

MDOT is looking for you!

**Women-Owned and Minority-Owned
businesses that specialize in:**

- Road Construction
- Real Estate Appraisal
- Surveying
- Bridge Work
- Pavement Marking
- Landscaping
- Asphalt Paving & Repair
- Concrete Paving & Repair
- Overhead & Permanent Traffic Signs
- Microsurfacing
- Highway Project Cleanup
- Road Design
- and Other Transportation Services

We want to work with businesses that are ready, willing and able to work with MDOT.

Is this your company?

MDOT holds periodic certification/prequalification workshops. For more information or to set up an appointment, please contact:

Ann Williams (*toll-free*)

1.866.323.4009 (ext. 211)

or e-mail

Williamsa3@michigan.gov

Graphics/000/dbe/dbe flyers/MDOT is looking 4U.edr 11/09



MDOT
Michigan Department of Transportation

Providing the
highest quality integrated
transportation services
for economic benefit and
improved quality of life.

Construction Prequalification

Equipment Guideline for Work Classifications

Below is an example of the equipment you should have available to perform specific work classification(s). A lease/rental agreement will be requested if your company does not own the required equipment.

Equipment Used for Various Classifications							
Backhoe	Crane	Dozer	Excavator	Grader	Loader	Rollers	Scrapers (pull)
Ea-Fa-Fd-G-J-K-N6	Ea-Fa-Fd-G-Ka-N6	Ea-Fa-Fd-G-H-N2	Ea-Fa-Fb-Fd-G-J-K-Ka	Ea	Ea-Fa-Fb-Fd-G-J-K-Ka-N6	Ea	Ea

Equipment Necessary for Specific Classifications					
B Concrete Paving	Ba Concrete Patching	Ca Chip Seal	Cb HMA Bituminous Pavement	Ea Bridges & Special Structures	F Misc. Concrete Curb/Gutter/Sidewalks
Major paving equipment (slip-form)	Compaction equipment	Chip spreader	Roller & pneumatic & vibratory	Pile & pneumatic hammer	Paver-curb & gutter slip-form
Concrete delivery trucks	Drilling machine (dowel bars)	Power brooms	Paver	Compaction equipment	Compaction equipment
	Forms	Distributor	Trucks	Forms	Forms
	Screed (self-powered)	Pneumatic roller	Distributor	Compressor	
	Concrete saw			Screed	

N – Special Contracts				
N3 Pavement Marking	N4 Bridge Painting	N5 Railroad Track	N6 Signs Cantilever Truss	N7 Waterproofing
Pavement marking machines	Dust collectors Air compressors	Ballast regulator	Cherry picker	Shotcrete applicator
Supply trucks	Hygiene facilities (showers)	Ballast tamper	Auger	Asphalt heater/spreader
Cores	Sand blasting equip	Spike pullers	Post driver	Air compressor
	Scaffolding – tarps paint sprayers	Spiker (automatic)	Post hole digger	

H - Landscaping	I - Seeding and Sodding/Turf Establishment
Auger, Backhoe, Disc, Dozer, Drag, Excavator, Tree spade, Water Tank, Truck	Disc, Drag, Hydroseeder, Mulcher, Tractor, Truck



Date of Event: Oct 19, 2011	Event Location National Association of Minority Contractors
-----------------------------	--

**INTERESTED IN GETTING HELP COMPLETING YOUR MICHIGAN
UNIFIED CERTIFICATION APPLICATION?**

**Office of Business Development (OBD)
*Can help you:***

- Complete your Michigan Unified Certification (MUCP) Application.
- Understand the Disadvantaged Business Enterprise Program (DBE) certification process.
 - Obtain prequalification information.
 - Get to know MDOT's partners.

Providing your information below will allow OBD to notify you about OBD sponsored and partnered events. You will also be notified of scheduled certification overview sessions to help you understand how to submit a complete MUCP application.

My firm is a: Women Business Entity Minority Business Entity

Name of Firm (please print): _____

Contact Person (print): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email address: _____

Print clearly

Our work type is: _____

Please return via fax to (248) 967-0596, Attn. Ann Williams
Additional information email: **Ann Williams** at: williamsa3@michigan.gov

The deadline to register is has been extended:

Please complete one form per attendee:

I am a: (Please Check One)	DBE <input type="checkbox"/>	Prime Contractor <input type="checkbox"/>	MDOT Employee <input type="checkbox"/>	Other <input type="checkbox"/>
Company Name:				
Company Address:				
City, State, Zip:				
Phone Number:				
Fax Number:				
E-Mail Address:				
Name of Attendee: (one form per attendee)				
I plan to attend the Mix and Mingle Reception: Monday, Oct. 24, 2011 (5 to 8 p.m.)	Yes _____		No _____	

Comfort Inn & Suites Hotel and Conference Center
2424 South Mission St.
Mt. Pleasant, MI 48858
Phone: 989-772-4000

Mention the MDOT DBE Symposium when registering
to get the \$65.00 special room rate.

3rd Annual Disadvantaged Business Enterprise (DBE)
Small Business Training Symposium
October 25, 2011

Sponsored by the Michigan Department of Transportation (MDOT)
 Business Development Program

Comfort Inn & Suites Hotel Conference Center
 2424 South Mission St.
 Mt. Pleasant, MI 48858
 Phone: 989/772-4000

Monday, October 24, 2011

5:00 pm to 7:00 pm	Early Registration
5:00 pm to 8:00 pm	Mix and Mingle Reception

