**LETTER OF INTENT**  
**MINORITY/WOMEN BUSINESS ENTERPRISES PARTICIPATION**  
**DIVISION OF CAPITAL ASSET MANAGEMENT AND MAINTENANCE**  
(To be completed by MBE/WBE and submitted by the General Bidder to the DCAMM Compliance Office with its completed Schedule for Participation within five (5) working days of the opening of General Bids or by Filed Sub-bidder with its bid.)

DCAMM Project Number: ____________________________________________  Indicate SDO Certification:

Project Name: ____________________________________________________  ____ MBE

Project Location: ___________________________________________________  ____ WBE

To: ___________________________________________________________________  ____ M/WBE  

Name of General Bidder/ Sub-bidder

1. This firm intends to perform work in connection with the above referenced project with its own workforce and understands it will be responsible for providing all required project weekly workforce reports, including, but not limited to, certified payrolls and workforce composition reports, certain of which are submitted electronically.

2. This firm is currently certified by the Massachusetts Supplier Diversity Office (“SDO”) to perform the work identified below, and has not changed its minority/women ownership, control, or management without notifying SDO within thirty (30) days of such a change.

3. This firm understands that if the General Bidder/Sub-bidder referenced above is awarded the contract, the Bidder intends to enter into an agreement with this firm to perform the activity described below for the prices indicated. This firm also understands that the above-referenced firm, as General Bidder/Sub-bidder, can make substitutions only as allowed by Article XIII of the Contract.

4. This firm understands that under the terms of Article XIII of the contract, only work actually performed by an MBE/WBE with its own existing workforce will be credited toward MBE/WBE participation goals, and this firm cannot assign or subcontract out any of its work without prior written approval of the DCAMM Compliance Office, and that any such assignment or subcontracting will not be credited toward MBE/WBE participation goals.

**MBE/WBE PARTICIPATION**

<table>
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<tr>
<th>Identify Specification Section/Item Number or General Conditions</th>
<th>Describe MBE/WBE Scope(s) of Work (provide detail of the work to be performed and clarify “Labor and Material”) “Labor Only” or “Material Only”</th>
<th>If Supplier, Indicate Total Value of Supplies (10% of total counts toward Participation)</th>
<th>Dollar Value of Participation</th>
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(Attach additional sheets if necessary)

Total Dollar Value of Work to be Performed by MBE/WBE Firm: $__________________

Name of MBE/WBE Firm: _____________________________  Authorized Signature: _____________________________

Business Address: _____________________________  Print Name: _____________________________

__________________________________________  Title: _____________________________

Telephone No ______ Fax No. ______  Date: _____________________________

E-mail Address: _____________________________

Letter of Intent – Revised 7/13