

# FORT MORGAN MUNICIPAL AIRPORT

FORT MORGAN, COLORADO



## Disadvantaged Business Enterprise (DBE) Program

## FY 2014 – 2016 DBE Goal and Program

Prepared for:  
CITY OF FORT MORGAN  
710 E. Railroad Avenue  
PO Box 100  
Fort Morgan, Colorado 80701

Prepared by:  
REYNOLDS, SMITH & HILLS, INC.  
4700 S. Syracuse Street, Suite 300  
Denver, Colorado 80237





U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

Federal Aviation Administration  
Western-Pacific Region Headquarters  
Reply to: Northwest Mountain Region

Civil Rights Office, AWP-9  
15000 Aviation Blvd.  
Lawndale, CA 90261

**JUL 17 2013**

David Callahan, AICP  
Director of Community Development  
PO Box 100  
Fort Morgan, Colorado 80701

Dear Mr. Callahan:

This letter is in reference to the Disadvantaged Business Enterprise (DBE) fiscal year (FY) 2014 thru 2016 goal that you submitted for the **Fort Morgan Municipal Airport**, Fort Morgan, Colorado. Based on our review, we have determined that the program and goal meet the standards in 49 CFR Part 26, Department of Transportation regulations.

The goal is described as follows:

**FY 14/15/16 Overall goal: 3.7 % DBE Participation**  
To be obtained through **0.0 % Race-Neutral** and **3.7 % Race-Conscious means**  
(Covering the period October 1, 2013 through September 30, 2016)

This overall goal covers the following projects to be advertised during **FY 14/15/16**:

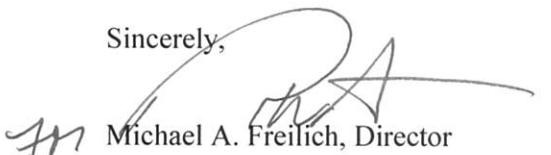
**FY-14:** Airport New Runway 14-32 Construction  
**FY-15:** No Scheduled Federal Projects  
**FY-16:** No Scheduled Federal Projects

DBE Accomplishments continue to be due annually on **December 1** for the previous Fiscal Year. Accomplishments can be submitted either through our new DOORS system at <http://osdbu.dot.gov/DOORS/Application/logon.aspx> or by completing the Uniform Report of DBE Awards/Commitments and Payments form and submitting via email to [ricky.watson@faa.gov](mailto:ricky.watson@faa.gov).

If you need a DOORS user account, please contact Ricky Watson at phone 310-725-3940. Our blank forms can be found at [http://www.faa.gov/about/office\\_org/headquarters\\_offices/acr/bus\\_ent\\_program/](http://www.faa.gov/about/office_org/headquarters_offices/acr/bus_ent_program/).

If you have any questions or need assistance, please call Ricky Watson at (310) 725-3940 or email at [ricky.watson@faa.gov](mailto:ricky.watson@faa.gov).

Sincerely,

  
Michael A. Freilich, Director  
Civil Rights, Western-Pacific Region  
& DBE Compliance

cc: Kevin Luey, DEN-ADO  
Shannon Casner, RS&H

**PUBLIC NOTICE**

**FORT MORGAN MUNICIPAL AIRPORT  
FORT MORGAN, COLORADO  
2014 – 2016 DBE PROGRAM**

The City of Fort Morgan, Colorado (Sponsor) has established a Disadvantaged Business Enterprise (DBE) program in accordance with regulations of the U.S. Department of Transportation, 49 CFR Part 26.

The Sponsor has established an overall DBE participation goal of 3.7% of the Federal financial assistance it will receive for improvements to the Fort Morgan Municipal Airport. The Sponsor estimates it will meet this goal entirely through race-conscious measures for DBE participation in airport construction projects.

The program, proposed goals and rationale for developing the goal is available for inspection between 8:00 a.m. and 5:00 p.m., Monday through Friday at the City offices at 710 E. Railroad Street, Fort Morgan, Colorado 80701 or the Fort Morgan Municipal Airport at 23101 Highway 52, Fort Morgan, Colorado 80701 for 30 days from the date of this publication. This information will also be posted to the City of Fort Morgan website for review at [www.cityoffortmorgan.com](http://www.cityoffortmorgan.com).

Comments on the DBE goal will be accepted for 45 days from the date of this publication and can be sent to the following: City of Fort Morgan, David Callahan, PO Box 100, Fort Morgan, Colorado 80701 or to FAA Civil Rights Office, Ricky Watson, PO Box 92007, Los Angeles, California 90009-2007.

**DBE PROGRAM – 49 CFR PART 26**

**POLICY STATEMENT**

**Section 26.1, 26.23**

**Objectives/Policy Statement**

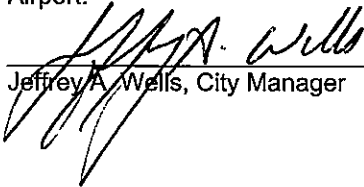
The City of Fort Morgan, Colorado, hereafter referred to as the Sponsor, has established a Disadvantaged Business Enterprise (DBE) Program in accordance with regulations of the U.S. Department of Transportation (DOT), 49 CFR Part 26. The Sponsor has received Federal financial assistance from the Department of Transportation, and as a condition of receiving this assistance, the Sponsor has signed an assurance that it will comply with 49 CFR Part 26.

It is the policy of the Sponsor to ensure that DBEs as defined in Part 26, have an equal opportunity to receive and participate in DOT-assisted contracts. It is also our policy:

1. To ensure nondiscrimination in the award and administration of DOT – assisted contracts;
2. To create a level playing field on which DBEs can compete fairly for DOT-assisted contracts;
3. To ensure that the DBE Program is narrowly tailored in accordance with applicable law;
4. To ensure that only firms that fully meet 49 CFR Part 26 eligibility standards are permitted to participate as DBEs;
5. To help remove barriers to the participation of DBEs in DOT assisted contracts;
6. To assist the development of firms that can compete successfully in the market place outside the DBE Program.

The Director of Community Development, David Callahan, AICP, has been delegated as the DBE Liaison Officer. In that capacity, he 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 Sponsor in its financial assistance agreements with the Department of Transportation.

The Sponsor has disseminated this policy statement to the City Council of Fort Morgan, Colorado and all of the components of our organization. We have distributed this statement to DBE and non-DBE business communities that perform work for us on DOT-assisted contracts. The Sponsor accomplished this by advertising their policy statement in the local newspaper, displaying it in City Hall and at the Airport.

  
\_\_\_\_\_  
Jeffrey A. Wells, City Manager

7/9/13  
Date

## **SUBPART A – GENERAL REQUIREMENTS**

### **Section 26.1 Objectives**

The objectives are found in the policy statement on the first page of this program.

### **Section 26.3 Applicability**

The Sponsor is the recipient of Federal airport funds authorized by 49 U.S.C. 47101, *et seq.*

### **Section 26.5 Definitions**

The Sponsor will use terms in this program that have the meaning defined in Section 26.5.

### **Section 26.7 Non-discrimination Requirements**

The Sponsor will never 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 covered by 49 CFR Part 26 on the basis of race, color, sex, or national origin.

In administering its DBE program, the Sponsor will not, directly or through contractual or other arrangements, use criteria or methods of administration that have the effect of defeating or substantially impairing accomplishment of the objectives of the DBE program with respect to individuals of a particular race, color, sex, or national origin.

### **Section 26.11 Record Keeping Requirements**

#### Reporting to DOT: 26.11(b)

The Sponsor will report DBE participation to DOT utilizing the appropriate form as provided by the FAA.

#### Bidders List: 26.11(c)

The Sponsor will create and maintain a bidders list. The purpose of the list is to provide as accurate data as possible about the universe of DBE and non-DBE contractors and subcontractors who seek to work on our DOT-assisted contracts for use in helping to set our overall goals. The bidders list will include the name, address, DBE and non-DBE status, age of firm, and annual gross receipts of firms to be submitted as part of the bid package.

The Sponsor will collect this information by placing a clause in all bid solicitations requiring prime bidders to report the name, address, DBE or non-DBE status, age, and annual gross receipts of the firms. A bidders list is attached as Attachment 3.

### **Section 26.13 Federal Financial Assistance Agreement**

The Sponsor has signed the following assurances, applicable to all DOT-assisted contracts and their administration:

Assurance: 26.13(a) - Each financial assistance agreement you sign with a DOT operating administration (or a primary recipient) must include the following assurance:

The Sponsor shall not discriminate on the basis of race, color, national origin, or sex in the award and performance of any DOT-assisted contract or in the administration of its DBE program or the

requirements of 49 CFR Part 26. The Sponsor shall take all necessary and reasonable steps under 49 CFR Part 26 to ensure nondiscrimination in the award and administration of DOT-assisted contracts. The Sponsor's DBE program, as required by 49 CFR Part 26 and as approved by DOT, is incorporated by reference in this agreement. Implementation of this program is a legal obligation and failure to carry out its terms shall be treated as a violation of this agreement. Upon notification to the Sponsor of its failure to carry out its approved program, the Department may impose sanctions as provided for under Part 26 and may, in appropriate cases, refer the matter for enforcement under 18 U.S.C. 1001 and/or the Program Fraud Civil Remedies Act of 1986 (31 U.S.C. 3801 *et seq.* ).

This language will appear in financial assistance agreements with sub-recipients.

Contract Assurance: 26.13b

The Sponsor will ensure that the following clause is included in each contract signed with a contractor and each subcontract the prime contractor signs with a subcontractor:

The contractor, sub recipient or subcontractor 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 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 Sponsor deems appropriate.

