

Metropolitan Government of Nashville and Davidson County

Equal Business Opportunity (EBO)

Subcontractor Inclusion Bid Submission Checklist

For use on Solicitations with MBE and WBE Subcontracting Goals

Please be sure the following items are completed and included in your bid response for a bid with MBE and WBE subcontracting goals. Failure to submit all the forms required below will result in a bid being deemed "Non-Responsive" by Metro Procurement and/or BAO:



| Form Name/Description | Required? | Completed |
|---|-----------------------|-----------|
| Statement of MWBE Utilization | Yes | |
| Statement of Interested Subcontractors/Vendors. | Yes | |
| Statement of Bid Proposals/Price Quotations | Yes | |
| Good Faith Efforts Summary Sheets (applicable if MWBE utilization doesn't meet the established goals) | Yes; if applicable | |

It is highly recommended that you review the Minority Business Enterprise (MBE) and Woman Business Enterprise (WBE) Instructions Contained within this packet prior to completing and submitting the required forms to ensure that you are adhering to the Equal Business Opportunity (EBO) program requirements. Failure to adhere to the EBO program requirements in submitting the required forms may cause your bid to be deemed non-responsive.

INSTRUCTIONS

The requirements of Title 4 of the Metropolitan Code, BL2018-1419 are a part of this contract and are incorporated by reference. THE FAILURE OF ANY BIDDER/PROPOSER, CONTRACTOR, OR SUBCONTRACTOR TO COMPLY WITH BL2018-1419 AND THE IMPLEMENTING REGULATIONS SHALL BE A BREACH OF CONTRACT.

Highlights of Metro Nashville's Equal Business Opportunity (EBO) program are noted below. A complete copy of BL2018-1419 and the implementing regulations are available on the website at: https://www.nashville.gov/Metro-Clerk/Legislative/Ordinances/Details/0ac32c47-2f7f-490f-ba86-5a5edab9edf1/2015-2019/BL2018-1419.aspx or by request from the Office of Minority and Women Business Assistance.

1. BID/PROPOSAL REQUIREMENTS

Bid/Proposal must include a commitment to utilize MBEs and WBEs at a percentage that equals or exceeds the contract goals indicated in the contract specifications. Bidder/Proposer must submit the following completed documents WITH THE BID/PROPOSAL:

Statement of MWBE Utilization Plan
Statement of Interested Subcontractors/Vendors
Statement of Bid Proposals/Price Quotations

Good Faith Efforts Summary Sheets (if applicable)

Any bid/proposal that does not include a completed Statement of MWBE Utilization, Statement of Interested Subcontractors/Vendors, or Statement of Bid Proposals/Price Quotations will be considered non-responsive to the minimum requirements of the solicitation. (see BL2018-1419, 4.46.070 Bid Requirements)

Bidder/Proposer must provide a record of its Good Faith efforts to obtain MBE and WBE participation if bid/proposal doesn't commit to utilize MBEs and WBEs at a percentage that equals or exceeds the required MBE and WBE subcontractor goals (see 4.46.080 Evaluation of Bid for Program Compliance C & D)

2. VERIFYING CERTIFICATION

Bidder/Proposer is responsible for verifying that each MBE and WBE to be used on a contract is registered with Metropolitan Government of Nashville & Davidson County and certified by one of Metro Nashville's Reciprocal Certification entities at the time of the bid opening/proposal submission. The MBEs and WBEs named must be certified to provide the services that they are listed to perform, and those services must be required as part of the work on this contract. A directory of certified MBE and WBE firms are available online at https://nashville.diversitycompliance.com/.

3. COUNTING MBE AND WBE PARTICIPATION

a) Participation of M/WBEs

A business enterprise that is certified as both an MBE and WBE (M/WBE) may not be counted toward both MBE and WBE goals for the same project. The bidder/proposer must select the goal to which the business enterprise is to be counted.

b) Credit for Self-Performance

A bidder/proposer that is an MBE or WBE may not count the work it intends to perform with its own forces toward the applicable MBE or WBE goal.

c) Commercially Useful Function

The bidder/proposer may count toward the contract goals only expenditures to MBEs and WBEs that perform a commercially useful function in the execution of the contract.

