

Attachment 1

Notary Public

MBE/CBMBE SUBCONTRACTOR UNAVAILABILITY CERTIFICATE Attachment 2

1. It is hereby certified that the firm of

(Name of MBE/CBMBE Firm) (Telephone)

(Number) (Street) (City) (State) (Zip)

Was offered an opportunity to bid on the _____ school Project

in _____
(City)

by _____
(Name of Prime Contractor's Firm)

(Address)

2. _____ is either unavailable for the
(Name of MBE/CBMBE Firm)

work/service or unable to prepare a bid for this project for the following reason(s):
(check one of the following):

_____ unavailable for the work/service for this project,
_____ is unable to prepare a bid,
_____ did not respond to a request for a price proposal
_____ Other (please state)

(Prime Contractor)

(Signature) (Date)

(Title)

REQUEST FOR WAIVER

Attachment 3

Contractor _____ Name of Project _____

I do hereby request that an exception be granted to the requirement that _____ percent (____%) of the total value of this contract be placed with MBE/CBMBEs.

In connection with the above-captioned project and this request, I hereby certify that I am the _____ and duly authorized representative of:

(Title)

(Company Name & Address)

I further certify that I have submitted a Schedule for Participation of Minority Business Enterprises (MBEs), which reflects the percentage and dollar value of MBE/CBMBE participation, which my company expects to achieve for this contract. The overall MBE percentage is _____% and the dollar value is \$ _____. The subgoal CBMBE percentage is _____% and the dollar value is \$ _____. Therefore, the Request for Exception of the overall MBE is for _____ percentage and _____ dollar value and the Request for Exception of the CBMBE subgoal is for _____% and the dollar value is \$ _____.

To support this Request for Exception, I include the following information as attachments, which I certify to be true to the best of my knowledge, information and belief:

1. A statement of the efforts made by my company to contact and negotiate with MBE/CBMBEs, including the names, addresses and telephone numbers of MBE/CBMBEs contacted;
2. A description of the information provided by MBE/CBMBEs regarding the plans and specifications for portions of the work to be performed;
3. A statement of the efforts made by my company to select portions of the work proposed to be performed by MBE/CBMBEs in order to increase the likelihood of achieving the stated goal;
4. For each MBE/CBMBEs, which placed a bid, which my company considers to be unacceptable, we are submitting a statement, which explains the basis for our conclusion that the minority business bid is unacceptable;
5. A list of minority subcontractors found to be unavailable with attached MBE/CBMBE Subcontractor Unavailability Certificate(s).

(Date)

(Signature)

(Print Name)

Sworn to and subscribed before me this _____ day of _____, 20__

(Notary Public)

STATEMENT OF INTENT

Attachment 4

PROJECT NAME: _____

PROJECT LOCATION: _____

A: Name of Prime Contractor: _____

B: Name of MBE/CBMBE: _____

C: Certified by: MDOT, WMATA, and/or Prince George's County Government

(Please circle)

Cert. # _____

1. Work/Services to be performed by MBE/CBMBE:

2. Subcontract Amount: \$ _____

3. Bonds -Amount and type required of MBE, if any:

4. Commencement Date: _____ Completion Date: _____

5. This MBE/CBMBE subcontract represents the following percentage of the total project cost: __%

6. The undersigned subcontractor will enter into a contract with _____ for the work/service indicated above the prime contractor's execution of a contract for the above-referenced project with the Board of Education. The undersigned subcontractor is a certified MBE/CBMBE, or has applied for certification. The terms and conditions stated above are consistent with our agreements.

Print Name of Subcontractor

Signature of Subcontractor

7. The terms and conditions stated above are consistent with our agreements.

Print Name of Prime Contractor

Signature of Prime Contractor

SCHEDULE FOR PARTICIPATION OF MBE/CBMBE

Attachment 5

1. PRIME CONTRACTOR- NAME OF FIRM & ADDRESS: (Number, Street, City, State, Zip)

Telephone: _____ Fax: _____

2. PROJECT LOCATION: (Number, Street, City, State, Zip)

3. PROJECT NUMBER: _____

4. TOTAL CONTRACT DOLLAR AMOUNT: \$ _____

PROJECT NAME: _____

5. LIST THE DATA REQUESTED FOR EACH MBE/CBMBE FIRM INVOLVED IN THIS PROJECT:

- a MBE/CBMBE FIRM & ADDRESS: (Number, Street, City, State, Zip)

Work or Service to be performed:

Project Commencement Date: _____

Project Completion Date: _____

Agreed Dollar Amount: \$ _____

Percentage of Total Contract: _____ %

Certified by: MDOT, WMATA, and/or Prince George's County Government

Certificate No. _____

- b MBE/CBMBE FIRM & ADDRESS: (Number, Street, City, State, Zip)

Work or Service to be performed:

Project Commencement Date: _____

Project Completion Date: _____

Agreed Dollar Amount: \$ _____

Percentage of Total Contract: _____ %

Certified by: MDOT, WMATA, and/or Prince George's County Government

Certificate No. _____

6. MBE/CBMBE FIRMS TOTAL DOLLAR AMOUNT: \$. _____

MBE/CBMBE FIRMS TOTAL PERCENTAGE: _____ %

OUTREACH EFFORTS COMPLIANCE STATEMENT

Attachment 6

In conjunction with the bid or offer submitted in response to Prince George's County Public Schools for the _____ project, I state the following:
(Name)

1) Bidder/Offeror identified opportunities to subcontract in these specific work categories:

2) Attached to this form are copies of written solicitations (with bidding instructions) used to solicit certified MBE/CBMBEs for these subcontract opportunities.