Tuesday, October 25, 2011

7:30 am to 8:30 am	Continental Breakfast
8:30 am to 9:00 am	Welcome and Conference Overview: Pat Collins, Administrator, MDOT Business Development Program
9:15 am to 10:00 am	Keynote Address: Donald E. Snider, Senior Vice President of Urban Economic Development, Michigan Economic Development Corporation
10:15 am to 11:00 am	General Session: DBE Fraud – A Federal Investigator’s Perspective – Mark Polers, U.S. Department of Transportation
11:15 am to 12:00 pm	General Session: Prompt Pay – Update on MDOT’s Prompt Pay Process and the New 2011 Specifications Book – Brenda O’Brien, MDOT Engineer of Construction & Technology
12:15 pm to 1:30 pm	Luncheon Keynote Speaker: Russell Jorgenson, Administrator, Federal Highway Administration – Michigan Division
1:45 pm to 3:00 pm	<p style="text-align: center;">Concurrent Workshops</p> <ul style="list-style-type: none"> • Reinventing MDOT: An Overview of New Organizational Changes at MDOT • Promoting your Business in This Economy: Networking and Presentation Skills • How to Get a Non-Highway Contract • Free State of Michigan Resources for Small Business Owners • Emerging Service Contracting Issues – A Roundtable Discussion
3:15 pm to 4:30 pm	<p style="text-align: center;">Concurrent Workshops</p> <ul style="list-style-type: none"> • Overview of Emerging Transportation Construction Issues • How to Get a Loan and Bonding • Understanding MDOT Requirements: A Refresher for Architect and Engineering Firms • The Portable Office: Tips for Running Your Business From the Field • Ten Tips for Business Success
4:30 pm to 5:00 pm	Closing Comments: Pat Collins, MDOT Business Development Program

Mention the DBE Symposium for the \$65.00 special room rate.
 There is no cost to attend this symposium, so register early. Deadline has been extended.

Go to: <http://2011dbesymposium.eventbrite.com> to register.
 (Call Connie Durham at 517-373-2377 if you cannot register online.)
 Schedule is subject to change.

**INTERESTED IN GETTING HELP COMPLETING YOUR MICHIGAN
UNIFIED CERTIFICATION APPLICATION?**

**Attend a certification overview presented by
Michigan Department of Transportation (MDOT)
Office of Business Development**

(IF YOU ARE ALREADY MUCP CERTIFIED, YOU NEED NOT ATTEND)

When: Wednesday, November 9, 2011
Where: Crown Pointe Office Building between I-696 & 11 Mile Road
25900 Greenfield Rd, Suite 245 Oak Park, MI 48237
Time: 9:30 AM – Noon
Register: With Emvina Constantine at 248-967-0570 Ext. 210 or
E-mail: ConstantineE@mdot.michigan.gov

Limited Seating

- Get frequently asked questions answered
- Learn how to become certified as a Michigan Unified Certified Program (MUCP) applicant.
- Learn if MDOT's prequalification is required for your work categories.
- Obtain your application at www.michigan.gov/mucp (Click on "Download Forms").
- Learn how certification status as an MBE or WBE firm can grant you Disadvantaged Business Enterprise (DBE) status through a one-stop process.
- Be able to identify non-certifying agencies.

REVIEW THE MUCP APPLICATION BEFORE ATTENDING THE SESSION.
(Available online at www.michigan.gov/mudtbe then Click on "Download Forms")

Through the one-stop process, you can submit your MUCP application to one of the following agencies for DBE status. Once status is granted, it is accepted by all in-state-certifying agencies.

- Michigan Department of Transportation (MDOT).
- Wayne County and
- Detroit Department of Transportation (DDOT).

There is no fee for this process. Can you think of a reason why you should not become certified?
Please register to attend the certification meeting.

Ann Williams
Michigan Department of Transportation
Office of Business Development
Outreach Specialist
248-967-0570 Ext. 211
williamsA@mdot.michigan.gov



Sponsored by the Michigan Department of Transportation

WORKSHOP

Wage & Labor Compliance Payroll Preparation

Wednesday, November 2, 2011, from 9:30 a.m. to 4 p.m.
Hilton Garden Inn, Detroit-Southfield

REGISTRATION DEADLINE IS
THURSDAY, OCTOBER 28TH



Hilton Garden Inn Detroit-Southfield

35000 American Dr
Southfield, MI 48034
(248) 967-1111

For more information or
to register, contact
Ermena Constantine:
Phone: 248-967-0570,
ext. 210

Fax: 248-967-0598
E-mail: constantinee@michigan.gov
Michigan.gov
Michigan.gov

Don't forget
to register!

EXCLUSIVE INFORMATION

This Session will provide you with understanding on:

- Prevailing Wage Components
- Contract Documents
- Wage Decisions
- Wage Rate Interviews
- Overtime
- Certified Payrolls
- Trucking

Company Name: _____

Participant Name: _____

MOE _____ OOE _____ Prime Contracted _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

E-mail Address: _____



35000 American Dr, Southfield, MI 48034
248-967-1111



Sponsored by the Michigan Department of Transportation

SOUTHWEST and UNIVERSITY REGIONS MEETING

for Certified DBEs,
Prime Contractors,
and MDOT Staff

**Monday, Nov. 7, 9:30 a.m. to noon
at the Holiday Inn in Battle Creek**

*Michigan Department of Transportation (MDOT)
is hosting a FREE MDOT/DBE/Prime Contractor meeting at
the Holiday Inn in Battle Creek*

REGISTRATION DEADLINE IS WEDNESDAY, NOV. 2



Holiday Inn Battle Creek

4401 E. Maple Street
Battle Creek, MI 48804

For more information or
to register, contact
Ermena Constantine
Phone: 248-967-0570,
ext. 210

Fax: 248-967-0598

E-mail: constantinee@michigan.gov

(Make a copy for each
attendee.)