Commercially Useful Function: Means performance or provision of real and actual services by a Participant under a contract with the Metropolitan Government or under a subcontract with another business enterprise under a contract with the Metropolitan Government. In determining whether a business is performing a commercially useful function, the following non-exclusive factors will be considered:

- 1. the nature and amount of work contracted;
- 2. whether the MWBE has the skill and expertise to perform work for which it has been certified;
- 3. whether the MWBE performs, manages and supervises the work;
- 4. whether the MWBE intends to purchase commodities and/or services from a non-MWBE and simply resell same to the general or prime contractor for the purpose of allowing those commodities and/or services to be counted towards assessment of a Benchmark or fulfillment of a goal (if implemented);
- 5. standard industry practices relating to the use of subcontractors. Consistent with standard industry practices, a MWBE subcontractor may enter into second tier subcontracts provided that no more than twenty-five percent of the work thereunder will be performed by a non-MWBE unless the subcontractor demonstrates to the satisfaction of the Metropolitan Government that the subcontracting arrangement is consistent with standard industry practice. (4.46.020 Definitions)

d)Supplier Participation:

Where a Participant utilizes suppliers to satisfy the goal(s) in whole or in part, the MWBE suppliers must perform a commercially useful function. Supplier participation may be approved upon review of the following factors:

- i. the nature and amount of supplies to be furnished;
- ii. whether the MWBE is a manufacturer, wholesaler or distributor of the supplies and has the capabilities to deliver same in accordance with its certification;
- iii. whether the MWBE performs, manages and supervises the work to furnish the supplies; and

whether the MWBE intends to purchase supplies from a non-MWBE and simply resell same to the general or prime contractor for allowing those supplies to be counted towards fulfillment of the goal(s). **(4.46.060 Annual Aspirational Goal and Project-By-Project Goals, D3)**

e) Joint Ventures

A bidder/proposer may count toward the contract goal the portion of its expenditure to a joint venture that is equal to the percentage of the MBE or WBE participation in the joint venture. (4.46.060 Annual Aspirational Goal and Project-By-Project Goals, D4)

Joint Venture: Means an association of two or more independent persons, partnerships, corporations (or any combination of them) formed, consistent with the laws of the State of Tennessee, to perform one or more specific contracts limited in scope and duration. . (4.46.020 Definitions)

f) Good Faith Efforts

If a bidder/proposer is unable to comply with the contract goal, the bidder/proposer may submit Good Faith Efforts Summary Sheets with their bid. Good Faith Efforts will only be considered If the Bid submitted by the First Ranked Bidder in response to a solicitation issued by the Purchasing Agent includes the documents required by Section 4.46.070 of BL2018-1419, and if the Bidder has not met the applicable goal Approval of Good Faith Efforts shall not be granted unless the Good Faith Efforts Summary Sheets include documentation that demonstrates good faith efforts to meet the goals (4.46.080 Evaluation of Bid for Program Compliance)

| Statement of M/WBE Utilization A&E ONLY | | | | | | | | |
|--|--------------------------------|---|-----------------------|------------------------|-----------------|----------------------------------|---|---------------------------|
| Proposer's/Firm's Name: | | | | | | Proposer's Phone #: | | |
| Solicitation Title: | | | | | | Proposer's Email Addres | s: | |
| Solicitation #: | | | | | | Total Bid Amount: | | |
| EBO Goal (%): MBE% | WBE% | | | | | EBO Goal Met? (Y/N) | | |
| The following MWBE* subcontractor(| (s)/supplier(s) will be | utilized for the performance of this | project: | Contificato | | | | |
| | | | | Certificate Type | * MBE/WBE | Code # | | |
| MBE/WBE Firm Nam | ne | MBE/WBE Firm Address | Phone/E-Mail | (MBE or WBE) | Group Type * | UNSPS/NAICS | Descri | ption of Work |
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| I am the duly authorized representativ | ve and certify the fac | ts and representations contained in | this form and support | ting documents are tru | ue and correct. | | | |
| Authorized Representative (Printe | ed Name/Title/Sign | ature) | | | | | | Date |
| *Note: MWBE is defined as business enterprise ma | aintaining a significant busii | ness prescience in the Program Area & performin | | | | African Americans (2) Native Ame | ricans, (3) Hispanic Americans, (4) Asian | Americans, and (5) Women. |
| | | | For Inter | nal Office Use | ONLY | | | |
| Has Prime Complied with EB | O Goal? | | | If No, Good Fait | h Efforts Met? | | | |
| | | | | | | | | |
| BAO Representati | ve: | | | | | | | |