3) Bidder/Offeror made the following attempts to contact personally the solicited MBE/CBMBEs:

4) _____ Bidder/Offeror assisted MBE/CBMBEs to fulfill or to seek waiver of bonding Requirements (Describe Efforts); _____

_____ This project does not involve bonding requirements.

5) _____ Bidder/Offeror did/did not attend the pre-bid conference;

_____ No pre-bid conference was held.

Bidder/Offeror Company Name

Print Name

Address

Signature Date

Title

Attachment 7

DATE: _____

REQ NO: _____

Name of MBE/CBMBE Sub-Contractor	MDOT/PGC/ WMATA Certification Number and Classification	TOTAL MBE/CBMBE Contract Amount	Amount to be Paid THIS Requisition	TOTAL Paid to Date	MBE/CBMBE has Received FINAL Payment?	If amount paid is LESS than TOTAL MBE/CBMBE Contract Amount, EXPLAIN VARIANCE
	TOTAL:	\$ -	\$ -	\$ -		

WMATA Certification Number and Classification can be located at:

MBE Classification:

African American/Women = AAW
Hispanic American/Women = HW
Native American/Women = NW
Asian American/Women = AW

Authorized Contractor Signature/Date

Contractor MBE/CMBE Classification (if applicable)

Signature of LEA MBE Liaison/Date

CERTIFIED MBE/CBB PARTICIPATION STANDARD MONTHLY SUBCONTRACTORS' PARTICIPATION REPORT

Attachment 7

Instructions for Completion of Subcontractors Participation Report

THIS FORM TO BE COMPLETED BY PRIME CONTRACTOR ONLY

1. **LEA** – Enter full name of LEA.
2. **Facility Name** – Enter full name of school/facility.
3. **Scope of Work** – Enter type of work being performed (i.e. New, Renovation, Roof, HVAC, Flooring, etc.).
4. **Date** – Date of Requisition.
5. **REQ NO** – Enter the number of the corresponding Requisition for Payment.
6. **Name of MBE/CBMBE Sub-Contractor** – Enter full name of MBE/CBMBE Sub-Contractor.
7. **MDOT/PGC/WMATA Certification Number & Classification** – Enter the Certification number and corresponding Classification for each MBE/CBMBE Sub-Contractor. Classifications and the certification websites are listed on the previous form.
8. **TOTAL MBE/CBMBE Contract Amount** – Enter ORIGINAL Total MBE/CBMBE Contract Amount as stated on MBE/CBMBE Attachments 4 and 5. This amount should NOT be altered with change order amounts, changes to scope of work, etc. which may affect contract amount.
9. **Amount to be Paid This Requisition** – Enter the amount to be paid to the MBE/CBMBE Sub-Contractor for work applicable to this requisition.
10. **TOTAL Paid to Date** – Enter the TOTAL amount paid to date to the MBE/CBMBE Sub-Contractor – this amount should NOT include the amount being paid on this requisition, only the total of prior payments.
11. **MBE/CBMBE has Received FINAL Payment** – Enter “YES” if the MBE/CBMBE Sub-Contractor has been paid in full. Enter “NO” if the MBE/CBMBE Sub-Contractor has NOT been paid in full.
12. **If amount paid is LESS than TOTAL MBE/CBMBE Contract Amount. EXPLAIN VARIANCE** – Enter a brief reason for the MBE/CBMBE Sub-Contractor NOT being paid equal to or greater than the ORIGINAL Total MBE/CBMBE Contract Amount as stated on this form and MBE/CBMBE Attachments 4 & 5. Additional documentation may be required to be submitted for variance explanations.
13. **Name of Contractor Firm** – Enter full name of Prime Contractor.
14. **Authorized Contractor Signature/Date** – The authorized individual employed by the Prime Contractor who filled this form out should date and sign here.
15. **Contractor Federal Tax ID #** – Enter the Federal Tax ID Number of the Prime Contractor.
16. **Contractor MBE/CBMBE Classification** – Enter the MBE/CBMBE Classification Number if the Prime Contractor is a certified MBE/CBMBE Company.
17. **Name of LEA MBE Liaison** – PRINT the name of the LEA MBE Liaison (or other LEA authorized employee) responsible for VERIFYING ALL INFORMATION filled out by the Prime Contractor on this form.
18. **Signature of LEA MBE Liaison/Date** – Signature of the person VERIFYING ALL INFORMATION filled out by the Prime Contractor on this form.