**Don't forget
to register!**

EXCLUSIVE INFORMATION

This important session is designed to review:

- Questions and Answers about MDOT's 2012 DBE Program
- 2012 MDOT Southwest and University region construction projects

Company Name: _____

Participant Name: _____

MDOT _____ DBE _____ Prime Contractor _____

Address: _____

City: _____ State _____ Zip _____

Business Phone: _____ Fax: _____

E-mail Address: _____





Sponsored by the Michigan Department of Transportation

WORKSHOP

"Construction Bid Prep Getting to Know MDOT Resources"

Wednesday, December 7, from 9:30 a.m. to 4 p.m.
Eastern Michigan University, Livonia

REGISTRATION DEADLINE IS
FRIDAY, DECEMBER 2

EXCLUSIVE INFORMATION

This workshop will provide hands-on training for:

- | | |
|---------------------------|-----------------------|
| Reading Plans & Proposals | Material Source Guide |
| Spec Book Overview | Eligible Bid Listings |
| Researching Items of Work | Contract Inquiries |
| Finding Contracts | Searching MDOT Forms |



Eastern Michigan University
4875 I-75, Exit 260B, South
Service Loop
Livonia, MI 48150

For more information or
to register, contact
Emena Constantine:
Phone: 248-967-0570,
ext. 210

Fax: 248-967-0598
E-mail: constantinee@michigan.gov
(Please do not use
Yahoo! or iGoogle)

Don't forget
to register!

Company Name: _____

Participant Name: _____

MDOT: _____ DBE: _____ Prime Contractor: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

E-mail Address: _____



For MDOT Construction Firm & Certified DBEs



Sponsored by the Michigan Department of Transportation

Five Keys to Achieving Fiscal Fitness

Wednesday, December 7, 2011, from 9:30 a.m. to 4 p.m.
Eastern Michigan University

REGISTRATION DEADLINE IS
WEDNESDAY, DECEMBER 2TH



Eastern
Michigan University

18777 W. Six Mile Rd.
Livonia, MI 48150

For more information or
to register, contact
Ermena Constantine:
Phone: 248-967-0570,
ext. 210

Fax: 248-967-0598
E-mail: constantinee@michigan.gov

(Submit a copy for
your attorney)

EXCLUSIVE INFORMATION

An advanced financial planning workshop for established businesses designed to help even the non-financial business owner achieve "Fiscal Fitness". This training program is designed to help business owners strengthen financial literacy and improve the ability to access capital needed to grow.

Topics discussed include:

Identifying problems using your balance sheet and income statement, providing ways to increase your company's cash flow, using breakeven analysis to improve decision-making, planning working capital to support your growth; and how to keep your banker on your side.

Who should attend: *DBE's Priority First Step Reg.*

CEOs of businesses with at least three years of financial history who want to have a better understanding of how financial statements can inform their business decisions.

Company Name: _____

Participant Name: _____

MDOT: _____ DBE: _____ Prime Contractor: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

E-mail Address: _____

Don't forget
to register!



Disability and Business Enterprise Program



Sponsored by the Michigan Department of Transportation

WORKSHOP

Understanding MDOT and Federal DBE Requirements

Thursday, December 8, 2011, from 9:30 a.m. to 4 p.m.
Eastern Michigan University

REGISTRATION DEADLINE IS
FRIDAY, DECEMBER 2

EXCLUSIVE INFORMATION

This course is designed to provide insight into both the state and federal requirements for maintaining DBE certification and job performance. Participants in this course will gain information on the following:

- | | |
|---|-----------------------------------|
| Commercially Useful Function | Critical Path |
| Certification Renewal | Prompt Payment |
| Requirements | What to Expect on an MDOT Project |
| Equal Employment Opportunity (EEO) Requirements | DBE Work Site Plan Requirements |
| DBE Program Procedures | Foreman Daily Reports |
| MOOT Forum | Subcontract Requirements |



Eastern Michigan University

38777 W. Six Mile Rd.
Easton, MI 48823

For more information or to register, contact
Ermena Constantine:
Phone: 248-967-0570,
ext. 210

Fax: 248-967-0598
E-mail: constantine@emichigan.gov

(Submit a copy for each attendee)

Don't forget to register!

Company Name: _____

Participant Name: _____

MOOT _____ DBE _____ Prime Contractor _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Fax: _____

E-mail Address: _____



2011-2012 Fiscal Year
Michigan Department of Transportation
3000 Westland Blvd., Suite 1000, Westland, MI 48186-1000



**MICHIGAN
DISADVANTAGED
BUSINESS ENTERPRISE
CERTIFICATION
APPLICATION
for MDOT**

DO NOT STAPLE OR BIND THE APPLICATION OR DOCUMENTS



APRIL 2009

DISADVANTAGED BUSINESS ENTERPRISE PROGRAM
49 C.F.R. PART 26

UNIFORM CERTIFICATION APPLICATION

ROADMAP FOR APPLICANTS

i. Should I apply?

- Is your firm at least 51%-owned by a socially and economically disadvantaged individual(s) who also controls the firm?
 - Is the disadvantaged owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
 - Is your firm a small business that meets the Small Business Administration's (SBA's) size standard and does not exceed \$22,410,000 in gross annual receipts? (The only exception is for airport concessionaires (\$52,470,000 maximum annual gross receipts).)
 - Is your firm organized as a for-profit business?
- If you answered "Yes" to all of the questions above, you may be eligible to participate in the U.S. DOT DBE program.

ii. Is there an easier way to apply?

If you are currently certified by the SBA as an 8(a) and/or SDB firm, you may be eligible for a streamlined certification application process. Under this process, the certifying agency to which you are applying will accept your current SBA application package in lieu of requiring you to fill out and submit this form. **NOTE: You must still meet the requirements for the DBE program, including undergoing an on-site review.**

iii. Be sure to attach all of the required documents listed in the Documents Check List at the end of this form with your completed application.

iv. Where can I find more information?

- U.S. DOT – <http://www.dotcra.dot.gov/asp/dbe.asp> (this site provides useful links to the rules and regulations governing the DBE program, questions and answers and other information)
- SBA – http://www.sba.gov/ido/groups/public/documents/sba_homepage/serv_said_tsbiepdf.pdf (provides a listing of NAICS codes) and <http://www.census.gov/ipeds/naics02/> (provides a search engine and information for NAICS and SIC codes)

Under Sec. 26.107 of 49 CFR Part 26, dated February 2, 1999, if at any time the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 49 CFR Part 29, take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.

