

Bid Submission Documents
Complete and Submit with Bids

Form 2003 – The Banks
Revised July 2008
(SUBMIT WITH BID/PROPOSAL)

The Banks – Phase 1 – Public Infrastructure Development Parking Garage and Street Grid SBE Subcontractor Utilization Plan Bid or Proposal Reference Number: _____
--

This Document Must Be Accurately Completed, Signed and Submitted with the Proposal or Bid

Contract Description:	Date Submitted:	
Contractor Name:	Total Contract Value \$:	Federal Tax ID (FTID) Number:

Contractor is certified for the Banks Project by the City of Cincinnati as an SBE and meets the SBE Participation Goals without using other SBEs Yes No

The above named Contractor proposes to use the services of the following listed firm(s) demonstrating sufficiency to meet or exceed the SBE participation goal. The contractor must list all SBEs, regardless of contract amount or type of service. Failure to complete this form with all the requested information (as indicated in each column) may cause a bid or proposal to be determined non-responsive.

Name/Address/City/State/Zip/Phone	Federal Tax ID #	Describe Exact Type of Work/Supplier	Subcontract Dollars	Subcontract/Supplier Percentage of Contractor's Total Bid Amount	FOR OFFICE USE ONLY (SBE CALCULATION)

The Contractor certifies that the above information is true to the best of its knowledge. The Contractor acknowledges and agrees that, if awarded the contract, the information provided on this Form 2003 shall be incorporated into the terms and conditions of the final contract between the Owner and the Contractor. Contractor acknowledges and agrees that any changes to the above information must be submitted in writing on the Substitution Form 2006 and approved in advance by the Owner.

CONTRACTOR REPRESENTATIVE (SIGNATURE): _____

PRINTED NAME: _____ **Title:** _____ **Date:** _____

If Additional Space is Needed, Please Use Copies of This Form.

The Banks – Phase 1 – Public Infrastructure Development Parking Garage and Street Grid

INSTRUCTIONS

Form 2003 SBE Subcontractor Utilization Plan

This form must be completed by all bidders and must be submitted with the bid. This form is designed to provide to the Owner the bidder's plan to utilize SBEs to meet or exceed the SBE participation goal.

Procurement Description: Indicate the Contract/Project title
Date Submitted: Indicate the date the form is submitted
Contractor Name: Indicate the Contractor's official name
Total Contract Value: Indicate the Contractor's total bid amount
Federal Tax ID (FTID) Number: Indicate the Contractor's Federal Tax Identification Number or Social Security Number

Contractor is certified for the Banks Project by the City of Cincinnati as an SBE and meets the SBE participation goals without using other SBEs – Circle Response - Yes or No

List the information of all SBEs that will be used to meet the goal regardless of amount of contract or type of service. Contractors, suppliers, and professional service providers must be listed.

Name/Address/City/State/Zip/Phone: Indicate the Subcontractor's full address information and phone number
Federal Tax ID #: Indicate the Subcontractor's Federal Tax Identification Number or Social Security Number
Describe Exact Type of Work/Supplier: Indicate description of work being provided by the Subcontractor/Supplier
Subcontract Dollars: Indicate subcontract amount
Subcontract/Supplier Percentage of Contractor's Total Bid Amount: Indicate the percentage of Contractor's total bid amount met by Subcontractor/Supplier
For Official Use Only (SBE Calculation): Leave Blank, For Office Use Only
Contractor Representative: Signature of Contractor Representative
Printed Name: Print Name of Contractor Representative
Title: Indicate job title of Contractor's authorized representative signing the form
Date: Indicate date form is signed