## **SUBPART B - ADMINISTRATIVE REQUIREMENTS**

### **Section 26.21 DBE Program Updates**

Since the Sponsor has received a grant of \$250,000 or more for airport planning or development in a Federal fiscal year, the Sponsor will continue to carry out this DBE Program until all funds from DOT financial assistance have been expended. The Sponsor will provide to DOT updates representing significant changes in the program for approval. The Sponsor will submit an updated goal annually on August 1 if they plan to award contracts exceeding \$250,000 in FAA funds in that Federal fiscal year.

The Sponsor is not eligible to receive DOT financial assistance unless DOT has approved our DBE Program and we are in compliance with it and this part. We will continue to carry out our program until all funds from DOT financial assistance have been expended.

### **Section 26.23 Policy Statement**

The Policy Statement is elaborated on the first page of this DBE Program.

### **Section 26.25 DBE Liaison Officer (DBELO)**

We have designated the following individual as our DBE Liaison Officer:

Mr. David Callahan, AICP  
Director of Community Development  
PO Box 100  
Fort Morgan, Colorado 80701  
970-542-3924  
970-867-3039 (Fax)  
dcallahan@cityoffortmorgan.com

In that capacity, the DBELO is responsible for implementing all aspects of the DBE program and ensuring that the Sponsor complies with all provisions of 49 CFR Part 26. The DBELO has direct, independent access to the City Council & Mayor McAlister concerning DBE program matters. An organization chart displaying the DBELO's position in the organization is found in Attachment 2 to this program.

The DBELO is responsible for developing, implementing and monitoring the DBE program, in coordination with other appropriate officials. The DBELO has no staff to assist in the administration of the program, however relies upon hired consultants for assistance in monitoring the program. The duties and responsibilities include the following:

1. Gathers and reports statistical data and other information as required by DOT.
2. Reviews third party contracts and purchase requisitions for compliance with this program.
3. Works with all departments to set overall annual goals.
4. Ensures that bid notices and requests for proposals are available to DBEs in a timely manner.
5. Identifies contracts and procurements so that DBE goals are included in solicitations (both race-neutral methods and contract specific goals) and monitors results.
6. Analyzes Sponsor's progress toward attainment and identifies ways to improve progress.
7. Participates in pre-bid meetings.
8. Advises the CEO\governing body on DBE matters and achievement.
9. Chairs the DBE Advisory Committee.
10. Determine contractor compliance with good faith efforts.
11. Provides DBEs with information and assistance in preparing bids, obtaining bonding and insurance.
12. Plans and participates in DBE training seminars.

13. Acts as liaison to the Uniform Certification Process in Colorado.
14. Provides outreach to DBEs and community organizations to advise them of opportunities.
15. Maintains the Sponsor's updated directory on certified DBEs.

### **Section 26.27 DBE Financial Institutions**

It is the policy of the Sponsor to investigate the full extent of services offered by financial institutions owned and controlled by socially and economically disadvantaged individuals in the community, to make reasonable efforts to use these institutions, and to encourage prime contractors on DOT-assisted contracts to make use of these institutions. To-date, the Sponsor has been unable to identify and use any such institutions. The state DBE Directory was used to try and locate DBE Financial Institutions, however none were identified.

### **Section 26.29 Prompt Payment Mechanisms**

The Sponsor has established, as part of its DBE Program, a contract clause to require prime contractors to pay subcontractors for satisfactory performance of their contracts no later than 7 days from receipt of each payment you make to the prime contractor, in accordance with CRS §24-91-103.

The Sponsor will include the following clause in each DOT-assisted prime contract:

The prime contractor agrees to pay each subcontractor under this prime contract for satisfactory performance of its contract no later than 7 days from the receipt of each payment the prime contractor receives from Sponsor. The prime contractor agrees further to return retainage payments to each subcontractor within 7 days after the subcontractors work is satisfactorily completed. Any delay or postponement of payment from the above referenced timeframe may occur only for good cause following written approval of the Sponsor. This clause applies to both DBE and non-DBE subcontractors, and does not diminish the obligations of the prime contractor to provide and comply with the terms of a payment bond, or any subcontractor's rights to enforce payment, pursuant to CRS §38-26-106, other applicable statutes or the common law.

### **Section 26.31 Directory**

The Sponsor uses the State of Colorado DBE directory, maintained by the State. The directory lists the firm's name, address, phone number, date of the most recent certification, and the type of work the firm has been certified to perform as a DBE. In addition, the directory lists each type of work for which a firm is eligible to be certified by using the most specific NAICS code available to describe each type of work.

The State of Colorado revises the Directory at least annually. The directory is available to the public and is available at [coloradodbe.org](http://coloradodbe.org).

### **Section 26.33 Over-concentration**

The Sponsor has not identified that over-concentration exists in the types of work that DBEs perform.

### **Section 26.35 Business Development Programs**

The Sponsor has not established a business development program.



### **Section 26.37 Monitoring and Enforcement Mechanisms**

The Sponsor will take the following monitoring and enforcement mechanisms to ensure compliance with 49 CFR Part 26.

1. The Sponsor will bring to the attention of the Department of Transportation any false, fraudulent, or dishonest conduct in connection with the program, so that DOT can take the steps (e.g., referral to the Department of Justice for criminal prosecution, referral to the DOT Inspector General, action under suspension and debarment or Program Fraud and Civil Penalties rules) provided in 26.107.
2. The Sponsor will implement similar action under its own legal authorities, including responsibility determinations in future contracts and possible prosecution under applicable Colorado Law, including CRS §18-8-504.
3. The Sponsor will implement a monitoring and enforcement mechanism to ensure that work committed to DBEs at contract award or subsequently (i.e., as the result of modification to the contract) is actually performed by the DBEs to which the work was committed.
4. The Sponsor will implement a mechanism that will provide for a running tally of actual DBE attainments (e.g., payment actually made to DBE firms), including a means of comparing these attainments to commitments. In our reports of DBE participation to DOT, we will show both commitments and attainments, as required by the DOT uniform reporting form.

### **Section 26.39 Fostering small business participation.**

The Sponsor has not specifically created a Small Business element to structure contracting requirements to facilitate competition by small business concerns. However, the Sponsor will take all reasonable steps to eliminate obstacles to their participation, including unnecessary and unjustified bundling of contract requirements that may preclude small business participation in procurements as prime contractors or subcontractors.

## **SUBPART C – GOALS, GOOD FAITH EFFORTS, AND COUNTING**

### **Section 26.43 Set-asides or Quotas**

The Sponsor does not use quotas in any way in the administration of this DBE program.

### **Section 26.45 Overall Goals**

The Sponsor will establish an overall DBE goal covering a three-year federal fiscal year period if anticipation of awarding FAA funded prime contracts exceeds \$250,000 during any one or more of the reporting fiscal years within the three-year goal period. In accordance with Section 26.45(f) the Sponsor will submit its Overall Three-year DBE Goal to FAA by August 1.

DBE goals will be established for those fiscal years we anticipate awarding DOT-assisted prime contracts exceeding \$250,000 during the three-year period. The DBE goals will be established in accordance with the 2-step process as specified in 49 CFR Part 26.45. If the Sponsor does not anticipate awarding more than \$250,000 in DOT-assisted prime contracts during any of the years within the three-year reporting period, we will not develop an overall goal; however this DBE Program will remain in effect and the Sponsor will seek to fulfill the objectives outlined in 49 CFR Part 26.1.

The first step is to determine the relative availability of DBEs in the market area, “base figure”. The second step is to adjust the “base figure” percentage from Step 1 so that it reflects as accurately as possible the DBE participation the recipient would expect in the absence of discrimination based on past participation, a disparity study and/or information about barriers to entry to past competitiveness of DBEs on projects.

In establishing the overall goal, the Sponsor will consult with the Colorado Department of Transportation DBE Program Manager and other minority, women’s and general contractor groups, community organizations, and other officials or organizations to obtain information concerning the availability of disadvantaged and non-disadvantaged businesses, the effects of discrimination on opportunities for DBEs, and the Sponsors efforts to establish a level playing field for the participation of DBEs.

Following this consultation, the Sponsor will publish a notice of the proposed overall goals, informing the public that the proposed goal and its rationale are available for inspection during normal business hours at City Hall and the Airport for 30 days following the date of the notice, and informing the public that the Sponsor and DOT/FAA will accept comments on the goals for 45 days from the date of the notice. Notice will be issued in general circulation media and available minority- focus media and trade publications, websites. Normally, the Sponsor will issue this notice by June 1 of the reporting period of the goal. The notice will include addresses to which comments may be sent and addresses where the proposal may be reviewed.

The Sponsor’s Overall Three-Year DBE Goal submission to DOT/FAA will include a summary of information and comments received, if any, during this public participation process and our responses.

The Sponsor will begin using our overall goal on October 1 of the reporting period, unless we have received other instructions from DOT. If we establish a goal on a project basis, we will begin using our goal by the time of the first solicitation for a DOT-assisted contract for the project.

A description of the methodology to calculate the overall goal and the goal calculations can be found in Attachment 5 to this program.

### **Section 26.47 Failure to meet overall goals.**

The Sponsor will maintain an approved DBE Program and overall DBE goal, if applicable as well as administer our DBE Program in good faith to be considered to be in compliance with this part.

If the Sponsor awards and commitments shown on our Uniform Report of Awards or Commitments and Payments at the end of any fiscal year are less than the overall goal applicable to that fiscal year, the Sponsor will do the following in order to be regarded by the Department as implementing your DBE Program in good faith:

- (1) Analyze in detail the reasons for the difference between the overall goal and our awards and commitments in that fiscal year;
- (2) Establish specific steps and milestones to correct the problems we have identified in our analysis and to enable us to meet fully your goal for the new fiscal year;
- (3) The Sponsor will submit, within 90 days of the end of the fiscal year, the analysis and corrective actions developed under paragraphs (c) (1) and (2) of this section to the FAA for approval.

### **Section 26.51(a-c) Breakout of Estimated Race-Neutral & Race-Conscious Participation**

The breakout of estimated race-neutral and race-conscious participation can be found in Attachment 5 to this program.

