

Address:

Fax:

Fax:

Subcontractor (only if the SBE will be a second tier sub):

Phone:

Email:

Address:

Phone:

Email:

Small Business Enterprise (SBE) Confirmation and Commitment Agreement **Trucking Company**

This commitment is subject to the award and receipt of a signed contract from the Hawaii Department of Transportation (HDOT) for

	s must be t	Lei tilled by	the bid opening date				
Project #: NAICS CODE/DESCRIPTION OF WORK:				County:			
				SECONDARY NAICS CODE:			
*All quantities and units	s should ma	atch the bi	d tab item whenever p	l oossible.			
The prime contractor sh			-		rts and cor	npletes all work ur	nder the subcontract.
Estimated Beginning Date (Month/Year):				Estimated Completion Date (Month/Year):			
TRUCKING	Item No).	Item Description		Unit	Unit Price /	Amount
COMPANY:						Rate	
						\$	\$
						\$	\$
						\$	\$
				TOTA	L COMMIT	MENT AMOUNT	\$
4. If Owner Operators or addit Name of Trucking Company		SBE Y/N	<u> </u>			Type of Trucks (s	pecify)
			\$				
			\$				
	rtifics by s	ignature o	n this agreement to u	tiliza tha 9	DE American	r company as lister	d on the agreement form
The prime contractor ce	er times by s			tille tile t	BE trucking	tollipally as lister	
f a SBE trucking compa	ny is unable	e to perfor	m the work as listed o	n this agr	eement for	m, the prime cont	
If a SBE trucking compa substitution/replaceme	ny is unable nt approva	e to perfor I process a	m the work as listed on the cont	on this agr ract SBE re	eement for equirement	m, the prime cont s. IMPORTANT! T	ractor will follow the he signatures of the SBE,
f a SBE trucking compa substitution/replaceme prime contractor, and s	ny is unable nt approva subcontrac	e to perfor I process a tor (only it	m the work as listed on the cont feet see the	on this agr ract SBE ro ond tier s	eement for equirement ub) confirm	m, the prime cont is. IMPORTANT! The sthat all informa	ractor will follow the he signatures of the SBE,
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prime contractor, and strue and correct. Partice SBE NAME: Address:	ny is unable nt approva subcontract es should si	e to perfor I process a tor (only it ign Agreer	m the work as listed on the cont feet see the	on this agr ract SBE ro ond tier s which they Name/T	eement for equirement ub) confirm are listed. itle (please	m, the prime cont s. IMPORTANT! To s that all informa	ractor will follow the

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.

Signature:

Signature:

Name/Title (please print):

Date:

Date:



Small Business Enterprise (SBE) 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 SBE trucking company, and the SBE's confirmation that it will perform work for the bidder/offeror on this project. The information on this form shall be provided by the SBE.

Project #	Self-explanatory
County	County where project is located
NAICS Code/Description of Work	Primary North American Industry Classification
	System code under which SBE is certified to perform
	and description of work to be done
Secondary NAICS Code	List other NAICS codes firm is certified to perform
Estimated Beginning Date (Month/Year)	Date SBE shall begin work on the project
Estimated Completion Date (Month/Year)	Date SBE's work will be completed
Trucking Company	Name of SBE 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 SBE
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 SBE	Number of listed SBE's trucks to be used on this
	project
Name of Trucking Company	If other trucking companies (SBE or non-SBE) 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
Niverban of Degree Treates Treates /Treates	trucks
Number of Dump Trucks, Tractor/Trailer	Self-explanatory
SBE NAME	SBE Company name
Name/Title Address	Name and title of SBE's representative
Phone Phone	Self-explanatory
	Self-explanatory
Fax	Self-explanatory
Email	Self-explanatory
Signature	Signature of SBE's representative
Date Date Date Date Date Date Date 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 SBE will be a second tier	Name of subcontractor only if the listed SBE trucking
sub):	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