SECTION 1: CERTIFICATION INFORMATION

A. PRIOR/OTHER CERTIFICATIONS

IS YOUR FIRM CURRENTLY CERTIFIED FOR ANY OF THE FOLLOWING PROGRAMS? (If Yes, check appropriate box(es))	<input type="checkbox"/> DBE	NAME OF CERTIFYING AGENCY
	<input type="checkbox"/> SDB	HAS YOUR FIRM'S STATE UCP CONDUCTED AN ON-SITE VISIT? <input type="checkbox"/> Yes on _____ STATE _____ <input type="checkbox"/> No
	<input type="checkbox"/> SDB	STOP! If you checked either the (a) or (b) box, you may not have to complete this application. Ask your state UCP about the streamlined application process under the SBA-DOT MOU.

B. PRIOR/OTHER APPLICATIONS AND PRIVILEGES

HAS YOUR FIRM (UNDER ANY NAME) OR ANY OF ITS OWNERS, BOARD OF DIRECTORS, OFFICERS OR MANAGEMENT PERSONNEL EVER BEEN:

EVER WITHDRAWN AN APPLICATION FOR ANY PROGRAMS LISTED ABOVE	<input type="checkbox"/> NO <input type="checkbox"/> YES	DATE:
DENIED CERTIFICATION	<input type="checkbox"/> NO <input type="checkbox"/> YES	DATE:
DECERTIFIED	<input type="checkbox"/> NO <input type="checkbox"/> YES	DATE:
DEBARRED OR SUSPENDED	<input type="checkbox"/> NO <input type="checkbox"/> YES	DATE:
HAD BIDDING PRIVILEGES DENIED OR RESTRICTED BY ANY STATE, LOCAL AGENCY, OR FEDERAL ENTITY. IF YES, IDENTIFY STATE AND NAME OF STATE, LOCAL, OR FEDERAL AGENCY AND EXPLAIN THE NATURE OF THE ACTION.	<input type="checkbox"/> NO <input type="checkbox"/> YES	DATE:

SECTION 2: GENERAL INFORMATION

A. CONTACT INFORMATION

(1) CONTACT PERSON AND TITLE		(2) LEGAL NAME OF FIRM			
(3) TELEPHONE NO.	(4) OTHER TELEPHONE NO.	(5) FAX NO.			
(6) E-MAIL		(7) WEBSITE (if you have one)			
(8) STREET ADDRESS (No P.O. Box)	CITY:	COUNTY/PARISH	STATE	ZIP CODE	
(9) MAILING ADDRESS OF FIRM (if different from street address)	CITY:	COUNTY/PARISH	STATE	ZIP CODE	

B. BUSINESS PROFILE

(1) DESCRIBE THE PRIMARY ACTIVITIES OF YOUR FIRM

(2) FEDERAL TAX ID (if any)	(3) FIRM WAS ESTABLISHED ON (Date):	(4) I/WE HAVE OWNED THIS FIRM SINCE (Date):
(5) METHOD(S) OF ACQUISITION (check all that apply):	<input type="checkbox"/> Started new business <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Bought existing business	<input type="checkbox"/> Inherited business <input type="checkbox"/> Secured concession <input type="checkbox"/> Other (Explain)
(6) IS YOUR FIRM FOR PROFIT? <input type="checkbox"/> YES <input type="checkbox"/> NO	STOP! If your firm is NOT for-profit, then you do NOT qualify for this program and do NOT need to fill out this application.	
(7) TYPE OF FIRM (check all that apply)	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Partnership	<input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other (Describe)

SECTION 3: OWNERSHIP

IDENTIFY ALL INDIVIDUALS OR HOLDING COMPANIES WITH ANY OWNERSHIP INTEREST IN YOUR FIRM, PROVIDING THE INFORMATION REQUESTED BELOW. (If more than one owner, attach separate sheets for each additional owner.)

A. BACKGROUND INFORMATION

(1) NAME		(2) TITLE		(3) HOME PHONE NO.	
(4) HOME ADDRESS (Street and number)			CITY	STATE	ZIP CODE
(5) GENDER <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		(6) ETHNIC GROUP MEMBERSHIP (Check all that apply)			
(7) U.S. CITIZEN <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> BLACK	<input type="checkbox"/> HISPANIC	<input type="checkbox"/> NATIVE AMERICAN	
(8) LAWFULLY ADMITTED PERMANENT RESIDENT <input type="checkbox"/> YES <input type="checkbox"/> NO		<input type="checkbox"/> ASIAN/PACIFIC	<input type="checkbox"/> SUBCONTINENT ASIAN		
		<input type="checkbox"/> OTHER (Specify)			

B. OWNERSHIP INTEREST

(1) NUMBER OF YEARS AS OWNER	(2) INITIAL INVESTMENT TO ACQUIRE OWNERSHIP INTEREST IN FIRM	
(3) PERCENTAGE OWNED		
(4) FAMILIAL RELATIONSHIP TO OTHER OWNERS		
	TYPE:	DOLLAR VALUE
	CASH	\$ _____
	REAL ESTATE	\$ _____
	EQUIPMENT	\$ _____
	OTHER	\$ _____

(5) SHARES OF STOCK	NUMBER	PERCENTAGE	CLASS	DATE ACQUIRED	METHOD ACQUIRED

(6) DOES THIS OWNER PERFORM A MANAGEMENT OR SUPERVISORY FUNCTION FOR ANY OTHER BUSINESS?
 NO YES → IDENTIFY NAME OF BUSINESS _____
 FUNCTION/TITLE _____

