Construction;  Engineering;  Inspection;  Purchase; or  Service

List of Projects:

Advertising/RFP Date:	Project No.	Project Description	Est. \$ Value	Project Scope Code	Rec. DBE %*	Rec. SBE %*	Rec. SBPPP *	Type FHWA FTA FAA FRA	**Funding	Comments
Anticipated Award Date:										

Additional Comments (or attach information):

The Department's overall DBE Goals for Federal Fiscal Years 2015 to 2018, which covers October 1, 2015 through September 30, 2018, are as follows:

FHWA 13%

FTA 12.6%

The Department's SBE Goal is 25%

\*\*The Office of Contract Compliance must be notified in the event of a Funding Source Change.

**Guidance for filling out the recommendation:**

\* Only one program applies:

- The Disadvantaged Business Enterprise (DBE) goal is only applicable to projects that are Federally Funded in whole or in part. Firms must be certified by the Connecticut Department of Transportation (ConnDOT) to be eligible to meet the DBE goal. The overall agency DBE goal is established annually by the Office of Contract Compliance (OCC).
- The Small Business Enterprise (SBE) set-aside is only applicable to projects that are 100% State Funded. Firms must be certified by the Connecticut Department of Administrative Services (DAS) to be eligible to meet the SBE requirement. The overall SBE set-aside is established by State Statute; and is administered by DAS.
- The Small Business Participation Pilot Program (SBPPP) is a pilot program that ConnDOT has established in order to provide an opportunity for Small Economically Disadvantaged consultant firms to compete and participate as prime consultants. When recommending this program, you are encouraged to coordinate with the Office of Contract Compliance. To be eligible to participate in the SBPPP firms must be currently certified as one of the following:
  - A Connecticut Department of Transportation certified Disadvantaged Business Enterprise (DBE);
  - A Connecticut Department of Administrative Services certified Small Business Enterprise (SBE) or Small/Minority Business Enterprise (SBE/MBE); or
  - Certified under one of the United States Small Business Administration's Programs; (8(a) firm; Small Disadvantaged Business(SDB); HUBZone; US SBA Loan recipient (Loan Note documentation required)).

When preparing your recommended goal, you should consider what subcontracting opportunities (or opportunities for SBE) the proposed contract presents. Consideration should include the type of work to be performed, and the number of available DBE firms listed in the CDOT DBE Directory (or SBE firms listed in the DAS SBE Directory) certified to perform the required type of work. The Initiating Unit may consult with the Office of Contract Compliance during this process. If the Initiating Unit determines that there are no sub-contracting opportunities, the Initiating Unit may recommend a 0% goal. **Please**

**Note: The Initiating Unit must consult with Contract Compliance Manager Debra Goss prior to the Screening Committee Meeting if they are recommending a 0% DBE Goal or SBE set-aside.**

*The following table must be filled out. Please use the sample below as a guide for your project:*

Describe Contract Type	Describe potential items to be subcontracted	Potential DBE or SBE Firms (Yes/No)	Estimated Percentage of the work	Recommended Goal

# Example:

Contract Type	Potential Items to be Subcontracted	Potential DBE /SBE Firms (Yes/No)	Estimated Percentage of the work	Recommended Goal
Construction Example Federal/State Funding	Drainage Rebar Installation Excavation Landscaping Concrete curbing	Yes - DBE Yes - DBE Yes - DBE Yes - DBE Yes - DBE	12% 2% 5% 5% 2%	12% DBE
Engineering Example Federal/Municipal Funding	Traffic Analysis Maintenance of Traffic Geotechnical Engineering Permitting Highway Engineering	Yes - DBE No Yes - DBE Yes - DBE Yes - DBE	5% 5% 10% 10% 10%	10% DBE
Construction Inspection Example 100% State Funding	Number of Inspectors required for the project 5	Yes - SBE 1 of 5 inspectors	20%	20% SBE
Purchase Example 100% State Funding  Describe the purchase in this column:  Fuel Dispensing Replacement Parts		Reviewed DAS Suppliers Commodity Class 0035 showed 12 companies that provide service and installation for fuel equip., none for replacement parts <b>SBE—No</b>  Reviewed DAS Suppliers Commodity Class 0079—Plumbing & Heating Supplies and Accessories for Fuel Products 25 Suppliers none that provide fuel replacement parts <b>SBE—No</b>		0% SBE

Contract Type	Potential Items to be Subcontracted	Potential DBE/SBE Firms (Yes/No)	Estimated Percentage of the work	Recommended Goal
Service Example 100% State Funding				2% SBE
Describe the service in this column: Property Management Services at Stamford Transportation Center, and Bridgeport Transportation Center	Security Custodial	SBE—No SBE—Yes—Review of the Custodial Vendors reveals that none can handle this size facility	15% 20%	
	Window Washing	SBE—Yes—Review of the Custodial Vendors reveals that none can handle this size facility	5%	
	Landscaping Mowing Snow Removal	SBE—Yes SBE—No SBE—No	5% 5% 10%	

This table should be used to determine the Scope Code:

Scope Code	Project Estimated Value Range	Scope Code	Project Estimated Value Range
A	Less than \$100,000	J	\$15,000,000 to \$19,999,999
B	\$100,000 to \$199,999	K	\$20,000,000 to \$29,999,999
C	\$200,000 to \$499,999	L	\$30,000,000 to \$39,999,999
D	\$500,000 to \$999,999	M	\$40,000,000 to \$59,999,999
E	\$1,000,000 to \$2,499,999	N	\$60,000,000 to \$89,999,999
F	\$2,500,000 to \$4,999,999	O	\$90,000,000 to \$119,999,999
G	\$5,000,000 to \$7,499,999	P	\$120,000,000 to \$159,999,999
H	\$7,500,000 to \$9,999,999	Q	\$160,000,000 to \$199,999,999
		I	\$10,000,000 to \$14,999,999



**CONNECTICUT DEPARTMENT OF TRANSPORTATION (CTDOT)**

**PRE-AWARD DBE COMMITMENT APPROVAL REQUEST**

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

Only certified DBE firms and only for work which they have been certified for will be approved for by CDOT toward the goal. Department's DBE directory is available on CTDOT's website or by calling 860-594-2171

Sheet \_\_\_\_\_ of \_\_\_\_\_

FEIN Number: \_\_\_\_\_

CDOT Project Number (s): \_\_\_\_\_

Town(s) of: \_\_\_\_\_

Submitted By (Prime): \_\_\_\_\_

Original Bid (\$): \_\_\_\_\_

Dollar amount subcontracted to this DBE firm (\$): \_\_\_\_\_

Dollar amount requested for CREDIT for this DBE Firm (\$): \_\_\_\_\_

\*\* Please be advised that by submitting this form you (the prime) agree that the total Credited amount will be the amount of commitment and will be measured by the Commercially Useful Function the Subcontractor performs.

\* The CDOT prefers 1st tier subcontractors; however, credit for 2nd tier DBE firms will be approved provided this page is signed by both the prime and the DBE firm, the 1st tier subcontractor is identified, the extent of the 2nd tier work is clearly identified, and the prime makes the assertion that regardless of its arrangement with the 1st tier subcontractor, this DBE firm will be used and its replacement is subject to the conditions of the DBE specification and contract requirements.

Item Number & Description	Is This Item Partial Yes/No	Firm Type Code ***	Quantity and Unit of Item as bid	Contract Unit Price	Quantity and Unit for Item Subcontracted	Subcontract Unit Price	Total Item price subcontracted****	Total item prices credited to the subcontractor *****
	N						\$0.00	
	N						\$0.00	
	N						\$0.00	
	N						\$0.00	
	N						\$0.00	
	N						\$0.00	
	N						\$0.00	
	N						\$0.00	

If any of the items above are checked **Yes** as to Partial, please use the space 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 additional costs to the Department

\*\*\*\*\* The credited amount includes adjustments for supply items (60%) or items further subcontracted to NON-DBE firms.

\*\*\*\*\* Is this DBE Purchasing any Material or Leasing any Equipment from the Prime or any of the Prime's Affiliates?

YES  NO

IF YES, state the amount and DO NOT include the Amount \$ \_\_\_\_\_ amount in the amount toward the goal.

Signature of Prime Contractor Title \_\_\_\_\_

Date \_\_\_\_\_

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

Signature of Subcontractor Title \_\_\_\_\_

Date \_\_\_\_\_



## Connecticut Department of Transportation

### Process and Application for Review of Pre-award Good Faith Efforts

If you, the contractor, is unable to meet the goal set forth in the project special provisions for which you have submitted an apparent low bid, you may request that the Department find that you have made all possible efforts to meet the goal in good faith.

You, as the apparent low bidder, must show that you have taken all reasonable steps to achieve the DBE goal which, by their scope, intensity, and appropriateness to the objective, could reasonably be expected to obtain sufficient DBE participation.

Appendix A of 49 CFR Part 26—Guidance Concerning Good Faith Efforts will be generally but not exclusively utilized in evaluating good faith effort applications. All applicants must use this form. And include the following:

- 1- Using the items list, identify the item performed in-house and items available to be subcontracted.
- 2- Based on the prices on your proposal identify the percentage of in-house work and work to be sublet for each item.
- 3- Indicate all steps taken to identify DBE firms to match the work to be sublet in step 2.
- 4- List all DBE firms identified.
- 5- All communications between you and the firms identified in Step 4 to show your solicitation and their responses.
- 6- Any information of a similar nature relevant to the application.

All applications must be delivered to the Office of Contracts to the attention of the Post-Bid Unit. Division of Contract Compliance will evaluate the application and you, the apparent low bidder, will be notified of approval, denial, or request for additional documentation.

In cases where the application is denied, the apparent low bidder shall have seven (7) days from the date of notification to request administrative reconsideration or submit additional work to DBE firms to meet the goal.

The request for the administrative reconsideration must be made in writing to:  
Manager of Contracts Section  
P. O. Box 317546  
Newington, CT 06131-7546

This reconsideration request will be forwarded to the DBE Screening Committee and a meeting will be scheduled with the requester. At the meeting the apparent low bidder will have an opportunity to present documentation and/or arguments concerning the issue of whether it made adequate Good Faith Efforts to meet the goal or that the goal was excessive on the project based on subcontracting opportunities.

Within seven (7) days following the reconsideration meeting, the chairperson of the committee will notify you of the decision. The DBE Screening Committee's decision is final.

Item number

Description

Item Bid Amount (\$)

performed in-house  
(Yes or No)

Item number	Description	Item Bid Amount (\$)	performed in-house (Yes or No)

## Disadvantaged Business Enterprise (DBE) Post-award Good Faith Effort (GFE) Procedure for Construction Projects

---

- I. This procedure defines the steps to process a post award Good Faith Effort (GFE). In the event that a Contractor fails to satisfy the DBE specification on a project, the administering Construction District will forward a shortfall package to the Office of Construction (OOC). The OOC will review the shortfall packet and determine the fundamental cause of the shortfall.
- II. If it is determined that the shortfall was caused by routine item quantity underruns and all proper administrative procedures were followed and documented as outlined in the DBE specification, the OOC may make the GFE determination and notify the Office Contract Compliance Disadvantaged Enterprise Program Liaison Officer (DBELO) as well as the administering District of their decision (please refer to XIII).
- III. If the OOC determines that the shortfall is due to factors other than routine item quantity underruns, the OOC will submit a request for determination of GFE to the DBELO and their designee. The DBE shortfall submission will be submitted by memo and will outline the final verified DBE goal achievement and should include all relevant documents or correspondence in the project file.
- IV. The DBELO or designee will conduct a review to determine if the Contractor has documented a GFE to meet the project's DBE specification. If additional information is needed, a request will be made by the DBELO to the OOC and respective District outlining what is required. Once all the documents are obtained, the DBELO will make a determination in fourteen (14) days, or advise the OOC of any extenuating circumstances.
- V. If it is determined by the DBELO that the Contractor has documented a GFE, there will be no sanction. The DBELO will provide written justification and GFE determination by memo to OOC for further action (please refer to XIII).
- VI. Should the DBELO make a determination that the Contractor did not make a GFE and a sanction is warranted, the DBELO will provide written justification by memo of the reasons for the sanction to OOC for concurrence.
- VII. If the OOC concurs with the determination and sanction, the OOC will proceed with notification to the administering District for notification to the Contractor and further action (please refer to XIII).
- VIII. If the OOC determines that, depending on the project specific issues, that a meeting is warranted, the OOC may contact the Contractor and request additional documentation, or coordinate a meeting with the Contractor for the OOC and the DBELO to discuss the non-conformance of the DBE specification and the remedies. If, after this meeting, a request for additional documentation is warranted, the DBELO will defer its final determination for fourteen (14) days.
- IX. If the Contractor submits relevant additional documentation within the required fourteen (14) days, the OOC will determine if the additional information substantiates a reconsideration of the sanction.

