**Letter of Intent/Schedule of Participation[[1]](#footnote-1)**

**Disadvantaged Business Enterprise (DBE)[[2]](#footnote-2) Participation**

**(For Federally-sponsored Projects)[[3]](#footnote-3)**

MassDOT Aeronautics Division Form AD3-DBE (Last Modified: September 20, 2024)

|  |  |  |
| --- | --- | --- |
| **NOTE TO BIDDER**: THE DBE GOAL FOR THIS PROJECT SHALL NOT BE LESS THAN |  | % (FROM SPONSOR’S |
| APPROVED DBE PLAN). IF THIS GOAL IS NOT MET, THE BIDDER MUST SUBMIT DOCUMENTATION OF A “GOOD FAITH EFFORT” TO THE SPONSOR. PLEASE REFER TO CONTRACT DOCUMENTS REGARDING WHEN THIS FORM NEEDS TO BE SUBMITTED. |

**AIRPORT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AIP NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PROJECT TITLE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |
| --- |
| Name of General Contractor |
| Name of DBE Contractor  |
| Address |
| City | State | Zip Code | Phone |

|  |  |
| --- | --- |
| **1.** | **The undersigned DBE firm intends to perform work in connection with the above referenced project as:** |
|  | Check One: |  |
|  | [ ]  | An individual | [ ]  | A partnership | [ ]  | A corporation |
|  | [ ]  | A joint venture with: |  |
|  | [ ]  | Other |  |
|  |  |  | Attach extra sheets if necessary |

|  |  |
| --- | --- |
| **2.** | **The undersigned affirms that they are a duly authorized official representing the proposed DBE and affirms that its certification has not expired nor been revoked. (Attach a copy of the certification letter) [[4]](#footnote-4)** |
|  | Check all that apply: |  |
|  | [ ]  | DBE |  |  |  |  |  |
|  | Certification Agency |  | Certification Number |  |

|  |  |
| --- | --- |
| **3.** | **If awarded the contract, the undersigned intends to enter into a subcontract to perform the work described on the following sheet for the prices indicated.** |
| **Contract Item No.** | **Description of Work to be Performed by DBE Contractor** | **Estimated Quantity** | **Unit Price** | **Item Amount** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Total amount credited to DBE contractor (add item amounts): | TOTAL | $ |
| Proposed total contract price: |  | $ |
| The total price to DBE contractor for work performed under this contract is |    % | of the proposed total |
| contract price. (See note to bidder above). |

The undersigned certify that they will enter into a formal agreement upon execution of the contract for the above referenced project pursuant to all conditions noted in attached documents, swearing and affirming under the pains and penalties of perjury, that the foregoing information and appropriate attachments are true and accurate to the best of their knowledge.

|  |  |
| --- | --- |
| Name of DBE Contractor: |  |
|  |  |
| Authorized Signature: |  |
|  |  |
| Name and Title: |  |
|  |  |
| Date: |  |
|  |  |
|  |  |
| Name of Prime Contractor: |  |
|  |  |
| Authorized Signature: |  |
|  |  |
| Name and Title: |  |
|  |  |
| Date: |  |
|  |  |

1. Use a separate form for each DBE firm to be utilized on this project. [↑](#footnote-ref-1)
2. Must be register with the MA Supplier Diversity Office (SDO) and must be listed as a DBE with a valid certification when work is completed. Suppliers must be discounted at 60%. The participation of the Prime Contractors and Subcontractors that are DBEs may be counted toward the DBE goal. [↑](#footnote-ref-2)
3. For projects with any amount of federal participation. [↑](#footnote-ref-3)
4. Certification of DBE must be completed prior to Contract Award. [↑](#footnote-ref-4)