



**City of Cincinnati  
Department of Economic Inclusion**

**For use on ITBs, RFPs AND RFQs with SBE Subcontracting Goals**

Please be sure the following items are completed and included in your bid response for a bid with SBE subcontracting goals. Failure to submit all of the forms required below will result in a bid being deemed "Non-Responsive" by the Department:



**here**

<b>Form no.</b>	<b>Form Name/Description</b>	<b>Required?</b>	<b>Completed</b>
2003	Subcontractor Utilization Plan (complete multiple form 2003s if all subs cannot fit on one form)	YES	<input type="checkbox"/>
2004-1	Statement of Intent to Self-Perform (complete only if the bidder is a certified SBE with the City of Cincinnati and is requesting to count work that it will self-perform towards the subcontracting goal)	If Applicable	<input type="checkbox"/>
2007	Statement of Good Faith Efforts	If Applicable	<input type="checkbox"/>
2007-a	Outreach/good Faith Summary Sheet	If Applicable	<input type="checkbox"/>



## City of Cincinnati

### SMALL BUSINESS ENTERPRISE PROGRAM SUMMARY

The City of Cincinnati is committed to maximizing subcontracting opportunities for all qualified and available Small Business Enterprises (SBEs). The Small Business Enterprise Program applies to certain City-funded construction contracts.

There are two components of the Subcontracting Outreach Program:

- **SBE Subcontractor Participation:** This component requires bidders to make subcontracting opportunities available to small businesses certified in the City's SBE program at the minimum percentage stated in the bid invitation. To count towards the SBE participation goal, the SBE must be certified in the commodity code(s) that will be used on the project. A list of City-certified SBEs is available on the City's website at [www.cincinnati.diversitycompliance.com](http://www.cincinnati.diversitycompliance.com) (select "Certified Directory" from the navigation links) or from the Department of Economic Inclusion (DEI) at 805 Central Avenue, Suite 610 Cincinnati OH 45202.
- **Outreach/Good Faith Efforts.** The SBE subcontractor participation component. This component requires bidders to provide evidence of outreach effort made to SBEs.

To be eligible for an award of this project, the City will first determine whether any bidder meets the stated minimum percentage of SBE subcontractor participation. The percentage is clearly stated in the bid invitation. In the event that no bidder meets the minimum SBE subcontractor participation goal, the City will score bidders' Outreach/Good Faith Effort.

**In order to confirm achievement of Small Business Enterprise Program requirements the following items are included in the bid invitation and must be completed, signed and submitted in each bid; failure to complete these forms with all the pertinent- requested information may cause a bid to be determined as non-responsive for SBE review purposes:**

1. **Subcontractor Utilization Plan (Form 2003)**
2. **Subcontractor Approval Request (Form 2004)**

The following forms are included in the bid invitation for information purposes only and do not have to be completed or returned with the bid.

3. Form 2007 – Statement of Good Faith Efforts (if SBE goal not met)
4. Form 2007-a – Outreach/good Faith Summary Sheet (if SBE goal not met)
5. Form 2004-1 – Statement of Intent to Self-Perform (if applicable)
6. Form 2006 - Subcontractor Substitution Form: (must be submitted in advance for approval of any proposed change in subcontractors previously approved by DEI).

If you have any questions or need assistance in meeting these requirements, please feel free to contact the Department of Economic Inclusion at (513) 352-3144.

## MBE/WBE/SBE SUBCONTRACTOR UTILIZATION PLAN (FORM 2003)

(Include all proposed subcontractors, including both certified and non-certified)

Failure to complete the MBE/WBE/SBE Utilization Plan in its entirety could result in your bid being deemed non-responsive

### SECTION 1: Bidder/Respondent Information

A. Bid/Proposal Name: \_\_\_\_\_ B. Bid/Proposal Reference ID: \_\_\_\_\_

C. Bidder/Proposer Name: \_\_\_\_\_ D. Total Bid/Proposal Amount: \_\_\_\_\_

E. Primary Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### SECTION 2: Subcontractor Utilization Information

Subcontractor Name	SBE, SLBE, ELBE, MBE, WBE or N/A	Federal Tax ID	Detailed description of work to be performed or supplies to be provided	Subcontract Amount	(DEI Use Only) Subcontract % of Total	(For DEI Use Only) DEI Approved?