# Office of Construction Prompt Payment Summary (rev 2/15)

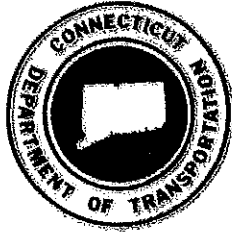
19

## Prompt Payment Complaints on Construction administered projects.

- Prompt payment complaints are taken seriously by the Department of Transportation (Department).
- Under the terms of Department contracts (Sections 1.03.04 and 1.08.01 (Supplemental of the Standard Specifications) and the Connecticut General Statutes, Section 49-41a, Prime Contractors are required to make payment for accepted work to their tier 1 subcontractors/suppliers within 30 days after the Prime Contractor receives payment by the Department for the work performed by the subcontractor. This 30 day (maximum) requirement is thereafter applicable and carries forward for each subsequent tier subcontractor or supplier.

## Summary of steps to be taken:

- Any time a subcontractor believes that the Prime Contractor (or a lower tier subcontractor) has been paid by Department for accepted work but they have not received their due payment for agreed upon work and 30 days have passed, the affected subcontractor shall prepare a written letter to the Prime Contractor (or a lower tier subcontractor) detailing the circumstances and provide any necessary documentation
- After 10 days, if the Prime Contractor does not respond, the subcontractor shall prepare a written letter to Department's administering district and copy the OOC and the Prime Contractor with the original letter attached.
- The Department will respond with a written letter to the Prime Contractor calling for a written response to the prompt payment complaint within 10 days and copy the subcontractor and the Prime Contractor's Bond Company. The Department will review each claim and investigate each issue with Project staff on a case by case basis.
- If there is no response by the Prime Contractor, the Department will respond with a second certified letter and copy the subcontractor and the Prime Contractor's Bond Company.
- If there is no response by the Prime Contractor, the Department may exercise one of the following options provided in the specifications, such as;
  - Call a meeting with all affected parties to discuss the issue,
  - If it is determined by the Department that the Prime is being non-responsive, hold funds equal from the disputed amount from the active project's next estimate monthly payment, or,
  - Hold funds equal to the disputed amount from another similar project administered by the Department with that Prime Contractor,
  - Require that Prime Contractor attend a non-responsibility meeting on the next contract where it is the apparent low bidder.
  - Other actions, as warranted.
- Also, for any dispute regarding prompt payment, a subcontractor also has the contractual right to use an alternative dispute resolution entity for resolution.



# State of Connecticut Department of Transportation's Guide to Civil Rights Compliance

*This document is intended to provide guidance to assist contractors in meeting the Connecticut Department of Transportation's civil rights requirements. This document does not take the place of any contract documents including the contract Special Provisions.*

If you have any questions, please contact the District Equal Opportunity Liaison or MSAT Representative (if a town job), the Office of Construction or the Office of Contract of Compliance. If this is your first CTDOT contract or if you would like additional training, please contact the Office of Contract Compliance.

**Contact Information:** District EO Liaison/MSAT Representative –  
Office of Construction – Nelio Rodrigues, (860) 594-2658; [nelio.rodrigues@ct.gov](mailto:nelio.rodrigues@ct.gov)  
Office of Contract Compliance – Scott Hoffman, (860) 594-2246; [scott.hoffman@ct.gov](mailto:scott.hoffman@ct.gov)

### CONTRACT REQUIREMENTS:

Project #: \_\_\_\_\_ Prime Contractor: \_\_\_\_\_

Prime's Contact Person: \_\_\_\_\_

Phone/E-mail: \_\_\_\_\_

Original Contract Value: \_\_\_\_\_

Award Date: \_\_\_\_\_ Anticipated Start Date: \_\_\_\_\_

Workforce Utilization Goal: Minority \_\_\_\_% and Female \_\_\_\_%

Disadvantaged Business Enterprise (DBE) Goal: \_\_\_\_%; Dollar Amount: \_\_\_\_\_

Pre-Award Commitment Goal: \_\_\_\_%; Dollar Amount: \_\_\_\_\_

Small Business Enterprise (SBE) Set-Aside: \_\_\_\_%

On the Job Trainees (OJT) assigned to the Contractor through OJT Pilot Program: \_\_\_\_

Comments:

I acknowledge receiving the Connecticut Department of Transportation's Guide to Civil Rights Compliance.

_____	_____
Contractor Representative (print name)	Title
_____	_____
Signature	Date Received

**Guide to Civil Rights Compliance:**

# Table of Contents

---

<b>Workforce (Minority/Female) Utilization Requirement</b> .....	<b>3</b>
Recruitment Outreach Efforts .....	3
<b>Project Disadvantaged Business Enterprise (DBE) or Small Business Enterprise (SBE) Program Requirements</b> .....	<b>4</b>
S/DBE Description and Listing .....	4
Managing Increase in Contract Value .....	4
Changes to Pre-Award Commitment .....	5
Good Faith Effort (GFE) Requirements .....	5
S/DBE Firms as Prime .....	5
Bi-Monthly Reports .....	6
Lower-tier Subcontracting Requirements .....	6
Final Project Goal Achievement .....	6
<b>On-the-Job Training (OJT) Program – Contractor Requirement</b> .....	<b>7</b>
<b>Other Requirements</b> .....	<b>8</b>
Affirmative Action Plans .....	8
Contractor’s EEO Officer .....	8
Subcontractor Approval Form (CLA-12) Requirements .....	8
EEO/Compliance Information Posters .....	9
Commercially Useful Function (CUF) Review .....	9
Prompt Payment .....	9
Certified Payrolls .....	10
<b>Additional Resources and Attachments</b> .....	<b>11</b>

## **Workforce (Minority/Female) Utilization Requirement/Recruitment:**

- A. The workforce utilization goals identified in the contract for minority and female participation should be met in each craft and is calculated by the number of employees working and the percentage of hours worked. These goals are applicable to both the prime contractor and the subcontractors on the project. The prime contractor should inform the subcontractors on the project of their workforce utilization requirements.
1. A craft category of three or fewer employees may be considered in compliance in adherence with A(76)\* provision.
- B. If the goals are not met, the contractor must document their outreach efforts. Some examples include:
1. Hiring Minorities/Females, particularly in the trades where they are underutilized. When new hire opportunities arise, all efforts should be made to recruit and hire minority/female applicants.
  2. Encouraging all existing employees to refer minorities and females for potential job opportunities.
  3. Having a sign-in sheet at both the Contractor's office and at project locations to capture contact information for all walk-in applicants. These applicants should be notified when job openings arise.
  4. Creating a list of minority and female based recruitment sources to contact when new hires are needed. This list should be given to the EO Liaison at the Pre-Construction meeting.
    - a. For Union employers- **Note:** The Code of Federal Regulations (23 CFR Appendix A to Subpart A of 230 – Special Provisions (8) and 23 CFR 230.411 (e)) and the Department of Labor specifically state that inability to meet the workforce utilization goals, as a result of an exclusive referral agreement within the collective bargaining agreement, will not be considered legitimate justification. A finding of noncompliance will occur.
    - b. If a contractor indicates that union action or inaction is the cause of their failure to provide equal opportunity without performing sufficient outreach efforts themselves, a finding of noncompliance will be made and appropriate action will be taken.
- C. The Contractor must register the project with Connecticut State Employment Service and list all job openings. All future job openings must be registered over the term of the project. Registration can be done at:  
<http://connecticut.us.jobs/index.asp>
- D. Monthly Workforce Utilization Forms (1391A employment data report) should be maintained by the Prime Contractor and submitted to the Department upon request.

## **Project Disadvantaged Business Enterprise or Small Business Enterprise Program Requirements:**

- A. The Disadvantaged Business Enterprise (DBE) project goal can be achieved through work assigned and performed by CTDOT certified DBE firms or through documenting your Good Faith Efforts (GFE) to satisfy the goal. The Directory of certified DBE firms can be found at:  
[http://www.biznet.ct.gov/dot\\_dbe/dbesearch.aspx](http://www.biznet.ct.gov/dot_dbe/dbesearch.aspx)
1. Only the work actually performed by a DBE firm with its own workforce is eligible to be counted towards the DBE Goal.
  2. A DBE firm must self-perform a minimum of 30% percent of the work with their own workforce and equipment.
  3. Firms must be DBE certified in Connecticut prior to being contracted to perform work on the project in order to receive DBE credit for their participation.
  4. If the Office of Contract Compliance has approved a pre-award DBE GFE on this project, it does not eliminate or reduce the goal. At the end of the project, the Contractor will need to submit a GFE demonstrating that the circumstances did not change and there were no additional DBE opportunities. If there were additional opportunities, the contractor will need to show what GFE were made to hire additional DBEs. The contractor will also need to show it met or made GFE on all DBE commitments listed in the pre-award document.
- B. The project Small Business Enterprise (SBE) set-aside requirement can be achieved through work assigned and performed by firms certified as SBEs by the Connecticut Department of Administrative Services. The Directory of certified SBE firms can be found at:  
<http://www.biznet.ct.gov/SupplierDiversity/SDSearch.aspx>
- C. There is no reciprocity between the DBE program and the SBE program. Firms must be certified in the program in which they are submitted to receive credit.
- D. The DBE Goal/SBE set-aside goal achievement is based on the **Final Contract Value**.
1. If the dollar value of the contract is increased, the contractor should make GFEs to increase the DBE/SBE participation on the project.
  2. The contractor should negotiate in good faith with DBE firms currently on the project in order to ensure meeting the increased contract value **and/or** meeting the increased value through the addition of new DBE firms.
  3. Regarding SBE projects, since the program is based upon a set-aside commitment, rather than a goal, it is expected the set-aside be met. Therefore, if items are added or a SBE firm becomes unwilling/unable to perform, the Prime must still make efforts to meet the set-aside percentage.



- E. Compliance with the program also requires meeting the committed amount listed for each SBE or DBE firm listed in the pre-award. A pre-award SBE or DBE firm cannot be terminated for convenience. **Any change** to the pre-award commitment amount requires the Prime to perform the following steps:
1. Provide a written notification to the Office of Construction (OOC) as soon as the Prime Contractor has knowledge of the change. Requests should be forwarded to **Nelio Rodrigues, Office of Construction (860) 594-2658, [Nelio.Rodrigues@ct.gov](mailto:Nelio.Rodrigues@ct.gov)**. The administrating unit project staff (CTDOT, Town Administration, and Consultant) should also be notified. The change is not considered approved until you receive written notice of approval from the Office of Construction.
  2. Notification and approval from the Office of Construction is required for all changes made to the pre-award commitment. A written release from the DBE firm (or explanation why release could not be obtained) is required for reduction/termination of work.
  3. If a pre-award S/DBE firm is being terminated/removed from the project, 5 (five) days written notice to the S/DBE firm is required with a copy sent to the Office of Construction.
  4. If the request to terminate or reduce work assigned to the DBE is approved, the contractor must within seven (7) days of receiving approval, submit documentation to the Office of Construction describing its efforts to replace the DBE firm with another DBE firm, or efforts to assign other work to DBE firms in order to meet the project DBE goal requirements. All GFE must be documented.
  5. S/DBE firms may only be terminated or removed from the project if they are unwilling or unable to perform the work assigned.
  6. When a DBE or SBE firm is terminated or fails to complete its work on the contract for any reason, you are required to make GFEs to find another S/DBE to substitute for the original S/DBE. However you must first request and receive permission from the Office of Construction regarding release of the original S/DBE firm. The CLA-12 of the replacement S/DBE firm will not be approved until the termination of the original S/DBE firm is approved.
- F. If a DBE serves as the prime contractor, the firm is permitted to use its own work to meet the DBE goal requirement providing that work is covered under the firms DBE certification. If a DBE firm commits in the pre-award to use other DBE firms, the firm is expected to meet the DBE commitment to those firms.
- G. If a SBE serves as the prime contractor, they still must meet the set-aside with other SBE firms. The SBE certified prime contractors work will not be permitted to contribute to the set-aside requirement for the contract.
- H. Bi-monthly reports are required to the District EEO Liaison/MSAT Representative, listing the work performed, invoice/check #, dollars paid to every S/DBE subcontractor and date of payment. If an S/DBE subcontractor is performing more than one classification (subcontractor, supplier, manufacturer), please provide

separate amounts for each category, to facilitate calculating the allowable S/DBE credit.