EQUAL BUSINESS OPPORTUNITY PROGRAM FORM

Please complete this form for A&E Projects Only to provide Metro with information regarding each individual or entity requesting information about the project or solicited for participation on the project. The list of subcontractors shall include those persons who did not actually submit a price quotation or bid, rather just requested information. Please contact the Business Assistance Office with any questions at 615-880-2814.

| Project Name | | | | | | RFP/ITB Number | | |
|---|-------------|----------------------------|--------------------------------|---|---|---------------------------------------|-------------------------|--|
| Part I STATEMENT OF INTER | RESTED M/ | WBE SUE | CONTRACT | ORS AND VENDOR | RS | | | |
| As part of our regular and o | | | | | subcontractors, suր owing certified MW | | | |
| Business Name & Contact | Phone No | MBE/W Certifica Type | | U | Who Initiated Contact? | UNSPS Code # for work to be performed | Information Requested | |
| | | | | | | | | |
| Part II STATEMENT OF BID/P This Statement shall include | | | ntial subcor | ntractors <u>not sele</u> | cted that actually so | ubmitted a bid or pr | oposal for the project. | |
| Business Name & Contact | Pho | ne No | MBE/WBE Certificate Type | UNSPS Code for work to be performed | | Work Requested To E | Be Performed | |
| | | | | | | | | |
| | | | | | | | | |
| Name | | | Title | | | Date | | |

LETTER OF INTENT TO PERFORM AS A SUBCONTRACTOR/JV



| This form is to be completed and submitted by the app | • | • |
|---|----------------------------|--------------------------------|
| business day following notice o | f intent to award from | Metro. |
| Project Name/RFQ #: | | |
| Established Subcontractor Participation Goals: | Total Contract Value: | |
| MBE% WBE% | Total Contract value. | |
| PRIME CONTRACTO | OR INFORMATION | |
| Prime Name: | | |
| Project Mgr: | Phone #: | Email: |
| Prime Company Address: | 1 110110 111 | 2 |
| City: State: Zip Code: | | |
| SUBCONTRACTOR | JV INFORMATION | |
| Subcontractor/JV Name: | | |
| Project Mgr: | Phone #: | Email: |
| Sub/JV is a (check) MBE: WBE: Joint Ver | nture: | |
| Sub/JV Company Address: | | |
| City: State: Zip Code: | | |
| BID, MBE AND WB | E PARTICIPATION | |
| Total value of M/WBE participation under this Subcontract | or/Joint Venture Agreer | ment is: |
| MBE Participation: Dollar Amount | Percentage | |
| WBE Participation: Dollar Amount | Percentage | |
| Check One: Will Meet MBE/WBE Participation Goal | Will NOT Mee | t MBE/WBE Participation Goal |
| Detailed description of work items to be performed: | | |
| | | |
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| THIS DLAN MUST BE SIGNED BY BOTH BRIDA | AND CURCONITRACTO | D / I O I N I T V CALT I I DED |
| THIS PLAN MUST BE SIGNED BY BOTH PRIM | E AND SUBCONTRACTO | K/JOINT VENTURER |
| I certify that the information included in this Letter of Intent to I | | • |
| to the best of my knowledge and belief. I further understand an | _ | = |
| and Subcontractor/JV for the work described upon award and expanding and Davidson County. | ecution of a contract with | Metropolitan Government of |
| Nashville and Davidson County. | | |
| | | |
| Print Name and Title of Prime | Print Name and Ti | itle of Subcontractor/JV |
| | | , |
| | | |
| | | |
| Signature | Signature | |
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| | | |
| Date: | Date: | |

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

SUMMARY SHEET

| THIS DOCUMENT MUST I | BE ACCURAT | | | ITTED WITH THE BID OR PROPOSAL | | |
|----------------------|--|--|------------------------|----------------------------------|--|--|
| | | (Due with Bid Sub | mission if Applicable) | | | |
| Project Name: | | | Project Number: | | | |
| Company Name: | | Date Submitted: | | Total Contract Value: | | |
| Address: | | 1 | Federal Tax ID# | | | |
| Contact Person: | | Email: | | Phone #: | | |
| | GOO | OD FAITH EFFO | RTS SUMMARY SHEE | E <mark>T</mark> | | |
| Number | | | er Action(s) | BAO Only | | |
| 1. | availability as services can b measure inclu personal containcluding those in the past as well as Bidder may be be ascertained MWBEs main. The written not in Enough species in the past as well as a service in the past as a | webs: decific individual MWBEs whose as potential sources of goods or be reasonably ascertained. This ludes sending letters or making other attacts with specific certified MWBEs dose that the Bidder has contracted with swell as other MWBEs with which the be unfamiliar, but whose identities can ded from a directory of certified dintained by the BAO. Inotices contain: Dough information about the plans, ccs, and terms & conditions of the dictation; Contact person knowledgeable of the direct; Description of the direct; Description regarding the Bidder's deding requirements; de deadline for submission of price dictations. | | ested below related to the above | | |

