STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION FINAL REPORT-UTILIZATION OF DISADVANTAGED BUSINESS ENTERPRISES (DBE), FIRST-TIER SUBCONTRACTORS

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CEM-2402F (REV 02/2008)

CONTRACT NUMBER		COUNTY	ROUTE	POST MILES	FEDERA	EDERAL AID PROJECT NO. ADMINISTERING AGENCY		IG AGENCY	CONTRACT COMPLETION DATE			
PRIME CONTRACTOR				BUSINESS ADDRESS						ESTIMATED CONTRACT AMOUNT		
DESCRIPTION OF				CONTRACT PAYMENTS								
ITE M NO.	WORK PERFORMED AND MATERIAL PROVIDED	COMPANY NAME AND BUSINESS ADDRESS		DBE CERT. NUMBER	NON-DBE	DBE		TE WORK DMPLETE		DATE OF FINAL PAYMENT		
					\$	\$						
					\$	\$						
					\$	\$						
					\$	\$						
					\$	\$						
					\$ \$	\$ \$						
					\$ \$	\$						
					\$	\$						
					\$	\$						
					\$	\$						
					\$	\$						
ORIGI	NAL COMMITMENT											
\$				TOTAL	\$	\$						
	DBE First-Tier Subcontractors, Disadv was different than that approved	-				• •	listed for g	goal credit. If actual	DBE utilization (or item			
I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT												
CONTRACTOR REPRESENTATIVE'S SIGNATURE							BUSINESS PHONE NUMBER		DATE			
TO THE BEST OF MY INFORMATION AND BELIEF, THE ABOVE INFORMATION IS COMPLETE AND CORRECT												
RESIDENT ENGINEER'S SIGNATURE							BUSINESS PHONE NUMBER			DATE		
Copy Di	stribution-Caltrans contracts:		Original - District Cons	truction	Copy-	Business Enterprise	Program	C	opy- Contractor	Copy Resident Engineer	II	
Copy Distribution-Local Agency contracts: Original - District Loca (submitted with the Rep			Assistance Engineer Copy- District Local Assistance Engineer					opy- Local Agency file				

FINAL REPORT – UTILIZATION OF DISADVANTAGED BUSINESS ENTERPRISES (DBE), FIRST-TIER SUBCONTRACTORS CEM 2402(F) (Rev. 02/2008)

The form requires specific information regarding the construction project: Contract Number, County, Route, Post Miles, Federal-aid Project No., the Administering Agency, the Contract Completion Date and the Estimated Contract Amount. It requires the prime contractor name and business address. The focus of the form is to describe who did what by contract item number and descriptions, asking for specific dollar values of item work completed broken down by subcontractors who performed the work both DBE and non-DBE work forces. DBE prime contractors are required to show the date of work performed by their own forces along with the corresponding dollar value of work.

The form has a column to enter the Contract Item No. (or Item No's) and description of work performed or materials provided, as well as a column for the subcontractor name and business address. For those firms who are DBE, there is a column to enter their DBE Certification Number. The DBE should provide their certification number to the contractor and notify the contractor in writing with the date of the decertification if their status should change during the course of the project.

The form has six columns for the dollar value to be entered for the item work performed by the subcontractor.

The Non-DBE column is used to enter the dollar value of work performed for firms who are not certified DBE.

The decision of which column to be used for entering the DBE dollar value is based on what program(s) status the firm is certified. This program status is determined by the California Unified Certification Program by ethnicity, gender, ownership, and control issues at time of certification. To confirm the certification status and program status, access the Department of Transportation Civil Rights web site at: http://www.dot.ca.gov/hq/bep or by calling (916) 324-1700 or the toll free number at (888) 810-6346.

Based on this DBE Program status, the following table depicts which column to be used:

DBE Program Status	Column to be used			
If program status shows DBE only with no other programs listed	DBE			

If a contractor performing work as a DBE on the project becomes decertified and still performs work after their decertification date, enter the total dollar value performed by this contractor under the appropriate DBE identification column.

If a contractor performing work as a non-DBE on the project becomes certified as a DBE, enter the dollar value of all work performed after certification as a DBE under the appropriate identification column.

Enter the total of each of the six columns in Form CEM-2402(F).

Any changes to DBE certification must also be submitted on Form-CEM 2403(F).

Enter the Date Work Completed as well as the Date of Final Payment (the date when the prime contractor made the "final payment" to the subcontractor for the portion of work listed as being completed).

The contractor and the resident engineer sign and date the form indicating that the information provided is complete and correct.