### **Section 26.51(d-g) Contract Goals**

The Sponsor will arrange solicitations, times for the presentation of bids, quantities, specifications, and delivery schedules in ways that facilitate participation by DBEs and other small businesses and by making contracts more accessible to small businesses, by means such as those provided under § 26.39.

If our approved projection under paragraph (c) of this section estimates that we can meet our entire overall goal for a given year through race-neutral means, we will implement our program without setting contract goals during that year, unless it becomes necessary in order meet our overall goal.

The Sponsor will establish contract goals only on those DOT-assisted contracts that have subcontracting possibilities. We need not establish a contract goal on every such contract, and the size of contract goals will be adapted to the circumstances of each such contract (e.g., type and location of work, availability of DBEs to perform the particular type of work.)

The Sponsor will express contract goals as a percentage of the total amount of a DOT-assisted contract.

### **Section 26.53 Good Faith Efforts Procedures**

#### Demonstration of good faith efforts (26.53(a) & (c))

The obligation of the bidder/offeror is to make good faith efforts. The bidder/offeror can demonstrate that it has done so either by meeting the contract goal or documenting good faith efforts. Examples of good faith efforts are found in Appendix A to Part 26.

The DBELO is responsible for determining whether a bidder/offeror who has not met the contract goal has documented sufficient good faith efforts to be regarded as responsive.

The Sponsor will ensure that all information is complete and accurate and adequately documents the bidder/offeror's good faith efforts before we commit to the performance of the contract by the bidder/offeror.

Information to be submitted (26.53(b))

The Sponsor treats bidder/offers' compliance with good faith efforts' requirements as a matter of responsiveness – all bidders submit DBE information at the time of bid.

**Responsiveness** - Each solicitation for which a contract goal has been established will require all bidders/offers to submit the following information at the time of bid:

1. The names and addresses of DBE firms that will participate in the contract;
2. A description of the work that each DBE will perform;
3. The dollar amount of the participation of each DBE firm participating;
4. Written and signed documentation of commitment to use a DBE subcontractor whose participation it submits to meet a contract goal;
5. Written and signed confirmation from the DBE that it is participating in the contract as provided in the prime contractors commitment and
6. If the contract goal is not met, evidence of good faith efforts.

Administrative reconsideration (26.53(d))

Within 5 business days of being informed by the Sponsor that it is not responsive because it has not documented sufficient good faith efforts, a bidder/offeror may request administrative reconsideration. Bidder/offers should make this request in writing to the following reconsideration official:

Mr. Bradley A. Curtis, PE  
City Municipal Engineer  
PO Box 100  
Fort Morgan, Colorado 80701  
970-542-3901  
bcurtis@cityoffortmorgan.com

The reconsideration official will not have played any role in the original determination that the bidder/offeror did not document sufficient good faith efforts.

As part of this reconsideration, the bidder/offeror will have the opportunity to provide written documentation or argument concerning the issue of whether it met the goal or made adequate good faith efforts to do so. The bidder/offeror will have the opportunity to meet in person with our reconsideration official to discuss the issue of whether it met the goal or made adequate good faith efforts to do. We will send the bidder/offeror a written decision on reconsideration, explaining the basis for finding that the bidder did or did not meet the goal or make adequate good faith efforts to do so. The result of the reconsideration process is not administratively appealable to the Department of Transportation.

Good Faith Efforts when a DBE is replaced on a contract (26.53(f))

The Sponsor will require a contractor to make good faith efforts to replace a DBE that is terminated or has otherwise failed to complete its work on a contract with another certified DBE, to the extent needed to meet the contract goal. The Sponsor will require the prime contractor to notify the DBE Liaison officer immediately of the DBE's inability or unwillingness to perform and provide reasonable documentation.

In this situation, the Sponsor will require the prime contractor to obtain our prior approval of the substitute DBE and to provide copies of new or amended subcontracts, or documentation of good faith efforts.

The Sponsor will provide such written consent only if the Sponsor agrees, for reasons stated in our concurrence document, that the prime contractor has good cause to terminate the DBE firm. For purposes of this paragraph, good cause includes the following circumstances:

- (1) The listed DBE subcontractor fails or refuses to execute a written contract;

- (2) The listed DBE subcontractor fails or refuses to perform the work of its subcontract in a way consistent with normal industry standards. Provided however, that good cause does not exist if the failure or refusal of the DBE subcontractor to perform its work on the subcontract results from the bad faith or discriminatory action of the prime contractor;
- (3) The listed DBE subcontractor fails or refuses to meet the prime contractor's reasonable, non-discriminatory bond requirements.
- (4) The listed DBE subcontractor becomes bankrupt, insolvent, or exhibits credit unworthiness;
- (5) The listed DBE subcontractor is ineligible to work on public works projects because of suspension and debarment proceedings pursuant to 2 CFR Parts 180, 215 and 1,200 or applicable state law;
- (6) The Sponsor has determined that the listed DBE subcontractor is not a responsible contractor;
- (7) The listed DBE subcontractor voluntarily withdraws from the project and provides to the Sponsor written notice of its withdrawal;
- (8) The listed DBE is ineligible to receive DBE credit for the type of work required;
- (9) A DBE owner dies or becomes disabled with the result that the listed DBE contractor is unable to complete its work on the contract;
- (10) Other documented good cause that we have determined compels the termination of the DBE subcontractor. Provided, that good cause does not exist if the prime contractor seeks to terminate a DBE it relied upon to obtain the contract so that the prime contractor can self-perform the work for which the DBE contractor was engaged or so that the prime contractor can substitute another DBE or non-DBE contractor after contract award.

Before transmitting to the Sponsor, the prime contractors request to terminate and/or substitute a DBE subcontractor, the prime contractor must give notice in writing to the DBE subcontractor, with a copy to the Sponsor, of its intent to request to terminate and/or substitute, and the reason for the request.

The prime contractor must give the DBE five days to respond to the prime contractor's notice and advise the Sponsor and the contractor of the reasons, if any, why it objects to the proposed termination of its subcontract and why the sponsor should not approve the prime contractor's action. If required in a particular case as a matter of public necessity (e.g., safety), we may provide a response period shorter than five days.

In addition to post-award terminations, the provisions of this section apply to pre-award deletions of or substitutions for DBE firms put forward by offerors in negotiated procurements.

If the contractor fails or refuses to comply in the time specified, the Sponsor may issue an order stopping all or part of payment/work until satisfactory action has been taken. If the contractor still fails to comply, the contracting officer may issue a termination for default proceeding.

Sample Bid Specification:

The requirements of 49 CFR Part 26, Regulations of the U.S. Department of Transportation, apply to this contract. It is the policy of the sponsor to practice nondiscrimination based on race, color, sex, or national origin in the award or performance of this contract. All firms qualifying under this solicitation are encouraged to submit bids/proposals. Award of this contract will be conditioned upon satisfying the requirements of this bid specification. These requirements apply to all bidders/offerors, including those who qualify as a DBE. A DBE contract goal of \_\_\_ percent has been established for this contract. The bidder/offeror shall make good faith efforts, as defined in Appendix A, 49 CFR Part 26 (attachment 1), to meet the contract goal for DBE participation in the performance of this contract.

The bidder/offeror will be required to submit the following information: (1) the names and addresses of DBE firms that will participate in the contract; (2) a description of the work that each DBE firm will perform; (3) the dollar amount of the participation of each DBE firm participating; (4) Written documentation of the bidder/offeror's commitment to use a DBE subcontractor whose

participation it submits to meet the contract goal; (5) Written confirmation from the DBE that it is participating in the contract as provided in the commitment made under (4); and (6) if the contract goal is not met, evidence of good faith efforts.

#### **Section 26.55 Counting DBE Participation**

We will count DBE participation toward overall and contract goals as provided in 49 CFR 26.55. The Sponsor will not count the participation of a DBE subcontract toward a contractor's final compliance with its DBE obligations on a contract until the amount being counted has actually been paid to the DBE.

## **SUBPART D – CERTIFICATION STANDARDS**

### **Section 26.61 – 26.73 Certification Process**

The Sponsor will use the certification standards of Subpart D of Part 26 to determine the eligibility of firms to participate as DBEs in DOT-assisted contracts. To be certified as a DBE, a firm must meet all certification eligibility standards. The Sponsor will make certification decisions based on the facts as a whole.

For information about the certification process or to apply for certification, firms should contact:

Colorado Department of Transportation  
Office of Certification  
4201 East Arkansas Avenue, Room 200  
Denver, Colorado 80222  
303-512-4140  
303-512-4146 (F)

Our certification application forms and documentation requirements are found in Attachment 8 to this program.

## **SUBPART E – CERTIFICATION PROCEDURES**

### **Section 26.81 Unified Certification Programs**

The Sponsor is a member of a Unified Certification Program (UCP) administered by the Colorado Department of Transportation. The UCP will meet all of the requirements of this section.

### **Section 26.83 Procedures for Certification Decisions**

#### Re-certifications 26.83(a) & (c)

The UCP will review the eligibility of DBEs that are certified under former Part 23, to make sure that they will meet the standards of Subpart E of Part 26. The UCP will complete this review no later than three years from the most recent certification date of each firm.

For firms that the UCP certified or reviewed and found eligible under Part 26, the UCP will again review their eligibility every three years. These reviews will include the submittal of a new application.

#### “No Change” Affidavits and Notices of Change (26.83(j))

The UCP requires all DBEs owners to inform them, in a written affidavit, of any change in its circumstances affecting its ability to meet size, disadvantaged status, ownership or control criteria of 49 CFR Part 26 or of any material changes in the information provided with an approved DBE’s application for certification.

