## WMATA DBE FORM - PART 2 FEDERALLY-FUNDED CONTRACTS SCHEDULE OF DBE PARTICIPATION (DBE PRIME) PAGE 2

|   | Contract No:   |
|---|--|
|   | Project Name:  |
| Name of Offeror   |  |
| these firms shall be at prices amounting to at least the DBE percentage goal of the | with scope of work and price, who have agreed to perform work on this Contract. The prices for the work/supplies of the total Contract price. The Offeror agrees to enter into a formal agreement with the DBE firm(s) listed for the work award of a Contract with the Authority. If the total amount is less than the DBE percentage goal, a justification for |
| When a DBE subcontractor is a 2nd or 3rd tier it must be clearly indicated on the   | e Schedule of Participation and the details of the transactions fully explained.   |
| Is offeror a DBE Prime? Yes: No: Is offeror a DBE Manufacturer                      | er? Yes:No: Is offeror a DBE Supplier? Yes:No:   |
| ** *  | 60 percent of the cost of the materials or supplies toward DBE goals. <i>Ref (49 CFR 26.55)</i> 0 percent of the cost of the materials or supplies toward DBE goals. <i>Ref (49 CFR 26.55)</i>   |

| Name of DBE<br>Prime Contractor<br>(if applicable) | Address of DBE Prime | Identify if DBE<br>Subcontractor 1st<br>Tier, 2nd Tier, 3rd<br>Tier. (if applicable) | If DBE Subcontractor is<br>NOT 1st Tier<br>Subcontractor, identify the<br>Name of the Company the<br>Tiring Relationship is with | Type of Work<br>(Please indicate NAICS<br>Code for DBE<br>Subcontractor) | DBE Subcontract<br>Amount |
|--|----------------------|--|--|--|---------------------------|
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |
|  |                      |  |  |  |                           |

| I | 1 | 1 |  |  |
|---|---|---|--|--|

| Subtotal \$ DBE Prime Contractor       |  |                              |                |              |  |  |  |  |
|--|--|------------------------------|----------------|--------------|--|--|--|--|
|  |  | TOTAL \$ ALL DBE CONTRACTORS |                | TOTAL        |  |  |  |  |
| Signature of Contractor Representative |  |                              |                |              |  |  |  |  |
| Titl                                   |  |                              |                | Title        |  |  |  |  |
|  |  |                              | _ Email Adress |              |  |  |  |  |
|  |  |                              |                | Phone Number |  |  |  |  |
|  |  |                              |                | Date         |  |  |  |  |