



Disadvantaged Business Enterprise (DBE) A&E/Professional Written Confirmation Document

THIS FORM SHALL BE SUBMITTED FOR EACH DISADVANTAGED BUSINESS ENTERPRISE (DBE) PROPOSED ON THE AGREEMENT.

THE PRIME CONSULTANT SHALL SUBMIT A COMPLETE FORM FOR EACH DBE PRIOR TO PERFORMING WORK.

Part A: To be Completed by the Prime Consultant	
Agreement Title & Number	
Prime Consultant's Business Name	
DBE's Business Name	
Description of DBE's Work	
Estimated Amount to be Applied Towards DBE Goal	Estimated Amount to be Subcontracted to DBE*
	<small>*Optional Field</small>
Part B: To be Completed by the Disadvantaged Business Enterprise	
As an authorized representative of the Disadvantaged Business Enterprise, I confirm that we have been contacted by the Prime Consultant with regard to the referenced Agreement for the purpose of performing the work described above. If the Prime Consultant is awarded the Agreement, we will enter into an agreement with the Prime Consultant to participate in the project consistent with the information provided in Part A of this form.	
Name (Printed)	Signature
Title	Date
Address	