

**MaineDOT CONSULTANT'S DBE/SUBCONSULTANT
PROPOSED UTILIZATION FORM**

Must be provided as an attachment to each New or Revised Technical Proposal

Consultant Firm: _____ Telephone: _____ Ext _____

Contact Person: _____ Fax: _____

E-mail: _____

TOTAL CONTRACT/MODIFICATION AMOUNT: \$ _____ DATE OF EXECUTION: ____/____/____
(For Department Use Only)

FEDERAL PROJECT PIN # _____ PROJECT LOCATION: _____

TOTAL DBE _____ % PARTICIPATION FOR THIS SUBMISSION

W B E •	D B E •	Non DBE	Firm Name	Description of Work & Item Number	Actual \$ Value
Total >					

Consultants must make a good faith effort to include Certified DBE firms in all aspects of the project. If no DBE firms are to be part of this project team, a detailed explanation is required.

<p>Equal Opportunity Use:</p> <p>Form received: ____/____/____ Verified by: _____</p> <p>____ Accepted ____ Rejected _____</p> <p>cc: <input type="checkbox"/> Contracts <input type="checkbox"/> Other _____</p>
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For a complete list of certified firms and company designation (WBE/DBE) go to <http://www.maine.gov/mdot>