

INSTRUCTIONS FOR LIST OF DBE PARTICIPANTS

If a DBE Goal is indicated, you must propose to achieve a goal that is equal or greater than the percentage required. If no goal is indicated, you may propose your own goal.

The DBE firms to be utilized as counting toward the proposed goal must be listed on this form, along with their addresses, type of work, and the amount to be paid to each of the minority firms. The amount entered will not necessarily be the contract amount, but must be the actual amount that will be paid to the DBE firm. In the case of a DBE supplier, the amount paid and 60% of that amount both will be entered; and only the 60% figure should be added to the total. An example of this is shown in the example chart:

| Vendor Number | Company Name And Address (City and State) | Type Of Work | *Work Code | Race Neutral | Race Conscious | Amount |
|---------------|---|----------------------|------------|--------------|----------------|--------------------------------------|
| | ABC Oil Company Atlanta, GA | Diesel Fuel Supplier | | | | \$80,000.00 (60%= \$48,000.00) |

* For Departmental use ONLY. Do not fill in Work Codes.

The Contractor shall indicate for each DBE and Type of Work whether the DBE Participant is Race Neutral or Race Conscious by placing a checkmark in the appropriate column.

PLEASE NOTE: For 60% of the amount paid to a DBE supplier to be eligible to count toward fulfilling the DBE goal, the supplier must be an established “regular dealer” in the product involved, and not just a broker. A “regular dealer” would normally sell the product to several customers and would usually have product inventory on hand.

DBE GOALS

VENDOR ID:

BIDDER'S COMPANY NAME:

PROJECT NO. & COUNTY:

LET NO:

LET DATE:

TOTAL BID:

THE REQUIRED DBE GOAL ON THIS CONTRACT IS:

I PROPOSE TO UTILIZE THE FOLLOWING DBE CONTRACTORS:

LIST OF DBE PARTICIPANTS

| VENDOR NUMBER | DBE NAME/ ADDRESS (CITY, STATE) | TYPE OF WORK | *WORK CODE | Race Neutral | Race Conscious | AMOUNT |
|--------------------------|--|---------------------|-----------------------|-------------------------|---------------------------|---------------|
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| TOTAL | | | | | | |

***For Departmental use only. Do not fill in Work codes.**

PLEASE NOTE: Only 60 % of the participation of a DBE Supplier who does not manufacture or install the product will be counted toward the goal. See below for further instructions.