

Disadvantaged Business Enterprise (DBE) 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 the subject project. DBEs must be certified by the bid opening date.

Project #:					County:				
NAICS CODE/DESCRIPTION OF WORK:				SECONDARY NAICS CODE:					
L *All quantities and u	nits should	match the bi	d tab item whenever	possibl	e.				
The prime contractor shall inform HDOT the dates when the truck					ng firm starts and completes all work under the subcontract.				
Estimated Beginning Date (Month/Year):				Estimated Completion Date (Month/Year):					
TRUCKING	Item	No	Item Description	1		Unit	Unit Price /	Amount	
COMPANY:	item		item bescription				Rate		
							\$	\$	
							\$	\$	
							\$	\$	
				T	OTAL C	OMMIT	MENT AMOUNT	\$	
Number of hour	s contracted	d or quantitie	es to be hauled:						
					Tractor/trailers:Dump trucks:				
			d by DBE:						
4. If Owner Operat	ors or addit	ional truckin	g companies are to be	e used a	answer	the foll	owing:		
Name of Trucking Company DBE		DBE Y/N	Estimated Dollar Amou to be Contracted		ount Number and Type of Trucks (specify)				
			\$						
			\$						
The prime contracto	r certifies by	, signature o	n this agreement to u	tilize th	he DBE	trucking	g company as liste	ed on the agreement form.	
If a DBE trucking con	npany is una	ble to perfo	rm the work as listed	on this	agreer	nent for	m, the prime con	tractor will follow the	
substitution/replace	ment appro	val process a	s outlined in the cont	ract DE	BE requ	irement	ts. IMPORTANT! 1	The signatures of the DBE,	
prime contractor, ar	nd subcontr	actor (only if	the DBE will be a sec	cond ti	er sub)	confirm	ns that all informa	ation on this Agreement is	
true and correct. Pa	rties should	l sign Agreer	nent in the order in v	vhich t	hey are	e listed.			
DBE NAME:					Name/Title (please print):				
Address:				Signature:					
Phone:	one: Fax:								
Email:				Date:					
Prime Contractor:					Name/Title (please print):				
Address:					Signature:				
Phone:		Fax:							
Email:				Date:					
Subcontractor (onl	y if the DBE	will be a sec	cond tier sub):	Nam	e/Title	(please	print):		
Address:					Signature:				
Phone: Fax:			7 -						
Email:			Date:						
HDOT retains the inf	ormation co	llected throu	ugh this form. With fe	w exce	ptions	you are	entitled on reau	est to be informed about	
the information that			=		. ,	-	•		



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				
Number of Dump Trucks, Tractor/Trailer	trucks Self-explanatory				
DBE NAME					
Name/Title	DBE Company name 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				
FIIIIE COILLIACIOI	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				