



**ATTACHMENT B**

PROJECT NO: \_\_\_\_\_

**PROPOSED DBE BID PARTICIPATION**

PRIME CONTRACTOR \_\_\_\_\_

PROJECT \_\_\_\_\_

DBE FIRM	PRINCIPAL OFFICIAL	ADDRESS/PHONE NO.	TYPE OF WORK	AGREED CONTRACT PRICE

**TOTAL DBE PROPOSED SUBCONTRACTING \$**

**THE DBE PROPOSED SUBCONTRACTING IS \_\_\_\_\_ % OF THE TOTAL CONTRACT AMOUNT**

**The undersigned will enter into a formal agreement with the DBE contractors/suppliers listed herein conditioned upon the execution of a contract with the City of Tempe.**

Signed By \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

**ATTACHMENT C**

**PROJECT NO.** \_\_\_\_\_

**IDENTIFICATION STATEMENT FOR DISADVANTAGED BUSINESS ENTERPRISES**

The undersigned hereby certifies that the following information is true and accurate.

BUSINESS NAME \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ TITLE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

The following is a listing of all licenses held by the company and a description of services provided by the firm.

LICENSES HELD \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ISSUED BY \_\_\_\_\_

DESCRIPTION OF SERVICES PROVIDED \_\_\_\_\_

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

**In accordance with the USDOT Disadvantaged Business Enterprise Program as described in 49 CFR Part 26, Subpart D, the undersigned hereby certifies that the firm submitting this statement has qualified as a Disadvantaged Business Enterprise and holds a current DBE certification from:**

\_\_\_\_\_  
**(Name of Certifying Agency)**

\_\_\_\_\_  
**(Telephone Number)**

Qualifying DBE Signature \_\_\_\_\_ Date \_\_\_\_\_

For additional information contact the Equal Opportunity Department at (602) 262-6790



**ATTACHMENT E**  
**CITY OF PHOENIX EQUAL OPPORTUNITY DEPARTMENT**  
**CERTIFICATION OF PAYMENT TO DBE FIRMS**

The undersigned, having contracted as the prime contractor on Project No. \_\_\_\_\_ hereby certifies that full payment has been made to the firm indicated. Payments made or pending to a DBE firm for materials and/or work performed under this project's contract are as follows:

**The DBE firm of \_\_\_\_\_**

**was paid the amount of \$ \_\_\_\_\_.**

This certification is made under Federal and State laws concerning false statement. Supporting documentation for this payment is subject to audit and should be retained for a minimum of three (3) years from the project acceptance date. In the event the DBE was not paid in accordance with affidavits submitted by the prime contractor, all documentation supporting the contractor's position should be submitted.

**I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OF FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

\_\_\_\_\_  
Prime Contractor Representative

By: \_\_\_\_\_  
(Print name and title)

Date: \_\_\_\_\_

The undersigned DBE subcontractor/supplier/manufacturer hereby certifies that a contract was entered into with the above named prime contractor to perform work or provide materials on the project cited in this document. I further certify that payments were received and/or justification submitted by the prime contractor for failure to make such payments in accordance with previous affidavits is correct.

**I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OF FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

\_\_\_\_\_  
Subcontractor Representative

By: \_\_\_\_\_  
(Print name and title)

Date: \_\_\_\_\_