NATURE OF BUSINESS RELATIONSHIP _____

C. DISADVANTAGED STATUS - NOTE: Complete this section only for each owner applying for DBE qualification (i.e., for each owner claiming to be socially and economically disadvantaged)

(1) WHAT IS THE PERSONAL NET WORTH (PNW) OF THE OWNER(S) APPLYING FOR DBE QUALIFICATION? (Use and attach the Personal Financial Statement form at the end of this application, attach additional sheets if more than one owner is applying)

(2) HAS ANY TRUST BEEN CREATED FOR THE BENEFIT OF THIS DISADVANTAGED OWNER(S)?
 NO YES → EXPLAIN (Attach additional sheets if needed)

E. IDENTIFY YOUR FIRM'S MANAGEMENT PERSONNEL WHO CONTROL YOUR FIRM IN THE FOLLOWING AREAS (if more than two persons, attach a separate sheet)

	NAME	TITLE	ETHNICITY	GENDER
(7) MARKETING/SALES	a.			
	b.			
(8) PURCHASING OF MAJOR EQUIPMENT	a.			
	b.			
(9) AUTHORIZED TO SIGN COMPANY CHECKS (for any purpose)	a.			
	b.			
(10) AUTHORIZED TO MAKE FINANCIAL TRANSACTIONS	a.			
	b.			

(11) DO ANY OF THE PERSONS LISTED IN (7) THROUGH (10) ABOVE PERFORM A MANAGEMENT OR SUPERVISORY FUNCTION FOR ANY OTHER BUSINESS? NO YES = PERSON _____ TITLE _____ BUSINESS _____ FUNCTION _____

(12) DO ANY OF THE PERSONS LISTED IN (7) THROUGH (10) ABOVE OWN OR WORK FOR ANY OTHER FIRM(S) THAT HAS A RELATIONSHIP WITH THIS FIRM? (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.) NO YES = FIRM NAME _____ PERSON _____

NATURE OF BUSINESS RELATIONSHIP: _____

C. INDICATE YOUR FIRM'S INVENTORY IN THE FOLLOWING CATEGORIES (attach additional sheets if needed)

	TYPE OF EQUIPMENT	MAKE/MODEL	CURRENT VALUE	OWNED OR LEASED?
1. EQUIPMENT	a.			
	b.			
	c.			
	TYPE OF VEHICLE	MAKE/MODEL	CURRENT VALUE	OWNED OR LEASED?
2. VEHICLES	a.			
	b.			
	c.			
3. OFFICE SPACE	STREET ADDRESS	OWNED OR LEASED?	CURRENT VALUE OF PROPERTY OR LEASE	
	a.			
	b.			
4. STORAGE SPACE	STREET ADDRESS	OWNED OR LEASED?	CURRENT VALUE OF PROPERTY OR LEASE	
	a.			
	b.			

D. DOES YOUR FIRM RELY ON ANY OTHER FIRM FOR MANAGEMENT FUNCTIONS OR EMPLOYEE PAYROLL? NO YES = EXPLAIN _____

J. LIST THE THREE LARGEST ACTIVE JOBS ON WHICH YOUR FIRM IS CURRENTLY WORKING:

NAME OF PRIME CONTRACTOR AND PROJECT NUMBER	LOCATION OF PROJECT	TYPE OF WORK	PROJECT START DATE	ANTICIPATED COMPLETION DATE	DOLLAR VALUE OF CONTRACT
1					
2					
3					

I further certify that my personal net worth does not exceed \$750,000, and that my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I declare, under penalty of perjury, that the information provided in this application and supporting documents relating to my disadvantaged status and me is true and correct.

Signature: _____ Date: _____

NOTARY CERTIFICATE:

Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)					
Number of Shares	Name of Securities	Cost	Market Value (Quotation/Exchange)	Date of Quotation/Exchange	Total Value

Section 4. Real Estate Owned.	(For each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)		
	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

Section 5. Other Personal Property and Other Assets. (Describe, and if any, a pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency.)

Section 6. Unpaid Taxes. (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

Section 7. Other Liabilities. (Describe in detail.)

Section 8. Life Insurance Held. (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries.)

I authorize SBAM, under to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness. I certify the above and the statements contained in the attachments are true and accurate as of the stated date(s). These statements are made for the purpose of either obtaining a loan or guaranteeing a loan. I understand FALSE statements may result in forfeiture of benefits and possible prosecution by the U.S. Attorney General (Reference 18 U.S.C. 1001).

Signature	Date	Social Security Number
Signature	Date	Social Security Number

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Cleveland Office, Paper Reduction Project (2245 0185), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

CONSTRUCTION PREQUALIFICATION WORK CLASSIFICATIONS

- | | |
|--|--|
| <p><input type="checkbox"/> B. Concrete Pavement
Construction of portland cement concrete base and surface course.</p> <p><input type="checkbox"/> Ba. Concrete Pavement Patching and Widening</p> <p><input type="checkbox"/> Ca. Chip Seals</p> <p><input type="checkbox"/> Cb. Plant-Mixed Hot Mix Asphalt/Bituminous Paving</p> <p><input type="checkbox"/> Ea. Grading, Drainage Structures, and Aggregate Construction.</p> <p><input type="checkbox"/> Fa. Bridges and Special Structures
Construction of masonry, fabricated steel, prestressed concrete beam, or timber bridges; large culverts and grade separations; special structures and other incidental construction.</p> <p><input type="checkbox"/> Fb. Structural Steel
Erecting structural steel, prestressed concrete beams and placing reinforcing steel on bridges and grade separations and other incidental structures.</p> <p><input type="checkbox"/> Fd. Pump Stations
Construction of pump stations and other incidental structures.</p> <p><input type="checkbox"/> G. Building Moving and Demolition
Building moving, demolition and other incidental construction.</p> | <p><input type="checkbox"/> H. Landscaping
Contracts involving ornamentation of roadsides and parks and other incidental construction.</p> <p><input type="checkbox"/> I. Seeding and Sodding/Turf Establishment</p> <p><input type="checkbox"/> J. Miscellaneous Concrete Items
Construction of concrete curb and gutter, sidewalk, barrier wall, driveways, and other incidental construction.</p> <p><input type="checkbox"/> K. Sewers and Watermains</p> <p><input type="checkbox"/> Ka. Tunneling and Jacking</p> <p><input type="checkbox"/> L. Electrical Construction</p> <p><input type="checkbox"/> N2. Clearing</p> <p><input type="checkbox"/> N3. Pavement Marking</p> <p><input type="checkbox"/> N4. Bridge Painting</p> <p><input type="checkbox"/> N5. Railroad Track Construction</p> <p><input type="checkbox"/> N6. Permanent Signs</p> <p><input type="checkbox"/> N7. Waterproofing</p> |
|--|--|