The UCP also requires all DBE owners they have certified to submit every year, on the anniversary date of their certification, a “no change” affidavit meeting the requirements of 26.83(j). The text of this affidavit is the following:

I swear (or affirm) that there have been no changes in the circumstances of [*name of DBE firm*] affecting its ability to meet the size, disadvantaged status, ownership, or control requirements of 49 CFR Part 26. There have been no material changes in the information provided with [*name of DBE*]’s application for certification, except for any changes about which you have provided written notice to the [*Recipient*] under 26.83(j). [*Name of firm*] meets Small Business Administration (SBA) criteria for being a small business concern and its average annual gross receipts (as defined by SBA rules) over the firm’s previous three fiscal years do not exceed \$22.41 million.

The UCP requires DBEs to submit with this affidavit documentation of the firm’s size and gross receipts.

The UCP will notify all currently certified DBE firms of these obligations. This notification will inform DBEs that to submit the “no change” affidavit, their owners must swear or affirm that they meet all regulatory requirements of Part 26, including personal net worth. Likewise, if a firm’s owner knows or should know that he or she, or the firm, fails to meet a Part 26 eligibility requirement (e.g. personal net worth), the obligation to submit a notice of change applies.

### **Section 26.85 Interstate Certification**

When a firm currently certified in its home state (“State A”) applies to the UCP for DBE certification, The UCP may, at its discretion, accept State A’s certification and certify the firm, without further procedures. The UCP will follow the procedures defined in Section 26.85.

### **Section 26.86 Denials of Initial Requests for Certification**



If the UCP denies a firm's application or decertify it, it may not reapply until 12 months have passed from the action.

### **Section 26.87 Removal of a DBE's Eligibility**

In the event the UCP proposes to remove a DBE's certification, they will follow procedures consistent with 26.87. Refer to the Colorado UCP for detailed procedures. To ensure separation of functions in a de-certification, the UCP has contracted with an individual outside the UCP to serve as hearing officer and decision maker in decertification proceedings. This individual is knowledgeable of the DBE Program and eligibility standards, and is not involved in the initial eligibility determinations or any decision to initiate a decertification proceeding.

The UCP has established an administrative "firewall" to ensure that the individual outside the UCP will not have participated in any way in the decertification proceeding against the firm (including the decision to initiate such a proceeding).

### **Section 26.89 Certification Appeals**

Any firm or complainant may appeal our decision in a certification matter to DOT. Such appeals may be sent to:

US Department of Transportation  
Departmental Office of Civil Rights  
External Civil Rights Program Division (S-33)  
1200 New Jersey Ave., S.E.  
Washington, DC 20590  
Phone: 202-366-4754  
TTY: 202-366-9696  
Fax: 202-366-5575

The UCP will promptly implement any DOT certification appeal decisions affecting the eligibility of DBEs for our DOT-assisted contracting (e.g., certify a firm if DOT has determined that our denial of its application was erroneous).

## **SUBPART F – COMPLIANCE AND ENFORCEMENT**

### **Section 26.109 Information, Confidentiality, Cooperation**

The Sponsor will safeguard from disclosure to third parties information that may reasonably be regarded as confidential business information, consistent with Federal, state, and local law.

Notwithstanding any provision of Federal or state law, the Sponsor will not release any information that may reasonably be construed as confidential business information to any third party without the written consent of the firm that submitted the information. This includes applications for DBE certification and supporting information. However, the Sponsor must transmit this information to DOT in any certification appeal proceeding under § 26.89 of this part or to any other state to which the individual's firm has applied for certification under § 26.85 of this part.

#### **Monitoring Payments to DBEs**

The Sponsor will require prime contractors to maintain records and documents of payments to DBEs for three years following the performance of the contract. These records will be made available for inspection upon request by any authorized representative of the Sponsor or DOT. This reporting requirement also extends to any certified DBE subcontractor.

The Sponsor will perform interim audits of contract payments to DBEs. The audit will review payments to DBE subcontractors to ensure that the actual amount paid to DBE subcontractors equals or exceeds the dollar amounts stated in the schedule of DBE participation.

## **ATTACHMENTS**

- Attachment 1 Link to Regulations: 49 CFR Part 26
- Attachment 2 Organizational Chart
- Attachment 3 Bidder's List Collection Form
- Attachment 4 Link to Colorado UCP DBE Directory
- Attachment 5 Overall Goal Calculations
- Attachment 6 Demonstration of Good Faith Efforts or Good Faith Effort Plan
- Attachment 7 DBE Monitoring and Enforcement Mechanisms
- Attachment 8 DBE Certification Application Form

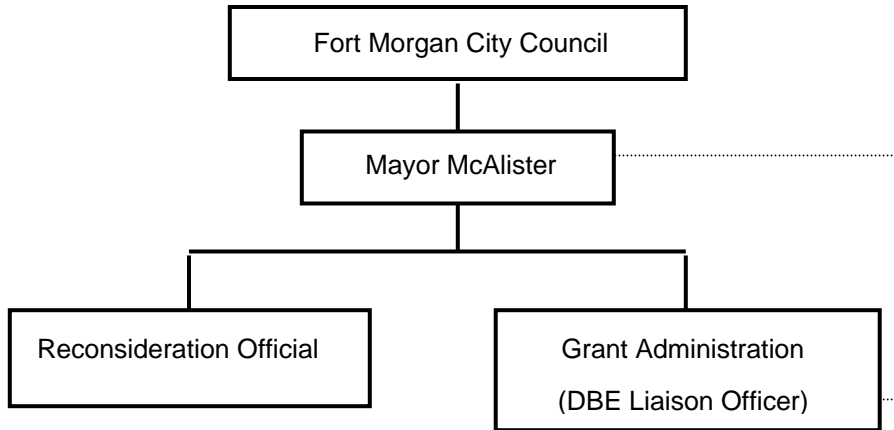
## ATTACHMENT 1

Link to Regulations: 49 CFR Part 26

<http://www.ecfr.gov/cgi-bin/text-idx?c=ecfr&SID=863f595718a12ecf64fbfa3f8f1e6ad5&rgn=div5&view=text&node=49:1.0.1.1.20&idno=49>

**ATTACHMENT 2**

**Organizational Chart**





**ATTACHMENT 4**

Link to Colorado UCP DBE Directory:

[www.coloradodbe.org](http://www.coloradodbe.org)

**ATTACHMENT 5**

Section 26.45: Overall DBE Three-Year Goal Methodology

**Name of Recipient:** Fort-Morgan Municipal Airport

**Goal Period:** FY 2014-2016 August 1, 2014 through August 1, 2016

**DOT-assisted contract amount:** FY-2014-2016 \$5,500,000

**Total** \$5,500,000

**Overall Three-Year Goal:** 3.7%, to be accomplished through 3.7% RC and 0% RN

**Total dollar amount to be expended on DBE's:** \$203,500.00

**Describe the Number and Type of Projects that the airport anticipates awarding:**

Projects Fiscal Year #1

1. New Runway 14-32 - \$5,500,000
- 2.
- 3.

Projects Fiscal Year #2

1. None
- 2.
- 3.

Projects Fiscal Year #3

1. None
- 2.
- 3.

**Market Area:** The market area includes Weld, Adams, Morgan, Logan, and Larimer in Colorado.



**Step 1. Analysis:** Actual relative availability of DBE's

*[Part 26.45 allows for the goal to be set 1 of 5 different methods. The example provided below is the most often used and recommended. The DBE Program Regulation can be found at <http://osdbu.dot.gov/DBEProgram/index.cfm> Also, see Tips for Setting-Goals: <http://osdbu.dot.gov/DBEProgram/GuidanceforDBEProgramAdministrators/index.cfm>*

Method: Use DBE Directories <http://osdbu.dot.gov/DBEProgram/StateDOTDBESites.cfm>

and Census Bureau Data <http://www.census.gov/econ/cbp/index.html>

**[For each project and each fiscal year, please provide the following information]**

NAICS	Type of Work	Total DBE's	Total All Firms
237310	Airport Runway Construction	0	61
484220	Dump trucking (e.g., gravel, sand, top soil)	31	188
541330	Engineering Services	5	322
541380	Materials Testing	0	32
561730	Landscaping	4	365
541370	Surveying and Mapping	0	21
238910	Site Preparation	6	130
Total		46	1119

Divide the total number of DBE's by the total number of All Firms = base figure for each project.

Base figure =  $46/1119 = 4.11\%$

**Step 2. Analysis:** Adjustments to Step 1 base figure.

*After calculating a base figure of the relative availability of DBEs, evidence was examined to determine what adjustment (if any) was needed to the base figure in order to arrive at the overall goal.*

*An examination of the anticipated projects for each fiscal year, the availability of the DBE firms by trade classification and the volume of work performed by DBE firms over previous years.*

*Fiscal Year #1*

*For FY-2014-2016 we anticipate the award of the following:*

	B	C	D	E	F	G	H	I
Project Name	Trade Description	NAICS Description	NAICS	Trade (\$)	Census	Director y	DBE (%) (= G/F)	DBE (\$) (= E x H)
New Runway 14-32	Asphalt Runway Paving	Airport Runway Construction	237310	2,970,000	61	0	0%	\$0
	Trucking	Dump Trucking (e.g., gravel, sand, top soil)	484220	825,000	31	188	16.5%	\$136,037
	Engineering Services	Engineering Services	541330	825,000	322	5	1.6%	\$12,810
	Materials Testing	Materials Testing	541380	275,000	32	0	0%	\$0
	Seeding/Mulching	Landscaping	561730	165,000	365	4	1.1%	\$1,808
	Surveying and Mapping	Surveying and Mapping	541370	165,000	21	0	0%	0
	Excavation	Site Preparation	238910	275,000	6	130	4.62%	\$12,692
<b>Total Project / FY-2014</b>				<b>\$5,500,000</b>			<b>2.97%</b>	<b>\$163,347</b>

### Past History Participation

Other data used to determine the adjustment to the base figure was the median of historical DBE accomplishments as follows:

FY	Total Grant \$ Amount	DBE Goals			Accomplishments			Type of work
		RC	RN	Total	RC	RN	Total	
FY 04	Kit Carson - \$ Not Known	5.69%			5.69%	0%	6.04%	Project Not Known
FY 06	Kit Carson - \$ Not Known	5.5%			0%	0%	0%	Project Not Known
FY 05	Colorado Plains - \$ Not Known	8.12%			1.9%	0%	1.9%	Project Not Known
FY 10	Greeley-Weld County \$600,000	3.3%			4.35%	0%	4.35%	Taxilane Paving
FY 11	Fort Morgan - \$ 355,325	4.08			6.57%	0%	6.57%	Taxilane Paving

Arranging this historical data from low to high, (0%, 1.9%, 4.35%, 6.04%, 6.57%) the median is 4.35%.