#### Reminders for completing your Subcontractor Utilization Plan:

- You must ensure that the firm is certified with the City of Cincinnati to perform the services or provide the supplies that you are proposing in your utilization plan at the time of the bid opening. You can confirm the services and supplies of City Certified firms through the public directory: <https://cincinnati.diversitycompliance.com/FrontEnd/SearchCertifiedDirectory.asp>
- Only 25% of the payment to a certified MBE/WBE supplier that is a wholesaler warehousing the goods supplied may be counted toward an MBE/WBE participation goal (CMC 324-27). **An MBE/WBE contractor that only supplies laborers for use and direction by the prime contractor is considered a supplier and only 25% of that payment can be counted towards the MBE/WBE participation goal.**
- A business enterprise that is certified as both an MBE and WBE (M/WBE) may be counted toward either the MBE contract participation goal or the WBE contract participation goal, but not towards both. The participation of an MWBE also may not be allocated partially to the MBE contract participation goal and partially to the WBE contract participation goal (C.M.C. 324-27(a)). The bidder must select the goal to which the business enterprise is to be counted.

**CITY OF CINCINNATI  
STATEMENT OF GOOD FAITH EFFORTS**

**Bid Number** \_\_\_\_\_

The signature of an authorized company representative below, certifies that we utilized the following methods to obtain the maximum practicable participation by small business enterprises on this project. Please indicate which methods you used by placing an **X** in the appropriate place.

**YOU MUST SUBMIT YOUR SUPPORTING DOCUMENTATION WITH YOUR BID. NEW INFORMATION WILL NOT BE ACCEPTED AFTER THE BID CLOSING DATE.**

**Minimum score required to establish “good faith” effort is 50 points.**

- |                          |   |                  |
|--------------------------|---|------------------|
| <input type="checkbox"/> | Identified sufficient subcontracting work to meet goal (attach content of advertisements and written notices to subcontractors indicating type of work to be subcontracted).  | <b>10 Points</b> |
| <input type="checkbox"/> | Written Notice to Subcontractors (submit copy of each letter sent, or if one master notification, submit copy of letter and recipient list).  | <b>15 Points</b> |
| <input type="checkbox"/> | Follow-up to initial solicitations (submit copy of call logs).  | <b>20 Points</b> |
| <input type="checkbox"/> | Advertising (attach content of advertisements, which must include project name, bidder, work available, contact person’s name and number, information on availability of plans and specifications and bidder’s policy concerning assistance to subcontractors in obtaining bonds, credit lines and/or insurance; date of advertising and publications). | <b>15 Points</b> |
| <input type="checkbox"/> | Assistance with bonds, credit lines, insurance (submit copy of advertising and written notices to subcontractors).  | <b>30 Points</b> |
| <input type="checkbox"/> | Provision of plans, specifications and requirements: Bidder provided interested sub-bidders with access to plans, specifications and requirements for subject project.  | <b>5 points</b>  |
| <input type="checkbox"/> | Other (please list any other methods utilized that aren’t covered above).   | <b>5 Points</b>  |
|                          | _____   |                  |
|                          | _____   |                  |
|                          | _____   |                  |

\_\_\_\_\_  
Company Date

\_\_\_\_\_  
Company Representative (Name and Title)



**CITY OF CINCINNATI  
OUTREACH/GOOD FAITH SUMMARY SHEET  
Bid Reference No. \_\_\_\_\_**

**FORM 2007-a**  
Revised 4/7/2015  
**(SUBMIT WITH  
BID/PROPOSAL)**

<b>COMPANY NAME:</b>	<b>ADDRESS/TELEPHONE:</b> _____ / _____
<b>BID PACKAGE:</b>	<b>BID DATE:</b> _____

Name/Address	Type of Work/Service(s) Solicited	Indicate How Businesses Were Contacted (i.e. Letter, Phone, Fax)	Response To Solicitation (i.e. Will Submit Bid, No Response, Not Interested)	Company Representative	Telephone Number

Please list the name(s) of all firms contacted, and their responses to the above Bid package. If additional space is required, this form may be duplicated.