Certification will not be granted in these categories without the applicant first obtaining MDOT prequalification. Please Contact:

Michigan Department of Transportation
Contract Services Division – Construction Prequalification
P.O. Box 36050
Lansing, MI 48909
(517) 335-4281

<input type="checkbox"/> CAGC	Aggregate Construction Inspection and Testing Services	<input type="checkbox"/> PHCC	Photogrammetric Control Surveys
<input type="checkbox"/> ASBI	Asbestos Investigation	<input type="checkbox"/> PHGT	Photogrammetry
<input type="checkbox"/> CBI	Bituminous Pavement Inspection	<input type="checkbox"/> CPCC	Portland Cement Concrete Inspection and Testing Services
<input type="checkbox"/> CBIT	Bituminous Plant Inspection and Testing Services	<input type="checkbox"/> PREA	Prehistoric Archaeology
<input type="checkbox"/> BOTN	Botanical and Endangered Plant Assessment	<input type="checkbox"/> PRJD	Project Development Studies
<input type="checkbox"/> BRCE	Bridge Construction Engineering	<input type="checkbox"/> RRBR	Railroad Bridge Design
<input type="checkbox"/> BRLR	Bridge Load Rating Analysis	<input type="checkbox"/> RECI	Reconnaissance/Intensive Level Survey
<input type="checkbox"/> BRPT	Bridge Painting Inspection	<input type="checkbox"/> REME	Remediation
<input type="checkbox"/> BRSI	Bridge Safety Inspections	<input type="checkbox"/> REMU	Removal of Underground Storage Tanks
<input type="checkbox"/> BLDM	Building and Structure Design	<input type="checkbox"/> ROWS	Right of Way Surveys
<input type="checkbox"/> CPPV	Capital Preventive Maintenance	<input type="checkbox"/> RDSI	Road and Street Design
<input type="checkbox"/> CMBR	Complex Bridge Design	<input type="checkbox"/> RDCE	Road Construction Engineering
<input type="checkbox"/> CMUR	Complex Urban Freeway Design	<input type="checkbox"/> RDDS	Road Design Surveys
<input type="checkbox"/> CNST	Construction Staking	<input type="checkbox"/> RDRU	Rightway Rehabilitation & Rural Freeways
<input type="checkbox"/> CDEN	Density Inspection and Testing Services	<input type="checkbox"/> SFTY	Safety Studies
<input type="checkbox"/> ENGA	Engineering Assistance	<input type="checkbox"/> SHMD	Short & Medium Span Bridges
<input type="checkbox"/> EISS	Environmental Assessment and Impact Statements – Surface Trans.	<input type="checkbox"/> STEI	Site Investigation
<input type="checkbox"/> FWLG	Freeway Lighting	<input type="checkbox"/> SPWL	Specialty Walls/Slopes Design
<input type="checkbox"/> GCLT	Geodetic Control and Leveling	<input type="checkbox"/> STRU	Structure Surveys
<input type="checkbox"/> GIS	Geographic Information Systems	<input type="checkbox"/> SUBU	Subsurface Utility Engineering
<input type="checkbox"/> GEOT	Geotechnical Engineering Services	<input type="checkbox"/> TECA	Technical Assistance
<input type="checkbox"/> HSTA	Historic Archaeology	<input type="checkbox"/> TSIN	Traffic & Safety Inspection Services
<input type="checkbox"/> HYDV	Hydraulic Surveys	<input type="checkbox"/> TRAG	Traffic Capacity Analysis and Geometric Studies
<input type="checkbox"/> HYDT	Hydraulics	<input type="checkbox"/> TRSG	Traffic Signal Design
<input type="checkbox"/> IISR	Intelligent Transportation Systems (ITS) Research/Eval/Design/Studies	<input type="checkbox"/> TRSF	Traffic Signal Operations Simple
<input type="checkbox"/> LDNA	Landscape Architecture	<input type="checkbox"/> TRSO	Traffic Signal Operations Complex
<input type="checkbox"/> MTRR	Maintaining Traffic Plans and Provisions	<input type="checkbox"/> UBRI	Underwater Bridge Inspection
<input type="checkbox"/> MVSP	Movable Span Bridge Design	<input type="checkbox"/> UCGO	Utility Coordination
<input type="checkbox"/> MUNU	Municipal Utilities Design	<input type="checkbox"/> VALT	Value Engineering
<input type="checkbox"/> NOIS	Noise Assessment/Abatement	<input type="checkbox"/> WETL	Wetland Assessment
<input type="checkbox"/> OEDA	Outdoor Advertising	<input type="checkbox"/> WTDS	Wetland Design
<input type="checkbox"/> PVMA	Pavement Marking Plans	<input type="checkbox"/> WILD	Wildlife and Endangered Species Assessment
<input type="checkbox"/> TRSS	Permanent Freeway Traffic Signing Plans		
<input type="checkbox"/> TNFT	Permanent Non-Freeway Traffic Signing Plans		

Certification will not be granted in these categories without the applicant first obtaining MDOCT prequalification. Please contact:

Michigan Department of Transportation
 Contract Services Division - Service Prequalification
 P.O. Box 30050
 Lansing, MI 48906
 (517) 373-4402

SUPPLIERS

(Note: Suppliers are designated as manufacturers, regular dealers, or brokers. Refer to the DPE Program Procedures Manual or 49 CFR § 26.55 for definitions.)