- I. If a DBE subcontractor (regardless of category of work performed) subcontracts their work to additional tier subcontractors, credit will only be given if the lower-tiered subcontractors are also DBE certified. Payment verifications will also be required of all lower-tiered subcontractors to DBE subcontractors.
- J. If a non-DBE subcontractor assigns work to a lower-tier DBE firm, only the work performed by the DBE firm with their own work-force and equipment is eligible for DBE credit.
- K. The final project goal achievement is based on the project's final verified payments to DBE firms performing a Commercially Useful Function on the project. Final Verification of payments, signed by the S/DBE subcontractors, must be submitted to the District EEO Liaison/MSAT Representative as requested.
  - 1. If the DBE goal is not met for the project, the contractor must submit their documented GFEs explaining why the shortfall occurred.
  - 2. The GFE should include:
    - a. All previous notifications to the Office of Construction. This includes all shortfall notices and explanations; and supporting documentation (change orders, S/DBE signed, dated, and detailed explanation releases, etc.).
    - b. Evidence of all attempts to hire additional S/DBE firms or provide additional work to existing S/DBEs.
    - c. Copies of all quotes for all subcontractors (DBE and non-DBE firms) for any work items subcontracted to non-DBE firms.
  - 3. The Office of Construction and/or the municipality will coordinate with the Office of Contract Compliance to determine if a GFE was not made.
- L. For further details on the DBE/SBE program, please consult the Special Provisions attached with the Contract.

### **On-the-Job Training (OJT) Program – Contractor Requirements:**

- A. The On-the-Job Training (OJT) Program is now a Contractor requirement, for Contractors whose total contract values exceed \$4.5 million. The requirement mandates a certain number of trainees for a Contractor, depending on their total contract values for the past two years, as opposed to the previous OJT program that mandated trainee hours on a given project.
- B. If this Contract has a value of \$4.5 million dollars or more, the Contractor is required to contact **Phylisha Coles, Office of Contract Compliance [phylisha.coles@ct.gov](mailto:phylisha.coles@ct.gov), (860) 594-2178** to discuss the trainee requirements.
- C. If the Contractor is enrolled in the OJT program and the project is FHWA funded, the contractor may be eligible for a \$.80 per hour reimbursement for the approved trainee hours worked on the project. To verify your reimbursement eligibility, contact Phylisha Coles.
- D. Every effort should be made to hire minority, female and socially economic individuals as trainees for this program, and all efforts should be documented. If the contractor has difficulty finding suitable trainees, please contact Ms. Phylisha Coles at (860)594-2178.

## **Other Requirements:**

- A. The Contractor, and every subcontractor with a contract value greater than \$10,000, must have an approved Affirmative Action Plan on file with the Office of Contract Compliance. Contact Person: **Phylisha Coles, Office of Contract Compliance** [phylisha.coles@ct.gov](mailto:phylisha.coles@ct.gov), (860) 594-2178).
- B. Every Contractor and Subcontractor must also have an Ethics affirmation (Form 6) on file with the Office of Construction.
- C. The contractor should have an EEO Officer who is knowledgeable of the Federal/State Requirements and Contract Compliance's Programs, will serve as contact person for EEO/DBE issues, and has direct access to the head of the firm in order to discuss and resolve these issues. Please give name and contact information to District EEO Liaison/MSAT Representative.
- D. All facilities on-site should be non-segregated, on the basis of race, color, religion, sex or national origin, (with the exception of separate or single-user restrooms, necessary dressing or sleeping areas to ensure privacy between the sexes) according to 41 CFR 60-1.8.
- E. **All** subcontractors must be approved by the Office of Construction **prior** to performing any work on the project.
- F. When submitting Subcontractor Approval forms (CLA-12) for DBE firms, a copy of the prime/subcontractor contract agreement must be submitted with the CLA-12 to the Office of Construction, regardless of whether or not that firm is a pre-award firm or is added once the project begins.
  - 1. A CLA-12 must also be submitted for **all** DBE Suppliers. Included with the CLA-12, a material supplier affidavit is also required.
  - 2. The CLA-12 must include a breakdown of items for the project and the value of work for each item.
  - 3. The work assigned and the corresponding dollar values assigned should all align with the DBE pre-award commitment.
  - 4. Every subcontract or purchase order with subcontractors/suppliers should also contain copies of Title VI Assurances; and for FHWA contracts only, the unaltered FHWA 1273. FHWA 1273 was revised in June, 2012. Please be sure to include the updated version in all subcontracts for projects with FHWA funding.  
(<http://www.fhwa.dot.gov/programadmin/contracts/1273/>).
  - 5. Title VI Assurances states that Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs, activities, and services, receiving federal financial assistance. Any person who believes that he or she has been subjected to discrimination

prohibited under Title VI of the Civil Rights Act of 1964 may file a discrimination complaint. To obtain additional information about the Department's Title VI Program or the Department's Title VI Compliant Process, please go to the Department's website at [www.ct.gov/dot](http://www.ct.gov/dot) under "Title VI and External Civil Rights Programs" or contact **Debra Goss, Office of Contract Compliance** [debra.goss@ct.gov](mailto:debra.goss@ct.gov), (860) 594-2169.

6. In each subcontract agreement signed by the prime must include the following statement: "The contractor, sub recipient or subcontractor shall not discriminate on the basis of race, color, national origin, or sex in the performance of the contract. The contractor shall carry out applicable requirements of 49 CFR part 26 in the award and administration of DOT-assisted contracts. Failure by the contractor to carry out these requirements is a material breach of this contract, which may result in the termination of this contract or such other remedy as the recipient deems appropriate."
  7. Copies of subcontract agreements from non-DBE firms must be provided upon request.
- G. The necessary EEO/Affirmative Action/Wage Rate information posters, including "EEO is the Law", should be posted at the project work site and should be available for all employees to review. The posters can be found:  
[http://www.ctdol.state.ct.us/gendocs/Labor\\_Posters.htm](http://www.ctdol.state.ct.us/gendocs/Labor_Posters.htm) &  
<http://www.dol.gov/compliance/topics/posters.htm>
- H. By the first progress meeting, a listing of expected start dates for all subcontractors, including the DBEs, should be given to the Project's Chief Inspector. These dates do not need to be exact. However they should give the Project staff a relatively clear timeline of start dates for the subcontractors, in order to track whether the DBE goal is on-target.
- I. If this project has a DBE goal assigned, the Office of Construction will conduct a Commercially Useful Function Review (CUF) during the course of this project. The purpose is to determine whether the DBE firms on the project are performing the items listed in the pre-award commitment; are certified for the work they are performing; using their own workforce, supplying their own materials, and supervising their own work on the project; all in order to determine whether the DBE firm should receive credit for the work performed.
- J. All Subcontractors must be paid within 30 days of the Prime Contractor receiving payments from the Department and must require their subcontractors to pay their subcontractors within thirty (30) days of them receiving payments this requirement covers all subcontracting tiers.

### **Certified Payrolls:**

K. Certified Payrolls for the Prime Contractor and all Subcontractors performing work covered by prevailing wage requirements must be maintained and reported every week.

1. All payrolls need to be sent through the US Mail, with stamped envelopes attached. The Subcontractors should mail their payrolls to the Prime Contractor, and the Prime Contractor mail all payrolls, including envelopes, to the District Office (or Administrating Unit's Office for Municipal projects).
2. Due to the requirement for retaining mailing envelopes, Connecticut Department of Labor (CTDOL) allows for the submission of weekly payrolls on a monthly basis. This applies for all projects regardless of agency funding.
3. Payroll submittals should begin at the start of work and end when the Contractor/Subcontractor's work is completed. If there is a period of inactivity for a firm, up to four (4) weeks of "no-work" can be put on one payroll, but the payroll numbers should continue consecutively.
4. The payrolls must include and comply with the Federal and State Statements of Compliance. Both the Federal and State prevailing wages apply, and if there is conflict, the higher wage should apply. Be aware State prevailing wage rates change every July 1. Prevailing wage rates should be clearly stated on each payroll to confirm compliance during labor wage checks.
5. All individuals working on the Project must have OSHA-10 training. OSHA-10 cards should be submitted with the first payroll the individual appears.
  - a. If an individual does not have an OSHA-10 card, he or she will be given fourteen (14) days to provide proof of attending and passing the OSHA-10 course. Failure to do so will result in the individual being removed from the project.
6. The Payroll must include the specific days and number of hours each employee worked, the amount of money paid and all other information required by Connecticut General Statutes Section 31-53.
7. The Payroll should also include an identification number for each employee. This can be the last four digits of the employee's social security number, or some other means that will be unique to the employee through the life of the project.
8. If Apprentices are working on the project, the apprentice's Davis-Bacon Registration should be included with the first payroll the apprentice appears.
9. Contractor should submit a contact person, who handles the payrolls, to the District/Administrating Unit to address any issues.

## Citations for Further Information:

---

- EEO Issues (Workforce Utilization/Recruitment/OJT) – 23 CFR part 230
- DBE Program – 49 CFR part 26
- SBE Set-Aside Program – Connecticut General Statute Ch. 58 Sec. 4a-60g:  
<http://www.cga.ct.gov/2011/pub/chap058.htm#Sec4a-60g.htm>
- FHWA 1273, Title VI Assurances, and all other requirements related to EEO/DBE issues are found in your contract in the section labeled “Construction Contracts – Required Contract Provisions”
- The SBE or DBE Special Provisions (depending on funding source) are included in the Special Provision section of your Contract.
- Connecticut Department of Transportation DBE Policy Statement
- Connecticut Department of Transportation Office of Contract Compliance website: <http://www.ct.gov/dot/cwp/view.asp?a=2288&q=482078>

Guide to civil  
Rights





### Pre-Award Good Faith Effort Monthly Update

Contract #: \_\_\_\_\_  
Prime Contractor: \_\_\_\_\_  
DBE Goal %: \_\_\_\_\_  
Adjusted DBE Commitment %: \_\_\_\_\_  
Pre-Award DBE Firms and Commitment Amounts: \_\_\_\_\_

Month: \_\_\_\_\_

Were there any Subcontracting Opportunities for this month?  Yes  No

If yes, describe the Subcontracting Opportunities and the dollar amount.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What firms were hired to perform this work? \_\_\_\_\_

Were these firms DBEs?  Yes  No

If no, explain why a DBE firm was not used. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If a DBE firm was not hired, list the DBE firms contacted for this work, and the reason for not using the DBE firm. Attach all correspondences with DBE firms documenting their unwillingness to perform work, or other explanation for not hiring the DBE firm. Please also submit ALL quotes received for this work (DBE and non-DBE firms).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have CLA-12 forms been submitted to the Office of Construction for all additional firms?  Yes  No If No, please do so immediately, as no additional firm should work without CLA-12 approval.