For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

| Company Name/Address/Contact | Type of | Type of | How | Response to | Bid/Quote | Company |
|------------------------------|----------|-----------------|--------------|--------------|-----------|-----------------|
| Person/Phone/Email | Business | Work/Service(s) | Business | Solicitation | Amount | Selected (Write |
| | | Solicited | was | (i.e. will | | Yes or NO) |
| | | | contacted | submit bid, | | |
| | | | (i.e. email, | no | | |
| | | | phone, | response, | | |
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| | | | etc.?) | interested | | |
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METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY $\mbox{M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS}$ $\mbox{SUMMARY SHEET}$

| THIS DOCUMENT MUST I | THIS DOCUMENT MUST BE ACCURATELY COMPLETED, SIGNED AND SUBMITTED WITH THE BID OR PROPOSA | | | | |
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| | | (Due with Bid Sub | mission if Applicab | <mark>ole)</mark> | |
| Project Name: | | | Project Number: | | |
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| Contact Person: | | Email: | | Phone #: | |
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| 2. | | ttended or held info | | , | |
| | | pdate potential subo | | | |
| | vendors of su | bcontracting or sup | ply opportunities. | | |
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| List all information r may be duplicated. | equested belov | v related to the abo | ove project. If add | litional space is required, this form | |
| Company Name/Address/Contact Number/Email | Person/Phone | Description of Mo M/W/SDVEs | eeting Notices for | Date M/W/SDVE Attended, if applicable | |
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| Company Name: | Date Submitted: | | Total Contract Value: | |
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| GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST | | | | |
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| 3. Unbundlin | g. Divided the contr | act, in | | |
| accordance | with normal industry | practice, into | | |
| small, econ | omically feasible seg | ments that could | | |
| be perform | ed by MWBEs. Und | er no | | |
| circumstan | ces, however, shall a | | | |
| work solely | for the purpose of u | | | |
| as subcontr | actors where such seg | gmentation is not | | |
| in accordan | ce with common and | accepted | | |
| industry pra | actices relating to the | utilization of | | |
| other firms | as subcontractors. | | | |

What Scope of Project Was Divided?

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| Number | | Bidder A | action(s) | | BAO Only | |
| 4. | rejection of any to the Bidder, in | ction: Provided a written explanation for tion of any potential subcontractor or vendor Bidder, including the name of the firm ded the subcontract or supply agreement. | | | · | |
| For each MBE/WBE project. If additional | | | | requested | below related to the above | |
| M/WBE Firm Name/Address/Con Number/Email | tact Person/Phon | Description of | f Proposed Work | | Reason for Rejection | |
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METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY $\mbox{M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS} \\ \mbox{SUMMARY SHEET}$

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| Contact Person: Email: | | | Phone #: | |
| GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST | | | | |
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| environment free of harassment, intimidation and | | | | |
| coercion at all construction sites, offices and other | | | | |
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| assigned to work. The Bidder shall specifically | | | | |
| ensure that all labor supervisors, superintendents, | | | | |
| and other on-site supervisory personnel are aware | | | | |
| of and carry out the Bidder's obligation to maintain | | | | |
| a non-discrim | inatory work enviro | nment. | | |
| | GOOD FAI Non-discrimit discriminatory environment for coercion at all facilities at what we assigned to we ensure that all and other on-sof and carry of a non-discriminatory. | Date Submitted: Email: GOOD FAITH EFFORTS SUBMITTER Bidder A Non-discrimination: Providing discriminatory work site. Maintain environment free of harassment, it coercion at all construction sites, facilities at which the Bidder's enassigned to work. The Bidder share ensure that all labor supervisors, and other on-site supervisory personal of and carry out the Bidder's oblication of the product of the product of the supervisory personal carry out the Bidder's oblication of the product of the produ | Federal Tax ID# Email: GOOD FAITH EFFORTS SUMMARY SHEET Bidder Action(s) Non-discrimination: Providing a non- discriminatory work site. Maintaining a work environment free of harassment, intimidation and coercion at all construction sites, offices and other facilities at which the Bidder's employees are assigned to work. The Bidder shall specifically ensure that all labor supervisors, superintendents, | |