The proposed Overall DBE Goals are as follows:

- Fiscal Year #1 – **3.7**(2.97 + 4.35)/2)

Our proposed overall three year goal will be reflected as Fiscal Year #1. There is only one project planned for Fiscal Year #1, #2 and #3.

To arrive at an overall goal, we added our Step 1 base figure with our Step 2 adjustment figure and then averaged the total arriving at an overall goal of **3.7%**. We feel this adjusted goal figure will accurately reflect DBE participation that can be achieved for the type of project work being awarded during this three-year period.

*In addition, Colorado Department of Transportation Statewide Transportation Disparity Study, dated November 2009, was reviewed to determine DBE utilization across the State of Colorado. This study found that DBEs in general are being significantly underutilized. Non-minority women in construction subcontracting are the only category of M/W/DBEs that were not significantly underutilized. All other M/W/DBEs were significantly underutilized in both construction and consultant services. However, in the CDOT FY 2013-2015 Overall DBE goal of 10.25%, CDOT did not adjust their base figure due to the information of the 2009 Disparity study. It was determined that the data used to calculate the overall DBE goal was more up to date than the data used in the 2009 Disparity Study. Therefore, the base figure for Fort Morgan will not be adjusted for this reason. In establishing the proposed goal, CDOT engages in a number of outreach efforts to small business, minority and women's organization in order to enhance DBE opportunities*

**Breakout of Estimated "Race and Gender Neutral" (RN) and "Race and Gender Conscious" (RC) Participation.**

26.51(b) (1-9)

The recipient will meet the maximum feasible portion of its overall goal by using RN means of facilitating DBE participation.

1. *Arranging solicitations, times for the presentation of bids, quantities, specifications, and delivery schedules in ways that facilitates DBE, and other small businesses, participation;*
2. *Providing assistance in overcoming limitations such as inability to obtain bonding or financing;*
3. *Providing technical assistance and other services;*
4. *Carrying out information and communications programs on contracting procedures and specific contract opportunities;*
5. *Ensuring distribution of DBE directory, through print and electronic means, to the widest feasible universe of potential prime contractors;*

The recipient estimates that in meeting its overall goal **3.7%**, it will obtain **0%** from RN participation and **3.7%** through RC measures.

*This breakout is based on:*

In FY-11 Fort Morgan exceeded their goal by 2.49%, which is evidence of race-neutral participation. This goal was attained by utilizing a hydraulic seeding and mulching DBE. However, the amount of contract dollars for this project is expected to be spent on hydraulic seeding and mulching is approximately 3%. Fort Morgan Municipal Airport and similar surrounding airports do not have a strong history of DBE participation or over-achievement of goals with similar work to reference and expects to obtain its DBE participation through the use of DBE contract goals or a conscious effort to obtain DBE participation. Therefore, we are applying the entire goal to race-conscious participation.

The City of Fort Morgan will adjust the estimated breakout of RN and RC DBE participation as needed to reflect actual DBE participation (see Section 26.51(f)) and track and report RN and RC participation separately. For reporting purposes, RN DBE participation includes, but is not necessarily limited to, the following: DBE participation through a prime contract obtained through customary competitive procurement procedures; DBE participation through a subcontract on a prime contract that does not carry a DBE goal, DBE participation on a prime contract exceeding a contract goal and DBE participation through a subcontract from a prime contractor that did not consider a firm's DBE status in making the award.

## PUBLIC PARTICIPATION

**Consultation:** Section 26.45(g)(1).

*The City of Fort Morgan submits its overall DBE three-year goal to DOT on August 1 as required by the set schedule.*

*Before establishing the overall goal, the City of Fort Morgan will consult with the National Association of Women in Construction, Hispanic Contractors of Colorado and the National Association of Minority Contractors without limiting consultation to these persons or groups, to obtain information concerning the availability of disadvantaged and non-disadvantaged businesses, the effects of discrimination on opportunities for DBEs, and the City of Fort Morgan's efforts to establish a level playing field for the participation of DBEs*

*Following the consultation, we will publish a notice in the Fort Morgan Times of the proposed overall goal, informing the public that the proposed goal and its rationale are available for inspection during normal business hours at the airport administration building for 30 days following the date of the notice, and informing the public that the City of Fort Morgan and DOT will accept comments on the goals for 45 days from the date of the notice*

*Our overall goal submission to DOT will include a summary of information and comments received during this public participation process and our responses, if any.*

*No comments have been received.*

## PUBLIC NOTICE

The City of Fort Morgan, Colorado (Sponsor) has established a Disadvantaged Business Enterprise (DBE) program in accordance with regulations of the U.S. Department of Transportation, 49 CFR Part 26.

The Sponsor has established an overall DBE participation goal of 3.7% of the Federal financial assistance it will receive for improvements to the Fort Morgan Municipal Airport. The Sponsor estimates it will meet this goal entirely through race-conscious measures for Disadvantaged Business Enterprise (DBE) participation airport construction projects.

The program, proposed goals and rationale for developing the goal is available for inspection between 8:00 a.m. and 5:00 p.m., Monday through Friday at the City offices at 710 E. Railroad Street, Fort Morgan, Colorado 80701 or the Fort Morgan Municipal Airport at 23101 Highway 52, Fort Morgan, Colorado 80701 for 30 days from the date of this publication. This information will also be posted to the City of Fort Morgan website for review at [www.cityoffortmorgan.com](http://www.cityoffortmorgan.com).

Comments on the DBE goal will be accepted for 45 days from the date of this publication and can be sent to the following: City of Fort Morgan, David Callahan, PO Box 100, Fort Morgan, Colorado 80701 or to FAA Civil Rights Office, Ricky Watson, PO Box 92007, Los Angeles, California 90009-2007.

## **Contract Goals**

The City of Fort Morgan will use contract goals to meet any portion of the overall goal that the recipient does not project being able to meet using RN means. Contract goals are established so that, over the period to which the overall goal applies, they will cumulatively result in meeting any portion of the recipient's overall goal that is not projected to be met through the use of RN means.

The City of Fort Morgan will establish contract goals only on those DOT-assisted contracts that have subcontracting possibilities. It need not establish a contract goal on every such contract, and the size of

the contract goals will be adapted to the circumstances of each such contract (e.g., type and location of work and availability of DBE's to perform the particular type of work).

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

**ATTACHMENT 6**

**Demonstration of Good Faith Efforts**

**DISADVANTAGED BUSINESS ENTERPRISE (DBE) UTILIZATION**

The **City of Fort Morgan, Colorado** (Sponsor) in accordance with Title VI Civil Rights Act of 1964, 78 Stat. 262, 42 USC and 49 CFR, Part 26 issued pursuant to such Act, affords Disadvantage Business Enterprises full opportunity to submit an indication of interest in response to this invitation and will not discriminate against any interested firm on the ground of race, creed, color, sex, age or national origin in a contract award. In addition, the Sponsor has established goals for DBE participation in Sponsor projects.

A. The undersigned bidder/offeror has satisfied the requirements of the bid specification in the following manner (please check the appropriate space):

\_\_\_\_\_ The bidder/offeror is committed to a minimum of \_\_\_\_\_% DBE utilization on this contract.

\_\_\_\_\_ The bidder/offeror (if unable to meet the DBE goal of \_\_\_\_\_%) is committed to a minimum of \_\_\_\_\_% DBE utilization on this contract and submits documentation demonstrating good faith efforts.

Name of bidder/offeror's firm: \_\_\_\_\_

\_\_\_\_\_

By \_\_\_\_\_  
(Signature) Title

Address \_\_\_\_\_

Phone \_\_\_\_\_

B. The bidder must indicate the Disadvantaged Business Enterprise(s) proposed for utilization as part of this contract, as follows:

We, the undersigned, hereby certify that we will subcontract with the following DBE firm(s) for the amount(s) shown, if awarded a contract for this project.