Please attach any additional information/documentation showing the Good Faith Efforts made to find an approved DBE firm to perform the additional Subcontracting Opportunity.

State of Connecticut  
Department of Transportation  
Subcontract Approval Request (CLA-12) Instructions

All applicable information must be entered completely and correctly. If it is not, it will be returned unprocessed.

All forms are available online at <http://www.ct.gov/dot/construction> under the Subcontracting section. Only one CLA-12 (per subcontractor) is required to be signed and submitted along with supporting documentation.

The CT Department of Transportation allows no more than three tiers of subcontracting.

If the subcontractor is a DBE or SBE, the box **must be checked** regardless of whether or not they are being submitted for credit. Place a "Y" if the subcontractor was named as a pre-award commitment or "N" if they were added after the contract started.

The subcontractor's anticipated start date cannot be less than two weeks from the CLA-12's date of receipt by the Office of Construction. The Contractor must allow for 10 business days from the date of receipt for processing.

Enter the original (bid) amount of the contract. Do not include any adjustments due to change orders. The percentage of allowable subcontract work is based on the Contract's original value and workitems.

The Contractor must utilize the "Line Item and Category Report" obtained from the CT DOT Project Engineer at the pre-construction meeting to enter the correct subcontracted line item numbers, item codes, and item descriptions.

Total Subcontract Value and Total % of Original Contract subcontracted must be calculated and entered. If the Total % of Original Contract subcontracted exceeds the amount allowed by the Contract, the CLA-12 will be rejected.

All subcontracts on Federal Highway Administration funded projects shall include a copy of the form FHWA-1273 and it must be included with the CLA-12 submittal. (The FHWA-1273 Form can be obtained from the Office of Construction website.) The FHWA-1273 Form CANNOT be included by reference. Failure to submit the FHWA-1273 Form will result in the CLA-12 being unprocessed and returned.

All subcontracts on Federal Highway Administration funded projects shall include a copy of the Title VI assurances. These assurances CANNOT be included by reference and failure to include these assurances in your subcontracts will result in a denial of the CLA-12.

DBE or SBE subcontract agreements must be included with the CLA-12 submission.

When requested, subcontract agreements with non-DBE or Non-SBE firms shall be immediately submitted to the Office of Construction or other requesting oversight agency.

All affected parties must sign the CLA-12. Witnesses and/or notaries are no longer required.

Correspondence pertaining to subcontractor approvals may be directed to the following email address: [DOT.OOC.Subcontract@ct.gov](mailto:DOT.OOC.Subcontract@ct.gov)

State of Connecticut  
Department of Transportation  
Subcontract Approval Request (CLA-12) Instructions

Trucking:

The subcontracted value of trucking firm will not be count against the Total % of Original Contract subcontracted. This does not preclude the trucking firms from meeting all legal and contractual obligations for the contract.

Independent trucking Owner/Operators shall not be considered as subcontractors and shall not be subject to submission of a CLA-12 Subcontractor Approval unless:

Independent DBE trucking Owner/Operator is a DBE firm or employed by a DBE firm.

Trucking Firms consisting of more than one truck will be considered a subcontractor and will be subject to subcontract approval. Independent Owner/Operators hired by the firm shall be subject to the rules stated above.

### Subcontractor Approval Request



CTDOT Contract No.: _____  Prime Contractor: _____  Sub Contractor: _____ Address: _____ City, State, Zip: _____  Sub-subcontractor: _____ Address: _____ City, State, Zip: _____  Sub-sub subcontractor: _____ Address: _____ City, State, Zip: _____	Town: _____ DBE/SBE Non-DBE/SBE Pre-Award (Y/N)  FEIN: _____  FEIN _____ <input type="checkbox"/> <input type="checkbox"/> _____  FEIN _____ <input type="checkbox"/> <input type="checkbox"/> _____  FEIN _____ <input type="checkbox"/> <input type="checkbox"/> _____
--	--

DBE/SBE Status must be indicated regardless whether being used toward the goal/set-aside

No more than three tiers of subcontracting will be allowed.

Anticipated Start Date: \_\_\_\_\_ Original Contract Value: \_\_\_\_\_  
 (The Contractor must allow 10 business days from the date of receipt for processing. Incorrect or incomplete CLA-12s will be returned unprocessed)

NOTE: The Contractor is required to clearly break out assignments of work for each Subcontractor (and, as applicable, each lower tiered subcontractor) by item for each project (and, as applicable, each subproject), including reference to Project Number(s) and Line Item Number(s) as outlined in the "Line Item Category Report". The table below must be filled out in its entirety. The items and unit prices listed must match the items and unit prices shown on the "Line Item Category Report".

Project #:	Line Item No.	Item Code	Description	Code *	Pay unit	Unit Price	Qty	Item Value	Change Order Item (Y/N)

(\*Code: S - Subcontractor, T - Trucking, P -Material Supplier)  
 Total Subcont Value \_\_\_\_\_ Total % of Orig Cont \_\_\_\_\_

- The following items must be physically incorporated into each subcontract agreement or purchase order and cannot be incorporated by reference.
- FHWA 1273 (FHWA projects only):
  - Title VI Assurances:
- The following items must also be included with this submittal:
- Subcontract Agreement:  (a copy of the subcontract agreement must accompany every DBE or SBE request to sublet. Copies for all other subcontractors shall be provided upon request.)
  - AAP Approval letter:
  - Form 6 Ethics Statement:
- I have verified that this firm is not on the Federal Excluded Parties List (<https://www.sam.gov/>):   
 (For Federally participating contracts, the Contractor is required to verify that submitted firms have not been disallowed)

Every subcontract agreement must contain a mechanism for payment within 30 days of receipt of payment from CTDOT

The contractor certifies and the subcontractor agrees that this subcontract agreement is in full conformance with the prime contract  
 By signing this form, the subcontractor agrees to be bound by the terms of the signed contract between the prime and CT DOT. It is the subcontractors responsibility to read and understand said contract in order to remain in compliance with both state and Federal laws, regulations and guidelines as applicable. Nothing in this document shall imply any contractual relationship between the subcontractor and the Department.

_____ Prime Contractor Signature	_____ Subcontractor Signature (1st tier)
_____ Subcontractor Signature (2nd Tier)	_____ Subcontractor Signature (3rd Tier)



October 9, 2002

23

AGREEMENT BULLETIN NO. 02-10

TO: ALL CONCERNED

FROM: Valerie J. Jumper  
Admin. Operations & Support  
Bureau of Finance & Administration

SUBJECT: "Connecticut Department of Transportation  
Subconsultant Payment Log"

Please incorporate the following paragraph as a separate article, after the "Prompt Payment to Subcontractor(s) and Release of Retainage" article in all new consultant agreements:

The (\*) understands and agrees that a "Connecticut Department of Transportation Subconsultant Payment Log" Form shall be completed quarterly (January, April, July and October) and furnished to the State for each subconsultant the (\*) utilizes under this Agreement. Instructions for completing and processing this Form are stipulated on its reverse side. A copy of said Form is included herewith.

Attached for your information is a copy of the "Subconsultant Payment Log" Form along with its instructions on the reverse side.

(\*) Insert correct noun such as "Contractor", "Second Party", "Consultant", "Consulting Engineer", etc.

Please disseminate this information to all those persons having a need to know.

Attachment

VCJ/JQC/aid

ist 1

Connecticut Department of Transportation  
Subconsultant Payment Log

Prime Consultant: \_\_\_\_\_ ConnDOT Project No. \_\_\_\_\_  
 FEIN: \_\_\_\_\_ Federal Aid Project No. \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 CommDOT Administrating Unit: \_\_\_\_\_  
 CommDOT Project Engineer: \_\_\_\_\_

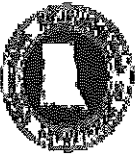
Subconsultant: \_\_\_\_\_  
 FEIN: \_\_\_\_\_  
 DBE   
 SBE

Line No.	Subconsultant's Invoice to Prime		Prime's Invoice to State		Payment Information			Remarks			
	(1) Subconsultant Invoice No.	(2) Date Submitted to Prime	(3) Invoice Amount	(4) Included on Prime's Invoice No.	(5) Invoice Date	(6) Subconsultant Amount Submitted	(7) Date Prime Received Payment From State		(8) Date Prime Paid Subconsultant	(9) Amount of Payment to Subconsultant	(10) Check No.
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											

Date Submitted to ConnDOT: \_\_\_\_\_  
 January \_\_\_\_\_  
 April \_\_\_\_\_  
 July \_\_\_\_\_  
 October \_\_\_\_\_

Prime Consultant Signature and Date: \_\_\_\_\_  
 Date of Subconsultant Receipt: \_\_\_\_\_

Subconsultant Signature and Date: \_\_\_\_\_

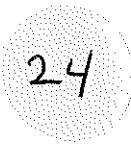


Contract No: \_\_\_\_\_ Prime Contractor: \_\_\_\_\_ Reporting Period: \_\_\_\_\_  
 Contract DBE Goal(%): \_\_\_\_\_ DBE Goal Value: \$ \_\_\_\_\_ DBE Pre-Award Value: \_\_\_\_\_  
 Original Contract Value: \_\_\_\_\_ DBE Revised Goal Value: \$ \_\_\_\_\_ DBE Pre-Award Goal: \_\_\_\_\_ #DIV/0!  
 Current Contract Value: \_\_\_\_\_

DBE Firm	Pre-Award Value	Projected Δ due to Change Order	Projected Final Value	Anticipated Completion Date	Verified Value to Date
Total to Date: \$					

I certify that the subcontractors on this project are being paid within 30 days after satisfactory completion of their work and that retainage is being released in accordance with Section 1.08.01 (Revised) of the Contract.

Signature of Prime Contractor \_\_\_\_\_ Date \_\_\_\_\_





Construction Co.

Name:

Address:

Dear \_\_\_\_\_:

Please verify the payments made to your corporation for Project No. \_\_\_\_\_ by signing the bottom of this letter and return to this office in the enclosed envelope.

<u>Date:</u>	<u>Check No.</u>	<u>Amount:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

\$ Amount Committed in Pre-award      % work completed      \$ Amount Retainage held to date

Are joint checks being used? Yes \_\_\_\_ No \_\_\_\_ . This will require further correspondence from our office.

Thank you for your corporation.

Very truly yours,

I, \_\_\_\_\_, President of the \_\_\_\_\_  
 \_\_\_\_\_ did receive the sum of \$ \_\_\_\_\_ in payments as listed  
 above for the work as stipulated in our signed Sub-contract Agreement dated \_\_\_\_\_.

25

STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OCC) - COMMERCIALLY USEFUL FUNCTION (CUF)

Form 12-20: Summary (rev 10-05-16)

<i>Prime Contractor</i>		<i>Date Performed:</i>	
<i>Project No. &amp; Description</i>		<i>Date Finalized:</i>	
<i>Project Inspector(s)</i>		<i>Telephone &amp; Email</i>	

**I. Summary CUF process used:**

- a. A Commercially Useful Function (CUF) Review of the project was conducted as part of a monitoring requirement stated in Title 49 CFR 26 Subpart C Sections 26.37 & 26.55.
- b. The Form 12-20: CUF was used as a monitoring guide. Comments were noted for further explanation, as needed. This report is not to be construed to mean that all aspects of the records have been checked by the undersigned.
- c. The Prime Contractor (Prime) was interviewed with the Project staff and provided the responses herein.
- d. Among the areas reviewed, one is to ensure the DBE subcontractor performs a minimum of 30% of the work with their own forces, as identified in section (g) below.
- e. Any work subcontracted from a DBE subcontractor to a lower tier non-DBE subcontractor must be subtracted from their DBE participation, when counting their value towards the project DBE goal.
- f. Whether working on site or not, the DBE subcontractor(s) were also interviewed and their responses are also indicated herein.
- g. The following five pillars of CUF were evaluated for monitoring the work performed by the DBE subcontractor(s) that will be counted towards DBE credit to the project. Whether the subcontractor(s) was:
  - i. certified to perform the assigned work;
  - ii. procured, taking inventory, control and delivery of materials or supplies (copy of Invoices);
  - iii. performed all the work under their own direction;
  - iv. using their own labor force; and
  - v. using their own equipment and machinery.

