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 Designer to the DCAMM Compliance Office with its completed Schedule for Participation within five (5) working days after the Designer receives notice of selection (A-5 Letter))

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.

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 Designer referenced above is awarded the contract, the Designer 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 Designer, can make substitutions only as allowed by the Contract and applicable law.

4. This firm understands that under the terms of the contract, only work actually performed by an MBE/WBE 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

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<tr>
<th>Describe MBE/WBE Scopes of Work</th>
<th>Dollar Value of Participation</th>
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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: __________________________  

Designer Letter of Intent – Revised 3/14