Name of DBE firm:	_____
DBE Contract Amount: \$	_____ Percent of Total Contract: _____%
DBE firm contact person:	_____ Phone _____
DBE firm Address:	_____ _____
Is the DBE a:	<input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Manufacturer
Category of DBE is:	<input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian Pacific <input type="checkbox"/> Non Minority Woman <input type="checkbox"/> Other
Work to be performed by DBE:	_____ _____
DBE Certification Agency:	_____
Expiration Date of Certification:	_____ (Include copy of current certificate)

Name of DBE firm:	_____
DBE Contract Amount: \$	_____ Percent of Total Contract: _____%
DBE firm contact person:	_____ Phone _____
DBE firm Address:	_____ _____
Is the DBE a:	<input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Manufacturer
Category of DBE is:	<input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian Pacific <input type="checkbox"/> Non Minority Woman <input type="checkbox"/> Other
Work to be performed by DBE:	_____ _____
DBE Certification Agency:	_____
Expiration Date of Certification:	_____ (Include copy of current certificate)

Name of DBE firm: \_\_\_\_\_

DBE Contract Amount: \$ \_\_\_\_\_ Percent of Total Contract: \_\_\_\_\_ %

DBE firm contact person: \_\_\_\_\_ Phone \_\_\_\_\_

DBE firm Address: \_\_\_\_\_  
 \_\_\_\_\_

Is the DBE a:       Prime Contractor    Subcontractor    Supplier    Manufacturer

Category of DBE is:    Black    Hispanic    Native American    Asian Pacific  
 Non Minority Woman    Other

Work to be performed by DBE: \_\_\_\_\_  
 \_\_\_\_\_

DBE Certification Agency: \_\_\_\_\_

Expiration Date of Certification: \_\_\_\_\_ (Include copy of current certificate)

DBE GOAL INTENT SUMMARY			
	<u>\$ Amount</u>	<u>\$ DBE Credit</u>	<u>% DBE Participation</u>
DBE Prime Contractor	\$ _____	\$ _____	_____ %
DBE Subcontractor	\$ _____	\$ _____	_____ %
DBE Subcontractor	\$ _____	\$ _____	_____ %
DBE Subcontractor	\$ _____	\$ _____	_____ %
DBE Subcontractor	\$ _____	\$ _____	_____ %
DBE Subcontractor	\$ _____	\$ _____	_____ %
DBE Supplier	\$ _____ x 0.60=	\$ _____	_____ %
DBE Supplier	\$ _____ x 0.60=	\$ _____	_____ %
DBE Manufacture	\$ _____	\$ _____	_____ %
DBE Manufacture	\$ _____	\$ _____	_____ %
<b>TOTAL DBE AMOUNT</b>		\$ _____	_____ %

Note: Contractor may copy this and the above page as necessary to include all DBE Subcontractors.



**DBE LETTER OF INTENT**

Name of bidder/offeror's firm: \_\_\_\_\_

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

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

Name of DBE firm: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

Description of work to be performed by DBE firm:

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

The bidder/offeror is committed to utilizing the above-named DBE firm for the work described above. The estimated dollar value of this work is \$\_\_\_\_\_.

**Affirmation**

The above-named DBE firm affirms that it will perform the portion of the contract for the estimated dollar value as stated above.

By \_\_\_\_\_  
(Signature) (Title)

*If the bidder/offeror does not receive award of the prime contract, any and all representations in this Letter of Intent and Affirmation shall be null and void.*

(Submit this page for each DBE subcontractor.)

**THIS PAGE MUST BE SUBMITTED WITH THE BID PROPOSAL OR MAY BE SUBMITTED VIA EMAIL BY 12:00 PM (NOON), <Insert date after bid> TO THE OFFICE OF <Insert Appropriate Office>.**

**EMAIL TO: <Name>  
<Email>**

## ATTACHMENT 7

### **DBE Monitoring and Enforcement Mechanisms**

The Sponsor has available several remedies to enforce the DBE requirements contained in its contracts, including, but not limited to, the following:

1. Breach of contract action, pursuant to the terms of the contract;
2. Compliance with all requirements of this part by airport sponsors and other recipients of FAA financial assistance is enforced through the procedures of Title 49 of the United States Code, including 49 U.S.C. 47106(d), 47111(d), and 47122, and regulations implementing them.
3. The provisions of 49 CFR 26.103 (b) apply to enforcement actions in FAA programs.
4. Any person who knows of a violation of this part by a recipient of FAA funds may file a complaint under 14 CFR Part 16 with the Federal Aviation Administration Office of Chief Counsel.

In addition, the Federal government has available several enforcement mechanisms that it may apply to firms participating in the DBE problem, including, but not limited to, the following:

1. Suspension or debarment proceedings pursuant to 49 CFR Part 26
2. Enforcement action pursuant to 49 CFR Part 31
3. Prosecution pursuant to 18 USC 1001.

**ATTACHMENT 8**  
DBE Certification Application Form

Dear Business Owner:

Disadvantaged Business Enterprise certification is a federally initiated and mandated process established to ensure that only those firms meeting the prescribed standards receive the distinction as a DBE. As the only certifying members of Colorado's Unified Certification Program (UCP), the Colorado Department of Transportation and the City and County of Denver, consider it a privilege to provide you with this certification application.



Colorado Department of Transportation  
Office of Certification  
4201 E. Arkansas Ave., Room 200  
Denver, CO 80222  
303-512-4140  
FAX 303-512-4146

This application is a UCP application. It was created by the United States Department of Transportation and cannot be modified or changed and is used in all 50 states for certification program evaluation. Please read the "Roadmap" portion thoroughly before you begin. You may choose to download the form and complete it or you may choose to complete it on-line. However, please note that the form cannot be returned to us electronically as all supporting documents relevant to your firm must be received with the application form.

Please be sure to retain a complete copy of all information submitted to us for your files. And remember, because of the UCP, you need only submit your file to ONE of the certifying entities – the City of Denver's Division of Small Business Opportunity OR the Colorado Department of Transportation's Office of Certification. Processing time varies but is relatively the same for both agencies.



City & County of Denver  
Division of Small Business Opportunity  
201 W. Colfax Ave., Dept. 907  
Denver, CO 80202  
720-913-1699  
FAX 720-913-1809

You may mail your completed application form and supporting documents to:

Colorado Department of Transportation  
Office of Certification  
4201 E. Arkansas Ave., Room 200  
Denver, CO 80222

OR

City & County of Denver  
Division of Small Business Opportunity  
201 W. Colfax Ave., Dept. 907  
Denver, CO 80202

Sincerely,

Colorado Department of Transportation  
Office of Certification

City & County of Denver  
Division of Small Business Opportunity

**DISADVANTAGED BUSINESS ENTERPRISE PROGRAM  
49 C.F.R. PART 26**

***UNIFORM CERTIFICATION APPLICATION***

**ROADMAP FOR APPLICANTS**

**1. Should I apply?**

- Is your firm at least 51%-owned by a socially and economically disadvantaged individual(s) who also controls the firm?
- Is the disadvantaged owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
- Is your firm a small business that meets the Small Business Administration's (SBA's) size standard and does not exceed \$22.41 million in gross annual receipts?
- Is your firm organized as a for-profit business?

⇒ If you answered "Yes" to all of the questions above, you may be eligible to participate in the U.S. DOT DBE program.

**2. Be sure to attach all of the required documents listed in the Documents Check List (see Page 15) at the end of this form with your completed application.**

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

- U.S. DOT – <http://osdbuweb.dot.gov/business/dbe/index.html> (this site provides useful links to the rules and regulations governing the DBE program, questions and answers, and other pertinent information)
- SBA – <http://www.ntis.gov/naics> (provides a listing of NAICS codes) and <http://www.sba.gov/size/indextableofsize.html> (provides a listing of SIC codes)
- 49 CFR Part 26 (the rules and regulations governing the DBE program)

Under Sec. 26.107 of 49 CFR Part 26, dated February 2, 1999, 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 49 CFR Part 29, take enforcement action under 49 CFR 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.

## Section 1: CERTIFICATION INFORMATION

### A. Prior/Other Certifications

Is your firm currently certified as a DBE? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, complete the appropriate boxes)</i>	Name of certifying agency:
	Has your firm's home-state UCP conducted an on-site visit? <input type="checkbox"/> Yes, on ___ / ___ / ___ State: _____ <input type="checkbox"/> No

### B. Prior/Other Applications and Privileges

Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application for DBE Certification, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?

Yes, on \_\_\_ / \_\_\_ / \_\_\_  No

If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action:

## Section 2: GENERAL INFORMATION

### A. Contact Information

(1) Contact person and Title:		(2) Legal name of firm:			
(3) Phone #:	(4) Other Phone #:	(5) Fax #:			
(6) E-mail:		(7) Website <i>(if have one)</i> :			
(8) Street address of firm <i>(No P.O. Box)</i> :	City:	County/Parish:	State:	Zip:	
(9) Mailing address of firm <i>(if different)</i> :	City:	County/Parish:	State:	Zip:	

### B. Business Profile

(1) Describe the primary activities of your firm:		(2) Federal Tax ID <i>(if any)</i> :	
(3) This firm was established on ___ / ___ / ___		(4) I/We have owned this firm since: ___ / ___ / ___	
(5) Method of acquisition <i>(check all that apply)</i> : <input type="checkbox"/> Started new business <input type="checkbox"/> Bought existing business <input type="checkbox"/> Inherited business <input type="checkbox"/> Secured concession <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other (explain) _____			
(6) Is your firm "for profit"? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> <b>STOP!</b> If your firm is NOT for-profit, then you do NOT qualify for this program and do NOT need to fill out this application.	

(7) Type of firm (check all that apply):  
 Sole Proprietorship  
 Partnership  
 Corporation  
 Limited Liability Partnership  
 Limited Liability Corporation  
 Joint Venture  
 Other, Describe: \_\_\_\_\_

(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name?  
 Yes  No  
 If Yes, explain: \_\_\_\_\_

(9) Number of employees: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Total \_\_\_\_\_

(10) Specify the gross receipts of the firm for the last 3 years: Year \_\_\_\_\_ Total receipts \$ \_\_\_\_\_  
 Year \_\_\_\_\_ Total receipts \$ \_\_\_\_\_  
 Year \_\_\_\_\_ Total receipts \$ \_\_\_\_\_

**C. Relationships 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 space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity?  
 Yes  No  
 If Yes, identify other firm's name: \_\_\_\_\_  
 Explain nature of shared facilities: \_\_\_\_\_

(2) At present, or at any time in the past, has your firm:	(a) been a subsidiary of any other firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
	(b) consisted of a partnership in which one or more of the partners are other firms? <input type="checkbox"/> Yes <input type="checkbox"/> No
	(c) owned any percentage of any other firm? <input type="checkbox"/> Yes <input type="checkbox"/> No
	(d) had any subsidiaries? <input type="checkbox"/> Yes <input type="checkbox"/> No

(3) Has any other firm had an ownership interest in your firm at present or at any time in the past?  Yes  No

(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each (attach extra sheets, if needed):

	<u>Name</u>	<u>Address</u>	<u>Type of Business</u>
1.			
2.			
3.			