**II. The following documents were used and are included in this CUF review:**

- a. List of SiteManager approved subcontractors (to date)
- b. List of DBE subcontractors active on project (interim 88-1) (to date)
- c. Form 12-20 (CUF) (with any available supporting documentation)
- d. Pre-Award Commitment detail sheets
- e. Pre-Award Commitment summary signed by OCC
- f. SiteManager contract items assigned to DBE and shown on DWRs
- g. DBE subcontractor(s) payrolls for verification

STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)

**III. Project Details & Summary:**

- a. The project evaluated received \_\_\_ Pre-Award DBE subcontractors. During this inspection, the DBEs were/were not on site and we only were able to speak with \_\_\_\_\_. The Inspector supplied the reviewer with the DWR and Certified Payroll for the date or work for the DBE subcontractors requested.
- b. One of the DBE subcontractors reviewed was \_\_\_\_\_.
  - i. The date \_\_\_\_\_ performed work that was selected was \_\_\_/\_\_\_/\_\_\_.
  - ii. The Certified Payroll has an end date of \_\_\_/\_\_\_/\_\_\_ and the payroll was consistent with the DWR and showed that the subcontractor was doing the assigned PAC work and are performing a CUF.
- c. A concern came up with \_\_\_\_\_.
  - i. (Example) It was determined that on one occasion, the \_\_\_\_\_ performed some work not meeting CUF when they borrowed equipment, a small air compressor for 1 night, from the Prime to complete onsite work (please refer to action item).

**IV. Action Items and findings (If necessary) :**

- a. DBE subcontractor, \_\_\_\_\_ needs to get a quote for the cost of rental of the equipment, from a 3<sup>rd</sup> party (not the Prime) and monetize the value of this DBE work.
- b. This non-CUF work will need to be subtracted out from the current DBE credit counted towards the project DBE goal and the project 88-1 revised accordingly.
- c. The CTDOT inspectors were unaware that this issue did not conform to CUF and needed to be approved regardless of the small dollar amount and small amount of work. They were informed about the correct method consistent with the CFR and DBE specifications.
- d. The Inspectors were informed of the correct process that needs to be taken in these types of situations and the contract value and goal needs to be revised due to the borrowed equipment.

Final Review by: Nelio J Rodrigues - Transportation Supervising Engineer  
Nelio.Rodrigues@ct.gov 1-860-594-2658

\_\_\_\_\_  
Date

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)**

Form 12-20 (CUF) revised 10-05-16

<b>Form 12-20: Commercial Useful Function (CUF) audit questionnaire summary</b>			
	<b>Yes</b>	<b>No</b>	<b>Comment</b>
<b>A: Inspector - Review of CUF monitoring responses</b>			
1. Without interference by the Prime, is the DBE subcontractor performing work with its own personnel?			
2. Without interference by the Prime, is the DBE subcontractor working under its own supervision and direction?			
3. Without help by the Prime, is the DBE subcontractor paying for its own material/supplies and scheduling its own deliveries?			
4. Is the DBE subcontractor using its own equipment and is it labelled accordingly?			
5. Is the value of the DBE subcontractor's work that is being counted towards the DBE goal in conformance with the CUF?			
6. Is the DBE subcontractor work performed consistent with the PAC for this contract?			
Comments:			
<b>B: Prime Contractor - Review of CUF monitoring responses</b>			
1. Have any of your laborers or mechanics assisted the DBE subcontractor in the performance of any of their work?			
2. Has the DBE subcontractor used any material or equipment from you?			
3. Is the DBE subcontractor working as an independent company and in charge of their own work?			
4. Are you purchasing any raw materials or manufactured products for the DBE subcontractor?			
5. Have you self-performed, taken away, or reassigned any PAC work originally assigned to the DBE?			
6. Is the DBE subcontractor being paid timely based on their respective tier? (30 days per tier after being paid)			
Comments:			

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)**

<b>C. DBE Subcontractor - Review of CUF monitoring responses</b>				<b>Yes</b>	<b>No</b>	<b>Comment</b>
1. Have you been paid for the work performed in a timely manner?						
2. Has the Prime performed any of your assigned items of work or have you subbed out any work?						
3. Are you paying for material on your own or with a joint check?						
4. Have you used any equipment from the Prime?						
5. Have any of your assigned items of work been reduced? If yes, which items and why?						
<b>C.1. Trucking DBE Sub. - Review of CUF monitoring responses</b>				<b>Yes</b>	<b>No</b>	<b>Comment</b>
1. Does the DBE trucker own its own truck as an owner-operator?						
2. If the DBE is a trucking firm, are all drivers hired by the DBE subcontractor?						
3. For the DBE trucking firm, did they have long-term lease agreements for hired truckers?						
4. Were there any truckers hired or provided by the Supplier?						

**Comment [CIP1]:** Carry these and the one above forward

Comments:

<b>C.2. Random Check - DBE subcontractor name and date selected for work for CUF analysis</b>						<b>Yes</b>	<b>No</b>	<b>Comment</b>
<i>Date DBE performed Work</i>	<i>Date of Pay estimate for DBE work?</i>	<i>Did the DWR detail the 5 pillars of CUF for DBE</i>	<i>Were payrolls consistent with CUF?</i>	<i>Date DBE sub paid for work?</i>	<i>Was DBE sub paid timely for respective tier?</i>			

<b>D. DBE Subcontractor (#2) Review of CUF monitoring responses</b>				<b>Yes</b>	<b>No</b>	<b>Comment</b>
1. Have you been paid for the work performed in a timely manner?						
2. Has the Prime performed any of your assigned items of work or have you subbed out any work?						
3. Are you paying for material on your own or with a joint check?						
4. Have you used any equipment from the Prime?						
5. Has any of your assigned items of work been reduced? If yes, which items and why?						
<b>D.1. Trucking DBE Sub. - Review of CUF monitoring responses</b>				<b>Yes</b>	<b>No</b>	<b>Comment</b>
1. Does the DBE trucker own its own truck as an owner-operator?						
2. If DBE is trucking firm, are all drivers hired by the DBE subcontractor?						
3. For the DBE trucking firm, did they have long-term lease agreements for hired truckers?						
4. Were there any truckers hired or provided by the Supplier?						

Comments:

<b>D.2. Random Check - DBE subcontractor name and date selected for work for CUF analysis</b>						<b>Yes</b>	<b>No</b>	<b>Comment</b>
<i>Date DBE performed Work</i>	<i>Date of Pay estimate for DBE work?</i>	<i>Did the DWR detail the 5 pillars of CUF for DBE</i>	<i>Were payrolls consistent with CUF?</i>	<i>Date DBE sub paid for work?</i>	<i>Was DBE sub paid timely for respective tier?</i>			

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)**

<b>E. DBE Subcontractor (#3) - Review of CUF monitoring responses</b>				<b>Yes</b>	<b>No</b>	<b>Comment</b>
1. Have you been paid for the work performed in a timely manner?						
2. Has the Prime performed any of your assigned items of work or have you subbed out any work?						
3. Are you paying for material on your own or with a joint check?						
4. Have you used any equipment from the Prime?						
5. Has any of your assigned items of work been reduced? If yes, which items and why?						
<b>E.1 Trucking DBE Sub - Review of CUF monitoring responses</b>						
1. Does the DBE trucker own its own truck as an owner-operator?						
2. If DBE is trucking firm, are all drivers hired by the DBE subcontractor?						
3. For the DBE trucking firm, did they have long-term lease agreements for hired truckers?						
4. Were there any truckers hired or provided by the Supplier?						
Comments:						
<b>E.2. Random Check - DBE subcontractor name and date selected for work for CUF analysis</b>						
<b>Date DBE performed Work</b>	<b>Date of Pay estimate for DBE work?</b>	<b>Did the DWR detail the 5 pillars of CUF for DBE</b>	<b>Were payrolls consistent with CUF?</b>	<b>Date DBE sub paid for work?</b>	<b>Was DBE sub paid timely for respective tier?</b>	

STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)

---

This Page for Screenshot of 88-1

STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)  
This page contains a large block of extremely faint and illegible text, likely a scan of a document or a screenshot of a web page. The text is too light to be transcribed accurately.

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALY USEFUL FUNCTION (CUF)**

---

*This Page for Screenshot of PAC detail sheets*



**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALY USEFUL FUNCTION (CUF)**

---

*This Page for Screenshot of Payrolls*

STATE OF CONNECTICUT  
DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION  
COMMERCIALY USEFUL FUNCTION (CUF)

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALY USEFUL FUNCTION (CUF)**

---

*This Page for Screenshot of DWRs*

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALLY USEFUL FUNCTION (CUF)**

---

*This Page for Subcontractor Approval and Start Date*

STATE OF CONNECTICUT  
DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION  
COMMERCIALLY USEFUL FUNCTION

**STATE OF CONNECTICUT - DEPARTMENT OF TRANSPORTATION  
OFFICE OF CONSTRUCTION (OOC) - COMMERCIALY USEFUL FUNCTION (CUF)**

---

*This page for screenshot of other*

CUF Mountain Farm

26



Connecticut DOT

Number: ED-2016-4

Office of Engineering

Date: July 14, 2016

# ENGINEERING DIRECTIVE

Scott A. Hill, P.E.  
2016.07.14  
11:31:53-04'00'

Engineering Administrator

## DBE Participation in Engineering Agreements

This directive provides an overview of Disadvantaged Business Enterprise (DBE) participation in federally-assisted consultant agreements managed by the Office of Engineering and identifies the requirement for approval and process associated with reducing or eliminating DBE participation in these agreements.

### Background

Under federal regulations (49 CFR 26.53) prime contractors (including consulting engineers) may not terminate an approved DBE firm working on a federally-assisted contract for convenience. The regulations [49 CFR 26.53(f)] further require that prime consultants notify the affected DBE in writing of the intended termination and/or substitution. The terminated/reduced DBE is allowed five days to respond to the prime.

### Terminology

The following terms and associated definitions are used:

**DBE Goal:** The value of work to be performed by DBEs, expressed as a percentage of the total for the agreement or assignment. A single goal is usually set for project-specific agreements. For task-based agreements, goals are generally set for specific assignments.

**DBE Commitment:** A portion of a negotiated agreement or assignment amount subcontracted to DBE(s), expressed as dollars. In context, it may refer to either the amount of an individual DBE's subcontract or the total amount of all DBE subcontracts under a single agreement or assignment.

**Prime Consultant:** The entity holding an agreement with the State/Department.

### Overview of DBE Participation in Engineering Agreements

The Department encourages DBE participation in various contract programs, including design-related services. DBE goals are set by the DBE Screening Committee. Consultants responding to solicitations identify proposed DBE participation. After a consultant is selected and the agreement or assignment is negotiated, the level of participation by DBE subconsultant(s) is determined and documented on the DBE Certification Form. The total value (i.e., subcontract

dollar amount) of all DBE subcontracts is the initial (pre-award or pre-assignment) DBE Commitment. When expressed as a percent, the DBE Commitment should meet the goal. If it does not, the consultant must demonstrate a Good Faith Effort.

As work progresses, changes may occur that affect the scope and/or amount of work. The following situations are examples of how agreement changes can impact DBE goal attainment:

- A subconsultant was a certified DBE when the agreement was initiated, but its certification is terminated after the agreement was signed while work was being performed. Work that is under subcontract prior to certification termination but performed after termination is creditable toward the goal. However, work added to a subcontract after termination of DBE status is *not* creditable toward the goal but such work may be considered if a demonstration of Good Faith Effort is required.
- A subcontract was executed with a certified DBE but the work covered by the subcontract was terminated prior to completion. Regardless of the reason for termination, only the value of the work performed prior to termination is creditable toward the goal.
- The prime consultant's scope of services is expanded resulting in a higher agreement amount, but DBE participation is not increased. Even if all the initial DBE commitments are met, the prime may not have met the DBE requirements. A determination of final DBE goal attainment is based on DBE participation as a percent of total (final) agreement cost.