<input type="checkbox"/>	TA. Geotextile Fabrics	<input type="checkbox"/>	TM. Landscaping Products, Nursery Stock, Seed & Sod, Mulch, Fertilizers, Erosion Control Products
<input type="checkbox"/>	TAM. Manufacturer	<input type="checkbox"/>	TMM. Manufacturer
<input type="checkbox"/>	TAR. Regular dealer	<input type="checkbox"/>	TMR. Regular dealer
<input type="checkbox"/>	TAB. Broker	<input type="checkbox"/>	TMB. Broker
<input type="checkbox"/>	TB. Asphalt & Petroleum Products	<input type="checkbox"/>	TN. Office Equipment
<input type="checkbox"/>	TBM. Manufacturer	<input type="checkbox"/>	TNM. Manufacturer
<input type="checkbox"/>	TBR. Regular dealer	<input type="checkbox"/>	TNR. Regular dealer
<input type="checkbox"/>	TBB. Broker	<input type="checkbox"/>	TNB. Broker
<input type="checkbox"/>	TC. Bus & Automotive Parts	<input type="checkbox"/>	TO. Office Supplies
<input type="checkbox"/>	TCM. Manufacturer	<input type="checkbox"/>	TOM. Manufacturer
<input type="checkbox"/>	TCR. Regular dealer	<input type="checkbox"/>	TOR. Regular dealer
<input type="checkbox"/>	TCB. Broker	<input type="checkbox"/>	TOB. Broker
<input type="checkbox"/>	TD. Construction Wood Products	<input type="checkbox"/>	TP. Paint, Tape, & Other Construction Marking Materials.
<input type="checkbox"/>	TDM. Manufacturer	<input type="checkbox"/>	TP1. Structures
<input type="checkbox"/>	TDR. Regular dealer	<input type="checkbox"/>	TP1M. Manufacturer
<input type="checkbox"/>	TDB. Broker	<input type="checkbox"/>	TP1R. Regular dealer
<input type="checkbox"/>	TE. Construction Epoxy, Sealants & Other Coatings	<input type="checkbox"/>	TP1B. Broker
<input type="checkbox"/>	TEM. Manufacturer	<input type="checkbox"/>	TP2. Pavements
<input type="checkbox"/>	TER. Regular dealer	<input type="checkbox"/>	TP2M. Manufacturer
<input type="checkbox"/>	TEB. Broker	<input type="checkbox"/>	TP2R. Regular dealer
<input type="checkbox"/>	TF. Concrete & Concrete Products	<input type="checkbox"/>	TP2B. Broker
<input type="checkbox"/>	TF1M. Concrete Manufacturer	<input type="checkbox"/>	TP3. Building - Interior/Exteriors
<input type="checkbox"/>	TF2. Concrete Additives & Treatments	<input type="checkbox"/>	TP3M. Manufacturer
<input type="checkbox"/>	TF2M. Manufacturer	<input type="checkbox"/>	TP3R. Regular dealer
<input type="checkbox"/>	TF2R. Regular dealer	<input type="checkbox"/>	TP3B. Broker
<input type="checkbox"/>	TF2B. Broker	<input type="checkbox"/>	TR. Plastic & Foam Construction Products
<input type="checkbox"/>	TF3. Brick, Block, Pipe & Other Structures	<input type="checkbox"/>	TRM. Manufacturer
<input type="checkbox"/>	TF3R. Regular Dealer	<input type="checkbox"/>	TRR. Regular dealer
<input type="checkbox"/>	TF3B. Broker	<input type="checkbox"/>	TRE. Broker
<input type="checkbox"/>	TG. Electrical Materials	<input type="checkbox"/>	TS. Railroad Equipment & Supplies
<input type="checkbox"/>	TGM. Manufacturer	<input type="checkbox"/>	TSM. Manufacturer
<input type="checkbox"/>	TGR. Regular dealer	<input type="checkbox"/>	TSR. Regular dealer
<input type="checkbox"/>	TGB. Broker	<input type="checkbox"/>	TSB. Broker
<input type="checkbox"/>	TH. Fence	<input type="checkbox"/>	TV. Road Signs, Markers & Barricades
<input type="checkbox"/>	THM. Manufacturer	<input type="checkbox"/>	TVM. Manufacturer
<input type="checkbox"/>	THR. Regular dealer	<input type="checkbox"/>	TVR. Regular dealer
<input type="checkbox"/>	THB. Broker	<input type="checkbox"/>	TVB. Broker
<input type="checkbox"/>	TI. Aggregates	<input type="checkbox"/>	TW. Steel Products
<input type="checkbox"/>	TIM. Manufacturers/Producers	<input type="checkbox"/>	TWM. Manufacturer
<input type="checkbox"/>	TIR. Regular dealer	<input type="checkbox"/>	TWR. Regular dealer
<input type="checkbox"/>	TIB. Broker	<input type="checkbox"/>	TWB. Broker
<input type="checkbox"/>	TJ. Guard rail & Related Products	<input type="checkbox"/>	TY. Vending Machines
<input type="checkbox"/>	TJM. Manufacturer	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	TJR. Regular dealer	<input type="checkbox"/>	Airport Transit
<input type="checkbox"/>	TJB. Broker	<input type="checkbox"/>	
<input type="checkbox"/>	TK. Hardware & Tools	<input type="checkbox"/>	TYM. Manufacturer
<input type="checkbox"/>	TKM. Manufacturer	<input type="checkbox"/>	TYR. Regular dealer
<input type="checkbox"/>	TKR. Regular dealer	<input type="checkbox"/>	TYB. Broker
<input type="checkbox"/>	TKB. Broker		
<input type="checkbox"/>	TL. Janitorial Products		
<input type="checkbox"/>	TLM. Manufacturer		
<input type="checkbox"/>	TLR. Regular dealer		
<input type="checkbox"/>	TLB. Broker		