**D. Immediate Family Member Businesses**

Do any of your immediate family members own or manage another company?  Yes  No  
 If Yes, then list (attach extra sheets, if needed):

	<u>Name</u>	<u>Relationship</u>	<u>Company</u>	<u>Type of Business</u>	<u>Own or Manage?</u>
1.					
2.					

### Section 3: OWNERSHIP

**Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below** *(If more than one owner, attach separate sheets for each additional owner):*

**A. Background Information**

(1) Name:	(2) Title:	(3) Home Phone #:
(4) Home Address <i>(street and number)</i> : _____ City: _____ State: _____ Zip: _____		
(5) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	(6) Ethnic group membership <i>(Check all that apply)</i> : <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian Pacific <input type="checkbox"/> Subcontinent Asian <input type="checkbox"/> Other <i>(specify)</i> _____	
(7) U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
(8) Lawfully Admitted Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No		

**B. Ownership Interest**

(1) Number of years as owner:		<u>Type</u>	<u>Dollar Value</u>
(3) Percentage owned:	(2) Initial investment	Cash	\$
(4) Familial relationship to other owners:	to acquire ownership	Real Estate	\$
	interest in firm:	Equipment	\$
		Other	\$
(5) Shares of Stock:	<u>Number</u>	<u>Percentage</u>	<u>Class</u>
			<u>Date acquired</u>
			<u>Method Acquired</u>
(6) Does this owner perform a management or supervisory function for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Name of Business: _____ Function/Title: _____			
(7) Does this owner own or work for any other firm(s) that has a relationship with this firm <i>(e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, identify: Name of Business: _____ Function/Title: _____ Nature of Business Relationship: _____			

**C. Disadvantaged Status – NOTE: Complete this section only for each owner applying for DBE qualification (i.e. for each owner claiming to be socially and economically disadvantaged)**

(1) What is the Personal Net Worth (PNW) of the owner(s) applying for DBE qualification? <i>(Use and attach the Personal Financial Statement form at the end of this application; attach additional sheets if more than one owner is applying)</i>
(2) Has any trust been created for the benefit of this disadvantaged owner(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain <i>(attach additional sheets if needed)</i> :



## Section 4: CONTROL

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

	Name	Title	Date Appointed	Ethnicity	Gender
(1) Officers of the Company	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
(2) Board of Directors	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
<p>(3) Do any of the persons listed in (1) and/or (2) above perform a management or supervisory function for any other business? <input type="checkbox"/> Yes <input type="checkbox"/> No            If Yes, identify for each:            Person: _____ Title: _____            Business: _____ Function: _____</p>					
<p>(4) Do any of the persons listed (1) and/or (2) 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.)?  <input type="checkbox"/> Yes <input type="checkbox"/> No            If Yes, identify for each:            Firm Name: _____ Person: _____            Nature of Business Relationship: _____</p>					

**B. Identify your firm's management personnel who control your firm in the following areas** (If more than two persons, attach a separate sheet):

	Name	Title	Ethnicity	Gender
(1) Financial Decisions <i>(responsibility for acquisition of lines of credit, surety bonding, supplies, etc.)</i>	a.			
	b.			
(2) Estimating and bidding	a.			
	b.			
(3) Negotiating and Contract Execution	a.			
	b.			
(4) Hiring/firing of management personnel	a.			
	b.			
(5) Field/Production Operations Supervisor	a.			
	b.			
(6) Office management	a.			
	b.			
(7) Marketing/Sales	a.			
	b.			
(8) Purchasing of major equipment	a.			
	b.			
(9) Authorized to Sign Company Checks <i>(for any purpose)</i>	a.			
	b.			

(10) Authorized to make Financial Transactions	a.			
	b.			

(11) Do any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business?  
 Yes  No  
If Yes, identify for each:  
Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Business: \_\_\_\_\_ Function: \_\_\_\_\_

(12) Do any of the persons listed in (1) through (10) 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: \_\_\_\_\_

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

**(1) Equipment**

Type of Equipment	Make/Model	Current Value	Owned or Leased?
(a)			
(b)			
(c)			

**(2) Vehicles**

Type of Vehicle	Make/Model	Current Value	Owned or Leased?
(a)			
(b)			
(c)			

**(3) Office Space**

Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

**(4) Storage Space**

Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

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

If Yes, explain:

**E. Financial Information**

<b>(1) Banking Information:</b>	
(a) Name of bank: _____	(b) Phone No: (_____) _____
(c) Address of bank: _____	City: _____ State: _____ Zip: _____
<b>(2) Bonding Information:</b>	
If you have bonding capacity, identify:	
(b) Name of agent/broker _____	(a) Binder No: _____
(d) Address of agent/broker: _____	(c) Phone No: (_____) _____
(e) Bonding limit: Aggregate limit \$ _____	Project limit \$ _____

**F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner:**

Name of Source	Address of Source	Name of Person Securing 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 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	License Number and 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:**

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

**INSTRUCTIONS FOR COMPLETING THE DISADVANTAGED BUSINESS ENTERPRISE  
(DBE) PROGRAM UNIFORM CERTIFICATION APPLICATION**

**NOTE: 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. Prior/Other Certifications**

If your firm is applying for DBE certification outside its home state (i.e., the state where its principal business office is located), indicate whether it is or is not certified as a DBE by the home state UCP. If yes, list the name of the certifying agency, whether or not an on-site visit was conducted, and the date of the most recent on-site visit.

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

Indicate whether your firm or any of the persons listed has ever withdrawn an application for DBE certification, or whether it has ever been denied certification, decertified, debarred, suspended, or had bidding privileges denied or restricted by any state or local agency or Federal entity. If your answer is yes, indicate the date of such action, identify the name of the agency, and explain fully the nature of the action in the space provided.

**Section 2: GENERAL INFORMATION**

**A. Contact Information**

- (1) State the name and title of the person who will serve as your firm's primary contact under this application.
- (2) State the legal name of your firm, as indicated in your firm's Articles of Incorporation.
- (3) Indicate the primary phone number of your firm.
- (4) Indicate a secondary phone number, if any.
- (5) Indicate your firm's fax number, if any.
- (6) Indicate your firm's or your contact person's email address.
- (7) Indicate your firm's website address, if any.
- (8) State the street address of your firm (i.e. the physical location of its offices -- not a post office box address).
- (9) State the mailing address of your firm, if it is different from your firm's street address.

**B. Business Profile**

- (1) In the box provided, briefly describe the primary business and professional activities in which your firm engages.
- (2) Give the Federal Tax ID number of your firm as provided on your firm's filed tax returns, if you have one. This could also be the Social Security number of the owner of your firm.
- (3) Give the date on which your firm was officially established, as stated in your firm's Articles of Incorporation.
- (4) Give the date on which you and/or each other owner took ownership of the firm.
- (5) Check the appropriate box that describes 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."

**NOTE:** If you checked "No," then you do NOT qualify for the DBE program and therefore do not need to complete the rest of this application. The DBE program requires all participating firms be for-profit enterprises.

- (7) Check the appropriate box that describes the legal form of ownership of your firm, as indicated in your firm's Articles of Incorporation. If you checked "Other," briefly explain in the space provided.
- (8) Check the appropriate box that indicates whether your firm has ever existed under different ownership, a different type of ownership, or a different name. If you checked "Yes," specify which and briefly explain the circumstances in the space provided.
- (9) Indicate in the spaces provided how many employees your firm has, specifying the number of employees who work on a full-time and part-time basis.
- (10) Specify the total gross receipts of your firm for each of the past three years, as declared in your firm's filed tax returns.

### **C. Relationships 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, or any office staff with any other business, organization, or entity of any kind. If you answered “Yes,” then specify the name of the other firm(s) and briefly explain the nature of the shared facilities or other items in the space provided.
- (2) Check the appropriate box that indicates whether at present, or at any time in the past:
  - (a) your firm has been a subsidiary of any other firm;
  - (b) your firm consisted of a partnership in which one or more of the partners are other firms;
  - (c) your firm has owned any percentage of any other firm; and
  - (d) your firm has had any subsidiaries of its own.
- (3) Check the appropriate box that indicates whether any other firm has ever had an ownership interest in your firm.
- (4) If you answered “Yes” to any of the questions in (2)(a)-(d) or (3), identify the name, address and type of business for each.

### **D. Immediate Family Member Businesses**

Check the appropriate box that indicates whether any of your immediate family members own or manage another company. An “immediate family member” is any person who is your father, mother, husband, wife, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, mother-in-law, or father-in-law. If you answered “Yes,” provide the name of each relative, your relationship to them, the name of the company they own or manage, the type of business, and whether they own or manage the company.

## **Section 3: OWNERSHIP**

**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 additional owner):**

### **A. Background Information**

- (1) Give the name of the owner.
- (2) State his/her title or position within your firm.
- (3) Give his/her home phone number.
- (4) State his/her home (street) address.
- (5) Check the appropriate box that indicates this owner’s gender.
- (6) Check the appropriate box that indicates this owner’s ethnicity (check all that apply). 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.
- (8) If this owner is not a U.S. citizen, check the appropriate box that indicates whether this owner is 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. This, however, does not necessarily disqualify your firm altogether from the DBE program if another owner is a U.S. citizen or lawfully admitted permanent resident and meets the program’s other qualifying requirements.

### **B. Ownership Interest**

- (1) State the number of years during which this owner has been an owner of your firm.
- (2) 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.
- (3) State the percentage of total ownership control of your firm that this owner possesses.
- (4) State the familial relationship of this owner to each other owner of your firm.
- (5) Indicate the number, percentage of the total, class, date acquired, and method by which this owner acquired his/her shares of stock in your firm.
- (6) Check the appropriate box that indicates 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 title or function held in that business.

