

FCE EBE AFFIRMATION FORM FOR FCEO LOCALLY FUNDED PROJECTS

Instructions: Complete one form for each EBE firm on the project (whether being used toward the goal or not). Please scan each completed form, which must include the EBE's signature or other acceptable written affirmation*, and email to the prevailing wage coordinator rmccown@franklincountyengineer.org by 5:00PM on the 5th calendar day after bid opening. The FCEO's office will notify the appropriate parties when the affirmation(s) are approved.

GENERAL INFORMATION

Project Name	Letting Date	EBE Goal %	Prime Bidder's Firm	Bid Amount	Prime Bidder's Contact E-mail

APPARENT LOW BIDDER MUST COMPLETE THIS SECTION

EBE FIRM	CONTACT PERSON	PHONE NUMBER
CHECK THE APPROPRIATE BOX: <input type="checkbox"/> SUBCONTRACTOR <input type="checkbox"/> TRUCKING <input type="checkbox"/> SUPPLIER – MANUFACTURER (EBE MSV) <input type="checkbox"/> SUPPLIER – REGULAR DEALER (EBE MSV) <input type="checkbox"/> SUPPLIER – BROKER (EBE MSV) <input type="checkbox"/> CONSULTANT <input type="checkbox"/> SERVICE <input type="checkbox"/> OTHER _____	DESCRIPTION OF WORK TO BE PERFORMED BY EBE (IF TRUCKING, PLEASE COMPLETE ADDITIONAL QUESTIONS BELOW) _____ _____ _____ _____ _____ _____ _____ TRUCKING QUESTIONNAIRE 1. Please provide the commodity or commodities to be trucked; Also, will the EBE be purchasing this commodity (please note "yes" or "no" for each item listed)? _____ 2. Please provide the "to" and "from" locations (i.e. from asphalt plant to the project site) _____	
____ % OF WORK TO BE SELF-PERFORMED BY THE EBE FIRM ABOVE		

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<p>____ % OF WORK TO BE SUBCONTRACTED TO ANOTHER EBE FIRM FROM EBE FIRM LISTED</p> <p>Note: a copy of the subcontract agreement will be required post award but prior to the start of work</p>	<p>3. Please provide the estimated quantity of material to be trucked by listed firm for each item.</p>
<p>____ % OF WORK TO BE SUBCONTRACTED TO A NON-EBE FIRM</p> <p>Note: work subcontracted to a non-EBE firm will not count as participation toward the project EBE goal</p>	<p>4. Please provide estimated number of trucks required to transport the material listed above.</p>
<p>Will this EBE be used for the FCE EBE goal?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>If yes, what \$ amount of the agreement is intended to be used toward the FCE EBE goal? \$ _____</p>	<p>TOTAL AGREEMENT \$ _____</p> <p>CREDIT- up to 100% for an approved EBE Materials and Supplies Vendor (MSV)</p> <p>\$ _____ (EBE Supplier questions must be completed)</p>

EBE FIRM MUST COMPLETE THIS SECTION

TO BE ANSWERED BY EBE MATERIALS AND SUPPLIES VENDORS (EBE MSVs) ONLY:

- 1.) Please list the materials/supplies to be fulfilled by your firm and/or attach the quote provided by your firm for review.

- 2.) Is your firm certified with one of the FCEO's approved certifying agencies? If yes, list name of agency.

- 3.) Is your firm manufacturing all of the materials/supplies in fulfillment of your subcontract? (If yes, skip ahead to the Certification of EBE section.)

THE FOLLOWING QUESTIONS PERTAIN TO MATERIALS/SUPPLIES NOT MANUFACTURED BY YOUR FIRM:

- 4.) Does your firm engage, as its principal business and under its own name, in the purchase and sale or lease of the materials/supplies in question?

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5.) Does your firm own, operate, or maintain a store, warehouse, or other establishment in which the materials/supplies of the general character described by the specifications and required under your subcontract are bought, kept in stock, and regularly sold or leased to the public in the usual course of business?

If you answered "no" to question #5, skip to question #7.

6.) For this subcontract, will the specific materials/supplies in question be picked from your stock, and are such items kept in stock and regularly sold or leased to the public in the usual course of business?

7.) Will your firm deliver the materials/supplies in question?

If you answered "no" to question #7, skip ahead to the Certification of EBE section.

8.) Will your firm deliver the materials/supplies in question with trucks and other distribution equipment it both owns and operates with its own employees?

If you answered "yes" to question #8, skip ahead to the Certification of EBE section.

9.) Will the materials/equipment/supplies be drop-shipped or shipped by a 3rd party carrier from your location?

If the answer to question #9 is "yes":

a) If drop-shipped, what is your commission/mark-up?

b) If a 3rd party carrier, what is the cost of this service?

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CERTIFICATION OF EBE*

I am an EBE certified by one of the FCEO's certifying agencies. I hereby certify that as an EBE, I quoted the above price and type of work and that all information contained in this form is true and accurate to the best of my knowledge.

Signature of EBE: _____
(Signature and Job Title of Company Official)

Date: _____ *(mm/dd/yyyy)*