For each training, list the type of training and date.

| Type of Training | Date of Training |
|------------------|------------------|
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| THIS DOCUMENT MUST BE ACCURATELY COMPLETED, SIGNED AND SUBMITTED WITH THE BID OR PROPOSAL | | | | | |
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| (Due with Bid Submission if Applicable) | | | | | |
| Project Name: Project Number: | | | | | |
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| Address: Contact Person: | | Federal Tax ID# | | Phone #: | |
| Contact Person: | TH EFFORTS SU | MMARY SHEET | | | |
| Number | Bidder Action(s) | | BAO Only | | |
| 6. | Community | and Other Organiz | | | |
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| | | ation in the Program | | | |
| | | t shall identify and d | | | |
| | | ontracting or other o | pportunity in | | |
| | reasonable de | | 1 11 0 | | |
| For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated. | | | | | |
| Publication Name | | Date of Publication | | Please provide copy. | |
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| THIS DOCUMENT MUST BE ACCURATELY COMPLETED, SIGNED AND SUBMITTED WITH THE BID OR PROPOSAL (Due with Bid Submission if Applicable) | | | | | | |
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| Contact Person: | | Email: | | Phone #: | | |
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| Number | T | Bidder Action(s) | | BAO Only | | |
| 7. | | Bonding/Lines of C | | | | |
| | | sonable assistance to | | | | |
| | | ment, supplies, bond | ling, letters of | | | |
| | credit and/or i | nsurance. | | | | |
| For each MRF/WRF f | irm contacted | list the name(s) as | nd all information | requested below related to the above | | |
| project. If additional | | | | requested below related to the above | | |
| Company Name/Address/Contact P | Parson/Phone Nu | umber/Email | | Type of Assistance | | |
| Company Name/Address/Contact I | CISOII/I HOHE IV | umoci/Eman | Type of Assistance | | | |
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THIS DOCUMENT MUST BE ACCURATELY COMPLETED, SIGNED AND SUBMITTED WITH THE BID OR PROPOSAL

| (Due with Bid Submission if Applicable) | | | | | |
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| Project Name: | | |] | Project Number: | |
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| Address: | <u>.</u> | |] | Federal Tax ID# | |
| Contact Person: | | Email: | | | Phone #: |
| | GOOD F | AITH I | <mark>EFFORTS SUMMAR</mark> | | |
| Number | | | Bidder Action | n(s) | BAO Only |
| 8. | Database Util | ization | 1 | | |
| | Accessed all rea | asonabl | le and available mea | ns to include, but | |
| | not limited to t | ot limited to the following examples: | | | |
| | https://www.na | ashville | e.gov/Finance/Procui | rement/Business- | |
| | Assistance-Office | ce-Office/SMWBE-Lists-and-Forms.aspxor | | | |
| | https://nashvill | le.diver | sitycompliance.com/ | | |
| | | | | | |
| | | | | | ed below related to the above |
| project. If add | litional space is re | equired, | , this form may be du | olicated. | |
| Database Accessed | | | Date of Access | | Results |
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| Project Name: | | Date Submitted: | Project Number: | | |
| Company Name: | | Date Submitted: | | Total Contract Value: | |
| Address: | | | Federal Tax ID# | | |
| Contact Person: | | Email: | | Phone #: | |
| | | | MMARY SHEET | | |
| Numbe | | Bidder Action(s) | | BAO Only | |
| 9. | | egé' Relationship/I | | | |
| | | Providing reasonable MWBEs to amelio | | | |
| | | f technical knowled | | | |
| | | ich assistance is und | | | |
| | | litate the MWBE's | | | |
| | | on a project or contr | | | |
| For each MBE | | | | quested below related to the above | |
| | litional space is requir | | | | |
| Camanana Nama | Towns of Assistance | т. | 'M4 D4442 A | | |
| Company Name | Type of Assistance | Type of Assistance If Mentor Protégé' Agreement Reached, Please Provide C | | | |
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| • | | | | an opportunity to respond on the | |
| | | | | e account of all firms' responses to | |
| our solicitation. Copies of all bids and/or quotes will be made available upon request. | | | | | |
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