EMPLOYER		JOB TITLE	
STREET ADDRESS		CITY	STATE ZIP CODE
DATES OF EMPLOYMENT	SUPERVISOR'S NAME		AVERAGE HOURS PER WEEK

DESCRIPTION OF YOUR DUTIES

EMPLOYER		JOB TITLE	
STREET ADDRESS		CITY	STATE ZIP CODE
DATES OF EMPLOYMENT	SUPERVISOR'S NAME		AVERAGE HOURS PER WEEK

DESCRIPTION OF YOUR DUTIES

LIST ANY ADDITIONAL EXPERIENCE/INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION:

CERTIFICATION: I certify that all information on this and all attached pages is true, correct, and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. RESUME ATTACHED? YES NO

SIGNATURE	SOCIAL SECURITY NO.	DATE
-----------	---------------------	------

APPLICANTS FOR SUPPLY WORK CLASSIFICATIONS MUST ALSO COMPLETE THE FOLLOWING

1) What is your company's relationship to this product or material? Check all that apply.
 Manufacturer Regular Dealer Broker

2) If the company manufactures or substantially alters the product/material, please explain:

3) Do you maintain an inventory of this product or material? If yes, provide a list showing your current inventory.
 Yes No

4) Where do you store your inventory?

5) In this space, (check areas that apply)
 Owned Leased/leased
 Other
 • Provide proof of ownership, lease/rental or evidence of other arrangements.

6) List the amount of your sales from this product/material for each of the last three years:

YEAR	AMOUNT OF SALES

7) List your company's top three customers for this product/material for the last three years:

YEAR	CUSTOMER 1	CUSTOMER 2	CUSTOMER 3

8) For this product/material, list suppliers and materials they supply. Attach additional sheets if necessary.

9) Does your company deliver these products/materials with it's own equipment? Yes No

10) If not listed previously, list equipment owned or leased by your company to deliver products/materials to customers.

AUTHORIZED SIGNATURE	DATE
----------------------	------

DBE UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST

In order to complete your application for DBE certification, you must attach copies of all of the following documents as they apply to you and your firm.

All Applicants

- Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- Personal Financial Statement (form available with this application)
Personal tax returns for the past three years, if applicable, for each owner claiming disadvantaged status
- Your firm's tax returns (gross receipts) and all related schedules for the past three years
- Documented proof of contributions used to acquire ownership for each owner (e.g. both sides of cancelled checks)
- Your firm's signed loan agreements, security agreements, and bonding forms
- Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- List of equipment leased and signed lease agreements
- List of construction equipment and/or vehicles owned and titles/proof of ownership
- Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- Year-end balance sheets and income statements for the past three years (or life of firm, if less than three years); a new business must provide a current balance sheet
- All relevant licenses, license renewal forms, permits, and haul authority forms
- DBE and SBA 8(a) or SDB certifications, denials, and/or decertifications, if applicable
- Bank authorization and signatory cards
- Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- Trust agreements held by any owner claiming disadvantaged status, if any

Partnership or Joint Venture

- Original and any amended Partnership or Joint Venture Agreements

Corporation or LLC

- Official Articles of Incorporation (signed by the state official)
- Both sides of all corporate stock certificates and your firm's stock transfer ledger
- Shareholders' Agreement
- Minutes of all stockholders and board of directors meetings
- Corporate by-laws and any amendments
- Corporate bank resolution and bank signature cards
- Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

Trucking Company

- Documented proof of ownership of the company
- Insurance agreements for each truck owned or operated by your firm
- Title(s) and registration certificate(s) for each truck owned or operated by your firm
- List of U.S. DOT numbers for each truck owned or operated by your firm

Regular Dealer

- Proof of warehouse ownership or lease
- List of product lines carried
- List of distribution equipment owned and/or leased

NOTE: The specific state UCP to which you are applying may have additional required documents that you must also supply with your application. Contact the appropriate certifying agency to which you are applying to find out if more is required.

Michigan Department of Transportation Office of Business Development

Ann Williams, DBE/Outreach & Recruitment Specialist
Business Development & Services
Phone: 248-967-0570 ext 211
E-mail: Williamsa3@michigan.gov

Lansing
Toll Free: 1-866-323-1264

Oak Park
Toll Free: 1-866-323-4009

Additional Resources

Construction Prequalification Application

Pauline Bouck
517-335-4281



Service (Consultant) Prequalification Application

Mike Meddaugh
517-335-5905



Plans and Proposals

Kalene Curtis
517-373-2341

Bid Process

Dee Grover
517-335-4442

MDOT Main Web Site: www.michigan.gov/mdot

DBE Web Site: www.michigan.gov/mdotdbe

Disadvantaged Business Enterprise (DBE)

Michigan Unified Certification Program (MUCP) Application

To Access: <http://www.michigan.gov/mdotdbe> then click on:

1. How to Become DBE Certified
2. Download Forms
3. Then Download MDOT DBE Application, Program Procedures Manual and 49CFR Part 26 Federal DBE Program Regulations

MUCP DBE Directory

To Access: <http://www.michigan.gov/mdotdbe> then click on:

1. Search MUCP DBE Directory for All Certified DBEs in Michigan
2. Then Search by Specific Criteria or Click on "View Helpful Search Tips" for Additional Help and Information

Prime Contractor Directory

To Access: <http://www.michigan.gov/mdotdbe> then click on:

1. Search MDOT Prequalified Contractors
2. Then Choose All Prequalified Contractors or Prequalified Contractors