After work is complete, as part of the closeout process, the actual level of DBE participation is determined by audit. If the goal(s) was/were not achieved or other DBE irregularities are found, the prime consultant may be subject to administrative remedies. To avoid falling short of the goal at the end of an agreement, prime consultants must proactively manage DBE participation. When work is added to an agreement or assignment, the prime should provide DBE firms with appropriate opportunities for participation. Further, if the commitment to an individual DBE subconsultant is reduced or terminated, the prime consultant should seek offsetting opportunities, either for a newly-added DBE firm or one already under subcontract.

Several of the documents and processes used to facilitate management and monitoring of DBE participation are identified and discussed below:

#### **DBE Attachment, Consultant Agreements**

This multi-page document is an element of all Department-administered federally-funded consultant agreements. It establishes DBE requirements, including the agreement-specific goal, if applicable. The DBE Agreement Attachment is currently being updated to state certain requirements more explicitly.

#### **DBE Certification Form**

This form is initiated by the Department's Agreements/Negotiations unit for each DBE subcontract and includes project identification, prime and DBE consultant information, subcontract dollar value, the DBE's North American Industry Classification System

(NAICS) code(s) and scope (i.e., brief description of assignment). Both the prime consultant and DBE subconsultant are required to certify the accuracy of the information. The submitted certification is reviewed by lead Engineering unit for reasonableness and by the Office of Contract Compliance, which verifies that the subcontracted DBE is eligible to receive DBE credit for work under the NAICS code(s) identified on the DBE Certification Form. The DBE Certification Form is provided as an attachment to this directive.

#### **Subconsultant Usage and Payment Report**

This form is completed by the prime consultant in support of each invoice submitted to the Department. It identifies all subconsultant contracts and classifications (e.g., status as DBE). The information in the form is sufficient to determine the current DBE commitment and payments. The form template is currently stored in the DOTSHARE/Engineering Standard Forms/Highways-Guide folder.

#### **Subconsultant Payment Log**

This form is completed by the prime consultant for each subconsultant on a quarterly basis, reviewed and signed by the subconsultant before being submitted to the Department unit administering the agreement. The form template is currently stored in the DOTSHARE/Engineering Standard Forms/Highways-Guide folder.

#### **Request to Reduce or Eliminate Design-Related Work Assigned to DBEs**

The form and associated approval process are being promulgated by this directive. Their use is mandatory whenever a prime consultant intends to reduce or terminate a prior DBE commitment, whether it is an original (pre-award, pre-assignment) or subsequent commitment. As further explained in the next section, reduction/termination of any individual DBE commitment requires Department approval. The form is provided as an attachment to this directive. A Word version of the form will initially be available in the DOTSHARE/Engineering Standard Forms/Highways-Guide folder.

#### **Reductions and Elimination of Commitments to DBEs**

Reducing or eliminating any commitment to a DBE under a consultant agreement requires Department approval. The purpose of the Department's review is to help consultants meet DBE goals. A secondary purpose is to undertake and document measures demonstrating a Good Faith Effort by the consultant in the unavoidable event of an eventual (i.e., at conclusion of agreement) shortfall.

The "Request to Reduce or Eliminate Design-Related Work Assigned to Disadvantaged Business Enterprises (DBE)" form (attached) shall be used for all requests. Some requests will require supporting explanations and information, which should be descriptively titled and appended. The following instructions clarify certain terms, requested information and considerations involved in processing requests. The instructions are not comprehensive (i.e., they do not cover every item) since the form itself is sufficiently clear to elicit most of the requested information.



**Section 1, General Information**

The DBE Goal is a percent and does not change over the life of the agreement or assignment. The DBE Commitment is the total amount of DBE subcontracts under the agreement. It reflects approved post-award changes, if any, but does not include any proposed changes.

**Section 2, DBE Participation Being Eliminated or Reduced**

Provide the name of the DBE consulting firm that was approved to participate in the agreement and for whose assignment the prime consultant is now requesting approval to eliminate or reduce.

Describe the work that the DBE was intended to perform but is now being eliminated or reduced. Examples include: prepare Structure Type Studies, conduct hydraulic analyses, perform crash analyses, design urban drainage systems, perform traffic simulation.

State the reasons work assigned to the DBE is now being eliminated or reduced. Examples: Change in scope eliminated/reduced the required studies; DBE is unable to perform the work.

Provide the amount (dollars) and percentage (of the original agreement or assignment, at execution) of the DBE's subcontract work.

The response to the Yes/No question is critical. The prime consultant should answer "Yes" when anticipating the contract DBE goal will be met, including the effects of the reduction/elimination for which approval is being requested and other DBE adjustments previously approved or submitted for approval concurrent to this request (i.e., substitute DBE, increasing the participation level of existing DBE subconsultants). The prime consultant should answer "No" when anticipating the contract DBE goal will not be met.

**Section 3, Substitution/Mitigation**

The prime consultant should use each row to indicate DBE subconsultants that are being provided additional participation (i.e., new assignments). The DBEs may be "existing" (i.e., already have subcontracts for this agreement or "newly-added" (did not previously have a subcontract for this agreement). Indicate the type of work being added and value of the new/added subcontract. If additional rows are needed, state "See Attachment" in the first row and do not include any substantive information (DBE Firm Name, etc.) on the form.

**Section 4, DBE Notification and Impact of Proposed Change(s)**

A DBE subconsultant whose contract is being reduced or terminated must be notified. The DBE is allowed five days to object to the termination, in writing, and to provide reasons for the objection. To comply with the notification requirement, the prime consultant must indicate "Yes" and provide the associated documentation (notice and objection, if any). A "No" response and/or lack of documentation is cause for disapproval.

Information under three scenarios is requested. The “original agreement or assignment” is historical data and documented at the time of the original consultant agreement or assignment. The two columns under the “DBE Participation” heading (amount, percent) refer to total agreement or assignment participation, not any specific DBE. The second-row scenario (“With reduction/eliminated noted in Section 2”) is the level of DBE participation resulting from the requested reduction/elimination without any proposed substitution. The third-row scenario (“With reduction/eliminated noted in Section 3”) is the level of DBE participation resulting from the requested reduction/elimination and any proposed substitution.

#### **Section 5, Certifications of Released DBE and Prime Consultants**

This section provides for signatures by the affected DBE and prime consultant acknowledging the elimination or reduction in participation and related information. The signatories for the affected DBE and prime consultant must have the requisite authority to bind the respective entity (i.e., individuals that can sign agreement/contracts). Titles and dates are also required.

#### **Section 6, Review and Action Taken**

The division chief administering the consultant contract is responsible for approving or disapproving requests. When the “Yes” response is checked in Section 2, no further action is needed. When the “No” response is checked in Section 2 and the Engineering division intends to approve a request, prior concurrence from the Office of Contract Compliance is required.

The Office of Contract Compliance may be consulted on DBE topic, regardless of the need for concurrence on a DBE reduction or elimination request.

The Department unit administering the contract is responsible for reviewing the accuracy of information provided and for retaining records of requests and dispositions.

#### **Attachments:**

- DBE Certification Form
- Request to Reduce or Eliminate Design-Related Work Assigned to Disadvantaged Business Enterprises (DBE)



STATE OF CONNECTICUT  
DEPARTMENT OF TRANSPORTATION



2800 BERLIN TURNPIKE, P.O. BOX 317546  
NEWINGTON, CONNECTICUT 06131-7546

Disadvantage Business Enterprises  
as Subcontractors for Federal and/or State  
Funded Projects

Project Description & Number: \_\_\_\_\_  
DBE's North American Industry Classification System (NAICS) code(s): \_\_\_\_\_

PRIME CONSULTANT

Firm Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City/State: \_\_\_\_\_

DBE CONSULTANT

Firm Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City/State: \_\_\_\_\_

The following is a description of the project functions the above DBE will perform on the subject project which represents a total dollar amount of \$ \_\_\_\_\_

The contractor is required, should there be a change in the originally named DBE's to submit documentation to the initiating unit to substantiate and justify the change, i.e. documentation to provide a basis for the change for review and approval by the CONNDOT officials prior to the implementation of the change. The contractor must demonstrate that the originally named DBE is unable to perform in conformity to specifications, unwilling to perform, is in default of its agreement, is overextended on other jobs, etc.

We, the below signed, do hereby certify and concur with the above stated conditions.

PRIME CONSULTANT

Name: \_\_\_\_\_  
Date: \_\_\_\_\_ Name Typed: \_\_\_\_\_  
Title: \_\_\_\_\_

DBE CONSULTANT

Name: \_\_\_\_\_  
Date: \_\_\_\_\_ Name Typed: \_\_\_\_\_  
Title: \_\_\_\_\_



## Request to Reduce or Eliminate Design-Related Work Assigned to Disadvantaged Business Enterprises (DBE)

Section 1 - General Information			
State Project Number(s):	DBE Goal	%	DBE Commitment \$ _____ %
Prime Consultant Firm Name:	Name of Contact Person:		
Contact's Phone:	Contact's Email:		
Section 2 – DBE Participation Being Eliminated or Reduced			
DBE firm being eliminated or reduced:			
Assigned work being eliminated/reduced:			
Value of DBE firm's approved commitment: \$	Value of DBE firm's work performed to date: \$		
Reason work/tasks being eliminated/reduced from this DBE:			
Will the DBE goal be met if this change is approved?			
<input type="checkbox"/> Yes, the goal will be met with existing participation or by increasing DBE utilization. Complete Section 3 if applicable.			
<input type="checkbox"/> No, the goal will not be met. Complete Section 3 if applicable. Attach an explanation of why the goal will not be met. [Note: At the conclusion of the contract, documentation of a Good Faith Effort will be required.]			
Section 3 – Substitution/Mitigation			
Identify work, not previously assigned to a DBE, now being assigned to a DBE firm(s).			
DBE Firm Name	Assignment/Tasks	Value (\$)	
Section 4 – DBE Notification and Impact of Proposed Change(s)			
Was DBE firm given 5 days' notice? (provide documentation)	Scenario	DBE Participation	
		\$	%
<input type="checkbox"/> Yes <input type="checkbox"/> No	Original agreement or assignment (at execution)		
	With reduction/elimination noted in Section 2		
	With substitution/mitigation noted in Section 3		
Section 5 - Certifications of Released DBE and Prime Consultants			
By signing this form we certify that the DBE firm is releasing previously-committed (pre-award or subsequent) work			
Authorized DBE signer:	Title:	Date:	
Authorized Prime signer:	Title:	Date:	
Section 6 – Review and Action Taken (CTDOT Use only)			
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved (Explanation attached)			
* By:	Title:	Date:	
* Concur:	Title:	Date:	

\* Action (approval/disapproval) is by division chief. Concurrence by Office of Contract Compliance is required when DBE goal will not be met ("No" is checked in Section 2)

DBE Termination/Replacement for

### CONNECTICUT DEPARTMENT OF TRANSPORTATION CONSTRUCTION PROJECT SITE RECORD REVIEW

Review Date: \_\_\_\_\_

Percent Complete: \_\_\_\_\_

Project Number: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

**Contractor Representatives Present:**

_____	Title	_____
_____	Title	_____
_____	Title	_____

**DOT Representatives Present:**

_____	Title	_____
_____	Title	_____
_____	Title	_____
_____	Title	_____
_____	Title	_____

**FHWA Representatives Present:**

_____	Title	_____
-------	-------	-------

Is this project in compliance: Yes \_\_\_\_\_ No \_\_\_\_\_

Full Compliance Review Recommended: Yes \_\_\_\_\_ No \_\_\_\_\_

District EO Liaison: \_\_\_\_\_

Construction Division Chief: \_\_\_\_\_

comments:

