

INDIANA DEPARTMENT OF TRANSPORTATION
DBE-3 REQUEST PACKAGE

Prime Contractor	Contract Number
<p>I hereby submit the following DBE-3 Form(s), DBE Credit Worksheet, and Good Faith Efforts Summary for the above referenced contract. With this submission, I have included an explanation for any deficiencies in our inability to meet the overall DBE contract goal and/or any individual DBE commitment(s) that were identified on the Affirmative Action Certification that was submitted with our bid proposal to INDOT. My explanation includes: (1) reason(s) for each deficiency; (2) what, if any, opportunities existed to compensate for each deficiency; (3) what, if any, good faith efforts were taken to account for each deficiency; and (4) the results of those good faith efforts.</p> <p>_____</p> <p>Signature and Title of Authorized Representative</p> <p>_____</p> <p>Date</p> <p><i>IMPORTANT: All requested documentation must be submitted to INDOT in one complete package within 30 calendar days from receipt of this email. DBE-3 Form(s) must be completed for each DBE firm that was utilized on this contract, whether there was a stated DBE goal or not. Please be advised that this contract will not be closed without a complete submission. Failure to provide INDOT with the requested documentation may result in loss of DBE participation credit and possible referral to INDOT's Prequalification Committee for administrative remedies.</i></p> <p>Any questions regarding the material contained herein can be directed to Marie Jett at 317-233-3698 or ejett@indot.in.gov</p>	

**INDIANA DEPARTMENT OF TRANSPORTATION
DISADVANTAGED BUSINESS ENTERPRISE UTILIZATION AFFIDAVIT**

KNOW ALL MEN BY THESE PRESENTS:

THAT, in order to comply with the Disadvantaged Business Enterprise requirements set out in Contract: _____, the below signed persons, representing the Prime Contractor and the Disadvantaged Business Enterprise, do hereby certify and swear that the amounts shown below, were paid to and received by, the Disadvantaged Business Enterprise, represented below, who performed subcontract work, provided materials, or rendered any other service in the carrying forward, performing and completing of said contract. **Entered amount represents all monies due for participation on this contract.**

Amount paid to: _____; \$ _____
(Name of DBE Firm)

The DBE was utilized as a: Subcontractor Lessor Supplier (Manufacturer) Supplier (Regular Dealer) Supplier (Broker)

Description of services provided: _____

IN WITNESS WHEREOF, I have affixed my signature this _____ day of _____, _____

(Name of Prime Contractor)

(Signature and Title of Authorized Representative)

ACKNOWLEDGEMENT

STATE OF INDIANA, COUNTY OF _____ Subscribed and sworn to me by _____ of the firm of
_____ this _____ day of _____, _____

(Notary Public)

My Commission Expires: _____

Amount received from: _____; \$ _____
(Name of Prime Contractor)

IN WITNESS WHEREOF, I have affixed my signature this _____ day of _____, _____

(Name of DBE Firm)

(Signature and Title of Authorized Representative)

ACKNOWLEDGEMENT

STATE OF INDIANA, COUNTY OF _____ Subscribed and sworn to me by _____ of the firm of
_____ this _____ day of _____, _____

(Notary Public)

My Commission Expires: _____