- (7) 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 and this owner’s title or function held in that business. Briefly describe the nature of the business relationship in the space provided.

### C. Disadvantaged Status

**NOTE:** You only need to complete this section for each owner that is applying for DBE qualification (i.e. for each owner who is claiming to be “socially and economically disadvantaged” and whose ownership interest is to be counted toward the control and 51% ownership requirements of the DBE program)

- (1) Indicate in the space provided the total Personal Net Worth (PNW) of each owner who is applying for DBE qualification. Use the PNW calculator form at the end of this application to compute each owner’s PNW.
- (2) Check the appropriate box that indicates whether any trust has ever been created for the benefit of this disadvantaged owner. If you answered “Yes,” briefly explain the nature, history, purpose, and current value of the trust(s).

## Section 4: CONTROL

### A. Identify your 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 of your firm.
- (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 that indicates whether any of your firm’s officers and/or directors listed above perform 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. If you answered “Yes,” identify the name of the firm, the officer or director, and the nature of his/her business relationship with that other firm.

### B. Identify your firm's management personnel (by name, title, ethnicity, and gender) who control your firm in the following areas:

- (1) Making of financial decisions on your firm’s behalf, including the acquisition of lines of credit, surety bonds, supplies, etc.;
- (2) Estimating and bidding, including calculation of cost estimates, bid preparation and submission;
- (3) Negotiating and contract execution, including participation in any of your firm’s negotiations and executing contracts on your firm’s behalf;
- (4) Hiring and/or firing of management personnel, including interviewing and conducting performance evaluations;
- (5) Field/Production operations supervision, including site supervision, scheduling, project management services, etc.;
- (6) Office management;
- (7) Marketing and sales;
- (8) Purchasing of major equipment;
- (9) Signing company checks (for any purpose); and
- (10) Conducting any other financial transactions on your firm’s behalf not otherwise listed.
- (11) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above perform 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.
- (12) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with your firm. If you

answered "Yes," identify the name of the firm, the name of the person, and the nature of his/her business relationship with that other firm.

**C. Indicate your firm's inventory in the following categories:**

(1) Equipment

State the type, make and model, and current dollar value of each piece of equipment held and/or used by your firm. Indicate whether each piece is either owned or leased by your firm.

(2) Vehicles

State the type, make and model, and current dollar value of each motor vehicle held and/or used by your firm. Indicate whether each vehicle is either owned or leased by your firm.

(3) Office Space

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

(4) Storage Space

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

**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," briefly explain the nature of that reliance and the extent to which the other firm carries out such functions.

**E. Financial Information**

(1) Banking Information

- (a) State the name of your firm's bank.
- (b) Give the main phone number of your firm's bank branch.
- (c) Give the address of your firm's bank branch.

(2) Bonding Information

- (a) State your firm's Binder Number.
- (b) State the name of your firm's bond agent and/or broker.
- (c) Give your agent's/broker's phone number.

(d) Give your agent's/broker's address.

(e) State your firm's bonding limits (in dollars), specifying both the Aggregate and Project Limits.

**F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of persons or firms securing the loan, if other than the listed owner:**

State the name and address of each source, the original dollar amount and the current balance of each loan, and the purpose for which each loan was made to your firm.

**G. List all contributions or transfers of assets to/from your firm and to/from any of its owners 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. List 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 the license/permit number and issuing State of the license or permit.

**I. List the three 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. List the three 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.

**AFFIDAVIT & SIGNATURE**

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.



**DBE UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS  
CHECKLIST**

**In order to complete your application for DBE certification, you must attach copies of all of the following documents as they apply to you and your firm.**

**All Applicants**

- Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- Personal Financial Statement (form available with this application)
- Personal tax returns for the past three years, if applicable, for each owner claiming disadvantaged status
- Your firm's tax returns (gross receipts) and all related schedules for the past three years
- Documented proof of contributions used to acquire ownership for each owner (*e.g. both sides of cancelled checks*)
- Your firm's signed loan agreements, security agreements, and bonding forms
- Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- List of equipment leased and signed lease agreements
- List of construction equipment and/or vehicles owned and titles/proof of ownership
- Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- Year-end balance sheets and income statements for the past three years (*or life of firm, if less than three years*); a new business must provide a current balance sheet
- All relevant licenses, license renewal forms, permits, and haul authority forms
- DBE certifications, denials, and/or decertifications, if applicable
- Bank authorization and signatory cards
- Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- Trust agreements held by any owner claiming disadvantaged status, if any

**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
- 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)

**Trucking Company**

- Documented proof of ownership of the company
- Insurance agreements for each truck owned or operated by your firm
- Title(s) and registration certificate(s) for each truck owned or operated by your firm
- List of U.S. DOT numbers for each truck owned or operated by your firm

**Regular Dealer**

- Proof of warehouse ownership or lease
- List of product lines carried
- List of distribution equipment owned and/or leased

**NOTE: The specific state UCP to which you are applying may have additional required documents that you must also supply with your application. Contact the appropriate certifying agency to which you are applying to find out if more is required.**

**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 PEALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (full name printed), swear or affirm under penalty of law that I am \_\_\_\_\_ (title) of applicant firm \_\_\_\_\_ (firm name) 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 or subcontract, 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 (UCP) of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership, address, telephone number, 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 hereby certify that I am a (circle all that apply):

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

I have held myself out as a member of that group and have acted as a member of that group. I certify that I am an owner of the company seeking DBE certification and that I have been subjected to racial or ethnic prejudice or cultural bias within American society because of my identity as a member of the above circled group.

I further certify that my personal net worth does not exceed \$1.32 million, and that 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 relating to my disadvantaged status and me is true and correct.

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

**NOTARY CERTIFICATE:**

**PERSONAL FINANCIAL STATEMENT**

AS OF \_\_\_\_\_, \_\_\_\_\_

(BOTH PAGES MUST BE COMPLETED BY EACH DISADVANTAGED OWNER-THIS FORM MAY BE COPIED)

**Complete this form for: (1) each socially disadvantaged proprietor, (2) each socially disadvantaged limited and general partner whose combined interest totals 51% or more, or (3) each socially disadvantaged stockholder making up 51% or more of voting stock.**

Name	Business Phone ( )
Residence Address	Residence Phone ( )
City, State & Zip Code	
Business Name of Applicant	

ASSETS	(Omit Cents)	LIABILITIES	(Omit Cents)
Cash on hand and in Banks .....	\$ _____	Accounts Payable.....	\$ _____
Savings Accounts.....	\$ _____	Notes Payable to Banks and Others .....	\$ _____
IRA or Other Retirement Account .....	\$ _____	(Describe in Section 1)	
Accounts and Notes Receivable .....	\$ _____	Installment Account (Auto) .....	\$ _____
Life Insurance - Cash Surrender Value Only .....	\$ _____	Installment Account (Other).....	\$ _____
(Complete Section 7)		Loan on Life Insurance .....	\$ _____
Stocks and Bonds .....	\$ _____	Mortgages on Real Estate .....	\$ _____
(Describe in Section 2)		(Describe in Section 3)	
Real Estate.....	\$ _____	Unpaid Taxes .....	\$ _____
(Describe in Section 3)		(Describe in Section 5)	
Automobile(s) - Present Value .....	\$ _____	Other Liabilities.....	\$ _____
Other Personal Property .....	\$ _____	(Describe in Section 6)	
(Describe in Section 4)		<b>Total Liabilities</b> .....	\$ _____
Other Assets .....	\$ _____		
(Describe in Section 4)		<b>Net Worth</b> (Total Assets minus Total Liabilities) ...	\$ _____
<b>Total Assets</b> .....	\$ _____		

Source of Income	Contingent Liabilities
Salary .....	As Endorser or Co-Maker.....
Net Investment Income .....	Legal Claims & Judgments.....
Real Estate Income.....	Provision for Federal Income Tax.....
Other Income .....	Other Special Debt .....

**Section 1. Notes Payable to Bank and Others** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

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

**Section 2. Stocks and Bonds** (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value



**COLORADO DEPARTMENT OF TRANSPORTATION  
FINANCIAL INSTITUTION AUTHORIZATION**

Office of Certification  
4201 East Arkansas Avenue, Rm 200  
Denver, Colorado 80222  
303 512-4140, FAX 303 512-4146

**THIS FORM MUST BE COMPLETED AND MUST  
ACCOMPANY YOUR COMPLETED APPLICATION**

DBE Applicants: Complete and sign this section only, then have your financial institution complete the remainder. This form is part of your application and must be returned with it, fully completed.

Dear \_\_\_\_\_ :  
(name of financial institution)

I have authorized the Office of Certification to seek information about my firm's relationship with your company.

Please complete this form. My application for DBE Certification will not be considered complete unless I return this form with my DBE application.

Thank you.

Name of Firm

Printed Name of Owner/President

Owner/President's Signature

Date

**TO BE COMPLETED BY THE FINANCIAL INSTITUTION**

1. Indicate the services your institution provides to this company:

a) Checking accounts:

- Payroll      Number of authorized signatures: \_\_\_\_\_  
 Regular      Number of authorized signatures: \_\_\_\_\_  
 Other      Number of authorized signatures: \_\_\_\_\_

Identify "Other" accounts: \_\_\_\_\_

b) List the names of authorized signers according to account type:

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

2. List any outstanding commercial/business loans:

Origination Date	Original Amount	Current Balance	Collateral (if secured)

a) Are there personal guarantors for any of the loans?  Yes       No

If yes, list their names: \_\_\_\_\_

3. Does the company have a line of credit?  Yes  No

a) Is it secured?  Yes  No List the collateral: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

b) Are there personal guarantors?  Yes  No

If yes, list their names: \_\_\_\_\_

4. List the names of all company individuals who signed promissory notes:

\_\_\_\_\_

Name of Financial Institution

Address

City

State

Zip

Printed name of bank official

Title

Signature

Date