\_\_\_\_\_  
*(To be answered by the Division of Contract Compliance only)*

Date Received by the Division of Contract Compliance: \_\_\_\_\_

Reviewer: \_\_\_\_\_

Date Reviewed by the Division of Contract Compliance: \_\_\_\_\_

Full Compliance Review/Audit Scheduled: \_\_\_\_\_

(To be completed at the time of review by the reviewer)

- 1) Has your company's EEO policy, affirmative action policy and grievance procedures been brought to the attention of the employees on this project? \_\_\_\_\_  
How? \_\_\_\_\_ When? \_\_\_\_\_
- 2) How many minorities have been employed on this project? \_\_\_\_\_  
How many are currently employed? \_\_\_\_\_ (Project completed)
- 3) Is the minority utilization of \_\_\_\_\_ % per craft being met?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)  
(Not for operators and truck drivers)
- 4) How many females have been employed on this project? \_\_\_\_\_  
How many are currently employed? \_\_\_\_\_
- 5) Is the female utilization of 6.9% per craft being met?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)  
(All trades)
- 6) List recruitment sources utilized to staff this project (Attach copies of documentation)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 7) Are the materials listed below posted where the project personnel can review them?  
EEO Posters \_\_\_\_\_ EEO/Affirmative Action Policy \_\_\_\_\_  
Wage Schedule \_\_\_\_\_ Grievance Procedures \_\_\_\_\_ Union Notice \_\_\_\_\_
- 8) Has each job opening been listed with Connecticut State Job Service as required by Executive Order 17?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)
- 9) Are trainees a provision of the contract?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)
- 10) Have you discussed with your subcontractors their EEO/Affirmative Action Contract obligations?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)
- 11) Are your subcontractors being paid within 30 days after you receive payment?  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)
- 12) Have you and your subcontractors requested certification from the Department of Labor for apprentices working on this project  
Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, explain)

## PROJECT SITE RECORD REVIEW INSTRUCTIONS:

The attached forms are to be completed and submitted by the Prime contractor to the reviewer as requested.

These forms must be completed thoroughly, if you did not have any activity in a particular area, please write "no activity" on that form.

- PACKET "A"** is for *Prime Contractor Data* and should be completed by the Prime Contractor.
  - Submit a listing of Minority and Female Recruitment Sources
  - Employment Data – Project
  - New Hires for Project
  - Re-Hires for Project
  - Transfers for Projects
  - DBE/SBE Participation
  - OJT – On the Job Trainees
  
- PACKET "B"** is for *Subcontractor Data* (a packet must be completed for each subcontractor who performed work during this review period).
  - Employment Data – Project
  - New Hires for Project
  - Re-Hires for Project
  - Transfers for Projects



PACKET "A"

PRIME CONTRACTOR DATA

REVIEW PERIOD

---

EMPLOYMENT DATA - PROJECT

INSTRUCTIONS: FOR PROJECT \_\_\_\_\_, COMPLETE THE EMPLOYMENT STATISTICS FOR THE PERIOD COVERING \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_

JOB CATEGORIES	WORK HOURS OF EMPLOYMENT													TOTAL EMPLOYMENT			
	UNION LOCAL #s	TOTAL EMPLOYEES HOURS		BLACK HOURS		HISPANIC HOURS		AMER. INDIAN ALASKIAN NAT. HOURS		ASIAN/PACIFIC ISLANDER HOURS		WHITE HOURS		ALL EMPLOYEES		MINORITY EMPLOYEES	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
OFFICIALS (MANAGERS)																	
SUPERVISORS																	
FOREPERSON																	
CLERICAL																	
EQUIP. OPERS.																	
MECHANICS																	
TRUCK DRIVERS																	
IRONWORKERS																	
CARPENTERS																	
CEMENT MASONS																	
ELECTRICIANS																	
PIPEFITTER, PLUMBER																	
PAINTERS																	
LABORER, SEMI-SKILLED																	
LABORER, UNSKILLED																	
OTHER																	
TOTALS																	

TABLE B

APPRENTICES ON THE JOB TRAINEES												

PREPARED BY \_\_\_\_\_ DATE \_\_\_\_\_

## Employment Data Sheet Instructions

On each and every construction project Contractors are required to demonstrate "GOOD FAITH EFFORT" in hiring minorities and females into their work force.

The following definitions are considered appropriate for use in reporting construction Contractor employment of craftspersons:

1. Recall or Rehire – (after a seasonal shutdown) – a craftsperson who worked for a Contractor the previous construction season and who is recalled for work by the same Contractor when that same project commences in the next construction season.
2. Transfer – A craftsperson who works for a Contractor and who moves from project to project working for the same Contractor. Employment would tend to be continuous; transfers to other projects would be based upon workload requirements; and periods of unemployment would be due to vacation or season shutdown.
3. New Hire –
  - a. A person working for a Contractor for the first time (regardless of previous work experience with another Contractor).
  - b. Each employee referral from a Union or Hiring Hall in response to a request by the Contractor. In this case, the employee might have worked for the contractor on previous projects. However, he has worked for other Contractors in the interim, or has been unemployed for three months or more during the active construction season.

### THE ABOVE DEFINITIONS SHOULD BE APPLIED AS FOLLOWS:

- A. Normally Foremen, Supervisors, Superintendents and Management Officials are considered permanent employees. They are usually salaried and represent company management. They are usually not referred by Unions nor are they hired for particular projects.
- B. In job classifications where minority and/or female utilization is not being achieved, it will be necessary for the Contractor to fully document and substantiate their efforts taken to recruit and hire minorities and females. The Contractor may request assistance in the recruitment and hiring of minorities and females at anytime.
- C. It should be noted that if the employee has been employed by other Contractors between jobs or during the seasonal shutdown, the employee has thus had a break in continuous employment with one Contractor and any decision to employ him/her would be a new hire.







DBE Participation

Project #:

Goal %

DBE Subcontractor Name	Pre-Award Bid Amount	Pre-Award Bid DBE Commitment Value	Current Bid Amount	Current Bid DBE Commitment Value	Final Bid Amount	Final Bid DBE Commitment Value	Explanation of Changes to the Commitment Value (Removal of Items, Change Orders, Additional Work, Delinquent Payments, etc.)

If there have been issues with DBE firms or changes, which reduced the commitment to DBE firm or a DBE firm was terminated, please explain the issue and what efforts will be made to satisfy the DBE Goal:

**ON THE JOB TRAINEES (OJT)**

Please provide the following information for trainees on this project. (Only trainees approved by the Division of Contract Compliance will be eligible to fulfill the OJT Training requirement on this project).

The total number of Trainee hours required for this project is \_\_\_\_\_.

If currently enrolled in the Connecticut Department of Transportation On-the-Job Training (OJT) Workforce Development Pilot; the total number of Trainees required by Agreement is \_\_\_\_\_.

Trainee Name	Craft	Total Hours Completed	Hours to be Completed	<u>A</u> ctive/ <u>I</u> nactive or <u>T</u> erminated	Training Completed (yes or no)	Name of Contractor providing Training



## PROJECT SITE RECORD REVIEW INSTRUCTIONS:

The attached forms are to be completed and submitted by the Prime contractor to the reviewer as requested.

These forms must be completed thoroughly, if you did not have any activity in a particular area, please write "no activity" on that form.

- PACKET "A"** is for *Prime Contractor Data* and should be completed by the Prime Contractor.
  - Submit a listing of Minority and Female Recruitment Sources
  - Employment Data -- Project
  - New Hires for Project
  - Re-Hires for Project
  - Transfers for Projects
  - DBE/SBE Participation
  - OJT -- On the Job Trainees
  
- PACKET "B"** is for *Subcontractor Data* (a packet must be completed for each subcontractor who performed work during this review period).
  - Employment Data -- Project
  - New Hires for Project
  - Re-Hires for Project
  - Transfers for Projects

PACKET "B"

SUBCONTRACTOR DATA

(A packet must be completed for each subcontractor)

REVIEW PERIOD

---

# EMPLOYMENT DATA - PROJECT

INSTRUCTIONS: FOR PROJECT \_\_\_\_\_, COMPLETE THE EMPLOYMENT STATISTICS FOR THE PERIOD COVERING \_\_\_\_\_

CONTRACTOR NAME _____		WORK HOURS OF EMPLOYMENT												TOTAL EMPLOYMENT			
		TABLE A															
JOB CATEGORIES	UNION LOCAL #s	TOTAL EMPLOYEES		BLACK HOURS		HISPANIC HOURS		AMERICAN ALASKIAN NAT. HOURS		ASIAN/PACIFIC ISLANDER HOURS		WHITE HOURS		ALL EMPLOYEES		MINORITY EMPLOYEES	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
OFFICIALS (MANAGERS)																	
SUPERVISORS																	
FOREPERSON																	
CLERICAL																	
EQUIP. OPERS.																	
MECHANICS																	
TRUCK DRIVERS																	
IRONWORKERS																	
CARPENTERS																	
CEMENT MASONS																	
ELECTRICIANS																	
PIPEFITTER, PLUMBER																	
PAINTERS																	
LABORER, SEMI-SKILLED																	
LABORER, UNSKILLED																	
OTHER																	
TOTALS																	

TABLE B

APPRENTICES																	
ON THE JOB TRAINEES																	

PREPARED BY \_\_\_\_\_ DATE \_\_\_\_\_

## Employment Data Sheet Instructions

On each and every construction project Contractors are required to demonstrate "GOOD FAITH EFFORT" in hiring minorities and females into their work force.

The following definitions are considered appropriate for use in reporting construction Contractor employment of craftspersons:

1. Recall or Rehire -- (after a seasonal shutdown) -- a craftsperson who worked for a Contractor the previous construction season and who is recalled for work by the same Contractor when that same project commences in the next construction season.
2. Transfer -- A craftsperson who works for a Contractor and who moves from project to project working for the same Contractor. Employment would tend to be continuous; transfers to other projects would be based upon workload requirements; and periods of unemployment would be due to vacation or season shutdown.
3. New Hire --
  - a. A person working for a Contractor for the first time (regardless of previous work experience with another Contractor).
  - b. Each employee referral from a Union or Hiring Hall in response to a request by the Contractor. In this case, the employee might have worked for the contractor on previous projects. However, he has worked for other Contractors in the interim, or has been unemployed for three months or more during the active construction season.

### THE ABOVE DEFINITIONS SHOULD BE APPLIED AS FOLLOWS:

- A. Normally Foremen, Supervisors, Superintendents and Management Officials are considered permanent employees. They are usually salaried and represent company management. They are usually not referred by Unions nor are they hired for particular projects.
- B. In job classifications where minority and/or female utilization is not being achieved, it will be necessary for the Contractor to fully document and substantiate their efforts taken to recruit and hire minorities and females. The Contractor may request assistance in the recruitment and hiring of minorities and females at anytime.
- C. It should be noted that if the employee has been employed by other Contractors between jobs or during the seasonal shutdown, the employee has thus had a break in continuous employment with one Contractor and any decision to employ him/her would be a new hire.

New Hires for Project # \_\_\_\_\_

Name	Address	Occupation	SSN	Date of Hire	Union Member	M	F	Ethnic Group





### COMPLIANCE REVIEW INSTRUCTIONS:

The attached forms are to be completed and submitted by the Prime contractor to the reviewer as requested.

These forms must be completed thoroughly, if you did not have any activity in a particular area, please write "no activity" on that form.

