

## Drinking Water State Revolving Fund

**Disadvantaged Business Enterprise (DBE) Requirements**

Department of Environmental Quality · Water Quality Division

*The purpose of the DBE program is to encourage the use of minority and women owned businesses.*

**Prime contractors must take the following steps to ensure that DBE companies have the opportunity to bid for sub-contracts and/or supply contracts.**

- Step 1** Complete and submit DW-702a with bid packet.
- Step 2** Contact at least one DBE for each subcontract/supplier needed.
- Step 3** Complete the following forms (Steps 4-7) and submit them with the contract documents, within three days of being declared the low bidder.
- Step 4** Record all solicitations with DBE and non-DBE companies. Provide detailed information on DW-702b for all DBEs that will be used.
- Step 5** Complete and submit DW-702c. (to be completed by the Owner)

For instructions, examples, and DBE lists and agencies go to DW-701.

All DW and EPA forms can be found at

<http://www.deq.state.ok.us/wqdnew/dwsrf/index.html>

Drinking Water State Revolving Fund

# Subcontractor/Supplier Contact Log

Department of Environmental Quality - Water Quality Division

**A. Project Owner:** B. DWSRF Project Number P40-

**C. Prime Contractor Name and Contact Person:**

**D. Prime Contractor phone # and email address:**

**E. Contract Number and/or Name:**

F.	Subcontractor/Supplier Name/Address	Name of person contacted	Phone/Fax and Email	Write MBE, WBE, or Neither	Task or material	Date Contacted		DBE Utilized? Yes-list cert#, agency, and exp. date. No-give reason
						Bid/quote amount		
1						Date: Bid:		
2						Date: Bid:		
3						Date: Bid:		
4						Date: Bid:		
5						Date: Bid:		
6						Date: Bid:		

**G. Is Prime Contractor a DBE?**  
\_\_\_ Yes or \_\_\_ No

**H. Attach copies of solicitation letters, faxes, or emails sent to DBEs**

Make additional copies as necessary.



Environmental  
Protection Agency

OMB Control No: \_\_\_\_\_

Approved: \_\_\_\_\_

Approval Expires: \_\_\_\_\_

**Disadvantaged Business Enterprise Program  
DBE Subcontractor Performance Form**

NAME OF SUBCONTRACTOR <sup>1</sup>		PROJECT NAME
ADDRESS		BID/PROPOSAL NO.
TELEPHONE NO.		E-MAIL ADDRESS
PRIME CONTRACTOR NAME		
CONTRACT ITEM NO.	ITEM OF WORK OR DESCRIPTION OF SERVICES BID TO PRIME	PRICE OF WORK SUBMITTED TO PRIME CONTRACTOR
Currently certified as an MBE or WBE under EPA's DBE Program? _____ Yes _____ No		
_____ Signature of Prime Contractor		_____ Date
_____ Print Name		_____ Title
_____ Signature of Subcontractor		_____ Date
_____ Print Name		_____ Title

<sup>1</sup>Subcontractor is defined as a company, firm, joint venture, or individual who enters into an agreement with a contractor to provide services pursuant to an EPA award of financial assistance.



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## Disadvantaged Business Enterprise Program DBE Subcontractor Performance Form

The public reporting and recordkeeping burden for this collection of information is estimated to average fifteen (15) minutes. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed EPA DBE Subcontractor Performance Form to this address.



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**Disadvantaged Business Enterprise Program  
DBE Subcontractor Utilization Form**

BID/PROPOSAL NO.	PROJECT NAME
NAME OF PRIME BIDDER/PROPOSER	E-MAIL ADDRESS
ADDRESS	
TELEPHONE NO.	FAX NO.

The following subcontractors <sup>1</sup> will be used on this project:			
COMPANY NAME, ADDRESS, PHONE NUMBER, AND E-MAIL ADDRESS	TYPE OF WORK TO BE PERFORMED	ESTIMATE D DOLLAR AMOUNT	CURRENTLY CERTIFIED AS AN MBE OR WBE?

I certify under penalty of perjury that the foregoing statements are true and correct. In the event of a replacement of a subcontractor, I will adhere to the replacement requirements set forth in 40 CFR Part 33 Section 33.302(c).

_____	_____
Signature Of Prime Contractor	Date
_____	_____
Print Name	Title

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### Disadvantaged Business Enterprise Program DBE Subcontractor Utilization Form

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