

Email:

## Disadvantaged Business Enterprise (DBE) Confirmation and Commitment **AgreementTrucking Company**

the subject project. DBE					from the Hawa	all Department of	Transportation (HDOT) for	
Project #:  NAICS CODE/DESCRIPTION OF WORK:				County:  SECONDARY NAICS CODE:				
								fAll quantities and units
The prime contractor shall inform HDOT the dates when the truck								
Estimated Beginning D	ate (Mo	onth/Year):		Estim	ated Complet	ion Date (Month/	Year):	
TRUCKING	Item	No	Item Description		Unit	Unit Price /	Amount	
COMPANY:	·			Onic	Rate	Amount		
						\$	\$	
						\$	\$	
						\$	\$	
			1	T	OTAL COMMIT	MENT AMOUNT	\$	
. , , ,				e used a	nswer the foll	Tractors owing: Type of Trucks (s		
			to be Contracted					
			\$					
			\$					
f a DBE trucking comparubstitution/replacemer	ny is una nt appro u <b>bcontr</b>	able to perfo val process a actor (only i	rm the work as listed as outlined in the cor f the DBE will be a se	l on this itract DE econd tie	agreement for E requirement er sub) confirm	rm, the prime cont ts. <b>IMPORTANT! T</b>	d on the agreement form. tractor will follow the the signatures of the DBE, ation on this Agreement is	
DBE NAME:				Name/Title (please print):				
Address:				Signature:				
Phone:		Fax:						
Email:				Date:				
Prime Contractor:				Name/Title (please print):				
Address:				Signature:				
Phone: Fax:								
Email:				Date				
Subcontractor (only if the DBE will be a second tier sub):				Name/Title (please print):				
Address:				Signa	ture:			
Phone:		Fax:						

HDOT retains the information collected through this form. With few exceptions, you are entitled on request to be informed about the information that we collect about you.

Date:



## Disadvantaged Business Enterprise (DBE) Confirmation and Commitment Agreement Trucking Company INSTRUCTIONS

The purpose of this agreement is to secure the commitment of the bidder/offeror to utilize the listed DBE trucking company, and the DBE's confirmation that it will perform work for the bidder/offeror on this project. The information on this form shall be provided by the DBE.

Project #	Self-explanatory
County	County where project is located
NAICS Code/Description of Work	Primary North American Industry Classification
	System code under which DBE is certified to
	performand description of work to be done
Secondary NAICS Code	List other NAICS codes firm is certified to perform
Estimated Beginning Date (Month/Year)	Date DBE shall begin work on the project
Estimated Completion Date (Month/Year)	Date DBE's work will be completed
Trucking Company	Name of DBE trucking company
Item No.	List pay item number
Item Description	Description of item
Unit	Unit of measure – e.g. weight or hours
Unit Price/Rate	Cost per unit or hourly rate
Amount	Total amount per pay item
Total Commitment Amount	Sum of all pay items and total commitment of
	bidder/offeror to DBE
Number of hours contracted or quantities to be	Approximate number of hours or tonnage to be
hauled	hauled
Number of fully operational trucks to be used:	Total number of trucks to be used for the project
Tractor/Trailers	Number of tractor trailers to be used
Dump Trucks	Number of dump trucks to be used
Number of fully operational trucks owned by DBE	Number of listed DBE's trucks to be used on
	thisproject
Name of Trucking Company	If other trucking companies (DBE or non-DBE) are to
	be leased, list name and information about type of
	trucks in this section
Estimated Dollar Amount to be Contracted	Provide information about estimated cost to lease
North and Special Trade Trade / Trade	trucks
Number of Dump Trucks, Tractor/Trailer	Self-explanatory
DBE NAME	DBE Company name
Name/Title	Name and title of DBE's representative
Address	Self-explanatory
Phone	Self-explanatory
Fax	Self-explanatory
Email	Self-explanatory
Signature	Signature of DBE's representative
Date	Date agreement is signed
Prime Contractor	Company name

Name/Title	Name and title of prime contractor's representative
Address	Self-explanatory
Phone	Self-explanatory
Fax	Self-explanatory
Email	Self-explanatory
Signature	Signature of prime contractor's representative
Date	Date agreement is signed
Subcontractor (only if the DBE will be a second tier sub):	Name of subcontractor only if the listed DBE trucking company will be performing work under this subcontractor
Name/Title	Name and title of the subcontractor's representative
Address	Self-explanatory
Phone	Self-explanatory
Fax	Self-explanatory
Email	Self-explanatory
Signature	Signature of subcontractor
Date	Date agreement is signed