- PACKET "A"** is for *Prime Contractor Data* and should be completed by the Prime Contractor.
  - ATTACHMENT 1P** – Submit information for Desk Audit
  - ATTACHMENT 2P**- Submit a listing of Minority and Female Recruitment Sources
  - ATTACHMENT 3P** – Employment Data – Project
    - 3P-a** – DBE/SBE Participation
    - 3P-a** – OJT – On the Job Trainees
    - 3P-a** – New Hires for Project
    - 3P-a** – Re-Hires for Project
    - 3P-a** – Transfers for Projects
  - ATTACHMENT 4P** – Employment Data – Total Workforce
  - ATTACHMENT 5P** – Contract Worksheet
  - ATTACHMENT 6P** – Termination Sheet
  
- PACKET "B"** is for *Subcontractor Data* ( a packet must be completed for each subcontractor who performed work during this review period ).
  - ATTACHMENT 1S** – Submit information for Desk Audit
  - ATTACHMENT 2S** – Submit a listing of Minority and Female Recruitment Sources
  - ATTACHMENT 3S** – Employment Data – Project
  - ATTACHMENT 4S** – Termination Sheet



**PACKET "A"**  
**PRIME CONTRACTOR DATA**

**Firm's Name:** \_ \_

**Address:** \_ . \_

**City, State:** \_\_\_\_\_

**Tel.:** \_\_\_\_\_

**REVIEW PERIOD:**

\_\_\_\_\_

### Attachment 1P

Please submit the following information:

- Copies of all current bargaining agreements (if not a Union Company, please indicate so)
- A copy of the Employee Handbook (this should include the company's hiring/promotion/termination policies, EEO policy, complaint policy & procedure, sexual harassment policy, etc.)
- Sample copy of letterhead, fax sheet or invoice(s) containing the EEO purchase orders and subcontracts containing the EEO clause
- Please submit copies of ALL subcontracts between Prime Contractor and its DBE subcontractors
- Submit all verification of payments for all DBE subcontractors, please include when the Prime Contractor was paid by CTDOT and when the Prime Contractor paid its subcontractors
- Provide a list of any allegations of discrimination filed against your firm
- Please include a statement of the status of any action pertaining to employment practices taken by the Equal Employment Opportunity Commission (EEOC) or other Federal, State, or local agency regarding the contractor or any source of employees, i.e. Discrimination Complaints or any actions taken against you
- Describe what type of training have been provided to your employees

**Referral Sources**

Please submit a list of recruitment sources utilized for this project:

**Attachment 2P**

(Print copies for additional resources)

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

ATTACHMENT 3P

EMPLOYMENT DATA - PROJECT

INSTRUCTIONS: FOR PROJECT \_\_\_\_\_, COMPLETE THE EMPLOYMENT STATISTICS FOR THE PERIOD COVERING \_\_\_\_\_

CONTRACTOR NAME _____		WORK HOURS OF EMPLOYMENT												TOTAL EMPLOYMENT			
		TABLE A												ALL EMPLOYEES			MINORITY EMPLOYEES
JOB CATEGORIES	UNION LOCAL #s	TOTAL EMPLOYEES HOURS		BLACK HOURS		HISPANIC HOURS		AMER. INDIAN ALASKIAN NAT. HOURS		ASIAN/PACIFIC ISLANDER HOURS		WHITE HOURS		M	F	M	F
		M	F	M	F	M	F	M	F	M	F	M	F				
OFFICIALS (MANAGERS)																	
SUPERVISORS																	
FOREPERSON																	
CLERICAL																	
EQUIP. OPERS.																	
MECHANICS																	
TRUCK DRIVERS																	
IRONWORKERS																	
CARPENTERS																	
CEMENT MASONS																	
ELECTRICIANS																	
PIPEFITTER, PLUMBER																	
PAINTERS																	
LABORER, SEMI-SKILLED																	
LABORER, UNSKILLED																	
OTHER																	
TOTALS																	

TABLE B													
APPRENTICES													
ON THE JOB TRAINEES													

PREPARED BY \_\_\_\_\_ DATE \_\_\_\_\_



# DBE Participation

Project #:

Goal %

DBE Subcontractor Name	Pre-Award Firm Y/N	Pre-Award Commitment Value	Current Total Subcontractor Value to Date	Total Payments to Date	Explanation of Changes to the Commitment Value (Removal of Items, Change Orders, Additional Work, Deletion of Firm, etc.)

If there have been issues with DBE firms or changes, which reduced the commitment to DBE firm or a DBE firm was terminated, please explain the issue and what efforts will be made to satisfy the DBE Goal:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



Attachment 3P-a

Transfers for Project # \_\_\_\_\_

Name	Address	Occupation	SSN (last 4 digits)	Transferred from Project	Date of Transfer	Union Member	M	F	Ethnic Group	Original Date of Hire





New Hires for Project # \_\_\_\_\_

**Attachment 3P-a**

Name	Address	Occupation	SSN (last 4 digits)	Date of Hire	Union Member	M	F	Ethnic Group

### ON THE JOB TRAINEES (OJT)

### Attachment 3P-a

Please provide the following information for trainees on this project. (Only trainees approved by the Division of Contract Compliance will be eligible to fulfill the OJT Training requirement on this project).

The total number of Trainee hours required for this project is \_\_\_\_\_.

Trainee Name	Craft	Total Hours Completed	Hours to be Completed	Active/Inactive or Terminated	Training Completed (yes or no)	Name of Contractor providing Training

EMPLOYMENT DATA - TOTAL COMPANY WORK FORCE

INSTRUCTIONS: FOR PROJECT \_\_\_\_\_, COMPLETE THE EMPLOYMENT STATISTICS FOR THE PERIOD COVERING \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_

JOB CATEGORIES	UNION LOCAL #s	WORK HOURS OF EMPLOYMENT												TOTAL EMPLOYMENT					
		TOTAL EMPLOYEES HOURS		BLACK HOURS		HISPANIC HOURS		AMERICAN ALASKIAN NAT. HOURS		ASIAN/PACIFIC ISLANDER HOURS		WHITE HOURS		ALL EMPLOYEES		MINORITY EMPLOYEES			
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
OFFICIALS (MANAGERS)																			
SUPERVISORS																			
FOREPERSON																			
CLERICAL																			
EQUIP. OPERS.																			
MECHANICS																			
TRUCK DRIVERS																			
IRONWORKERS																			
CARPENTERS																			
CEMENT MASONS																			
ELECTRICIANS																			
PIPEFITTER, PLUMBER																			
PAINTERS																			
LABORER, SEMI-SKILLED																			
LABORER, UNSKILLED																			
OTHER																			
TOTALS																			

TABLE B

APPRENTICES ON THE JOB	TRAINEEES																		

PREPARED BY \_\_\_\_\_ DATE \_\_\_\_\_

## Attachment 5P

### *CONTRACT WORKSHEET*

CONTRACTOR NAME \_\_\_\_\_

List all active projects being performed by the Contractor:

Project No.	Contracting Agency	\$ Value	Funding		
			Federal	State	Other
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# Attachment 6P

## PROJECT TERMINATION DATA SHEET

Project # \_\_\_\_\_

NAME	RACE & SEX	INITIAL DATE OF HIRE	JOB TITLE	DATE OF TERMINATION OR LAYOFF	REASONS FOR TERMINATION

IF THERE WERE NO TERMINATIONS DURING THE REVIEW PERIOD, PLEASE CHECK THIS BOX.



**PACKET "B"**  
**SUB CONTRACTOR DATA**

**Firm's Name:** \_\_\_\_\_

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

**City, State:** \_\_\_\_\_

**Tel.:** \_\_\_\_\_

**REVIEW PERIOD:**

\_\_\_\_\_





## Attachment 1S

Please submit the following information:

- Copies of all current bargaining agreements (if not a Union Company, please indicate so)
- A copy of the Employee Handbook (this should include the company's hiring/promotion/termination policies, EEO policy, complaint policy & procedure, sexual harassment policy, etc.)
- Sample copy of purchase orders and subcontracts containing the EEO clause
- Provide a list of any allegations of discrimination filed against your firm
  - Please include a statement of the status of any action TAKEN pertaining to employment practices by the Equal Employment Opportunity Commission (EEOC) or other Federal, State, or local agency regarding Discrimination Complaints or any actions taken against you

**Referral Sources**

Please submit a list of recruitment sources utilized for this project:

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	
Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

**Attachment 2S**

(Print copies for additional resources)

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

Organization	
Contact Name	
Street Address	
City	
State	
Zip Code	
Telephone	

EMPLOYMENT DATA - PROJECT ATTACHMENT 3S

INSTRUCTIONS: FOR PROJECT \_\_\_\_\_, COMPLETE THE EMPLOYMENT STATISTICS FOR THE PERIOD COVERING \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_

		WORK HOURS OF EMPLOYMENT												TOTAL EMPLOYMENT			
		TABLE A															
JOB CATEGORIES	UNION LOCAL #s	TOTAL EMPLOYEES HOURS		BLACK HOURS		HISPANIC HOURS		AMER.INDIAN ALASKIAN NAT. HOURS		ASIAN/PACIFIC ISLANDER HOURS		WHITE HOURS		ALL EMPLOYEES		MINORITY EMPLOYEES	
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
OFFICIALS (MANAGERS)																	
SUPERVISORS																	
FOREPERSON																	
CLERICAL																	
EQUIP. OPERS.																	
MECHANICS																	
TRUCK DRIVERS																	
IRONWORKERS																	
CARPENTERS																	
CEMENT MASONS																	
ELECTRICIANS																	
PIPEFITTER, PLUMBER																	
PAINTERS																	
LABORER, SEMI-SKILLED																	
LABORER, UNSKILLED																	
OTHER																	
TOTALS																	

		TABLE B															
APPRENTICES																	
ON THE JOB TRAINEES																	

PREPARED BY \_\_\_\_\_ DATE \_\_\_\_\_

# Attachment 4S

## PROJECT TERMINATION DATA SHEET

**Project #** \_\_\_\_\_

NAME	RACE & SEX	INITIAL DATE OF HIRE	JOB TITLE	DATE OF TERMINATION OR LAYOFF	REASONS FOR TERMINATION

IF THERE WERE NO TERMINATIONS, PLEASE CHECK THIS BOX

FINAL DBE or SBE PARTICIPATING REPORT  
FORM 88-1

29

Contract No.: \_\_\_\_\_ FAP/FTA/FAA No.: \_\_\_\_\_

Prime Contractor: \_\_\_\_\_ Vendor ID: \_\_\_\_\_

Completion Date: \_\_\_\_\_ Award Date: \_\_\_\_\_

Original Contract Value: \_\_\_\_\_ Revised Contract Value: \_\_\_\_\_

Specified Goal: \_\_\_\_\_ Type (check one): DBE  SBE

**List of DBE or SBE Firms Approved to Work on Contract**

Name of Firm	Preaward Assigned Value of Work	Verified Value of Work Performed
	\$0.00	

<b>Totals</b>		
Percent of Original Contract Value		
Percent of Revised Contract Value		#DIV/0!

<b>FOR OOC USE</b>	
Race conscience:	_____
Race neutral:	_____

The Last Submittal was Received on: \_\_\_\_\_

STATUS BALL IN COURT	Date Project Completed by District (CON-300)	Date Memo Received From District	Project	Contractor / Consultant	District	Const Muni City	OCC - Comments	OCC - EF to NR "A"	OCC - Date of GFE determined on "E"	OCC - GFE by DOC of forwarded to OCC	OCC - Date sent to OCC "C"	OCC - Staff reviewed by	OCC - GFE (\$100) or Sanction Amt (\$)	OCC - GFE or sent to Commr	OCC - GFE date back to OCC	Comm - Date OCC sent to Commissioner	Comm - Date of determination	Final Memo of Email Sent to District & Files	Remarks	[Total]
Comp. (E) =	0	0	Received by OCC (A) =	0	0	0	OCC/NR Reviewing (B) =	0	0	0	0	0	0	0	0	0	0	0	0	0
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
12																				
13																				
14																				
15																				
16																				
17																				
18																				
19																				
20																				
21																				
22																				
23																				
24																				
25																				
26																				
27																				
28																				
29																				
30																				
31																				
32																				
33																				
34																				
35																				
36																				
37																				
38																				
39																				
40																				
41																				
42																				
43																				
44																				
45																				
46																				
47																				
48																				
49																				
50																				
51																				
52																				
53																				
54																				
55																				
56																				
57																				
58																				
59																				
60																				
61																				
62																				
63																				
64																				