***I hereby certify that the above information is true and accurate.***

\_\_\_\_\_ Company Representative (Name/Title)

\_\_\_\_\_ Date



**City of Cincinnati**  
STATEMENT OF INTENT TO SELF-PERFORM

**FORM 2004-1 ALL**  
Revised 9/18/2017

**For MBE/WBE, SBE, or SLBE/ELBE Primes to be counted towards a subcontracting goal**

**Bid/Contract Reference No. \_\_\_\_\_**

**THIS FORM MUST BE COMPLETED AND SUBMITTED WITH YOUR BID OR PROPOSAL.  
INFORMATION RECORDED HEREIN WILL BE INCORPORATED IN THE AWARDEES' CONTRACT.**

PROJECT NAME			CONTRACT NO.		
<u>Contracts with MBE/WBE Goals:</u> Self- Performance to be counted toward the MBE _____ or WBE _____ goal. <i>(Check One)</i> <u>Contracts with SBE Goals:</u> Self- Performance to be counted toward the SBE _____ goal. <i>(Check One)</i> <u>Contracts with ELBE/SLBE Goals:</u> Self- Performance to be counted toward the ELBE _____ or SLBE _____ goal. <i>(Check One)</i>					
Requesting Contractor		Federal Tax ID	Address		Zip Code
Authorized Representative		Title		Phone No.	
Prime Contractor Rep for Payments		Title	Phone No.	Email	

ITEM NUMBER	DESCRIPTION OF WORK	SUBCONTRACT AMOUNT \$	% OF TOTAL CONTRACT PRICE	ESTIMATED START DATE	COMPLETION DATE
<b>Total Value of Work</b>					

**SIGNATURES**

Economic Inclusion Staff	DATE
Director of Economic Inclusion	DATE
Contract Administering Agency	DATE

**CITY OF CINCINNATI  
SUBCONTRACTOR SUBSTITUTION REQUEST  
Bid/Contract Reference No. \_\_\_\_\_**

THIS FORM MUST BE APPROVED BY THE DEPARTMENT OF ECONOMIC INCUSION PRIOR TO TERMINATING A CONTRACT WITH A MINORITY BUSINESS ENTERPRISE (MBE), WOMEN BUSINESS ENTERPRISE (WBE), SMALL BUSINESS ENTERPRISE (SBE), SMALL LOCAL BUSINESS ENTERPRISE (SLBE) OR EMERGING LOCAL BUSINESS ENTERPRISE (ELBE) AFTER THE BIDS OR PROPOSALS HAVE BEEN SUBMITTED OR CONTRACT HAS BEEN AWARDED. **CONTRACTOR MUST PROVIDE A WRITTEN EXPLANATION FOR THE SUBSTITUTION REQUEST.**

**Company Name:** \_\_\_\_\_ **Project Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Date Submitted** \_\_\_\_\_

\_\_\_\_\_ will be substituted for \_\_\_\_\_ to perform work on  
*(Name of Subcontractor/Supplier)* *(Name of Subcontractor/Supplier)*

or provide supplies for the above project. \_\_\_\_\_ will enter into a formal agreement for the work  
*(Subcontractor/Supplier)*

upon approval by the City of Cincinnati.

Is replacement company certified with the City of Cincinnati as an? (Check Applicable): MBE WBE SBE ELBE SLBE

**Attach a copy of the reason for substitution**

ITEM NUMBER	DESCRIPTION OF WORK	SUBCONTRACT AMOUNT	% OF TOTAL CONTRACT	START DATE	EST COMPLETION DATE
	<b>Total Value of Work</b>		%		

Prime/General Contractor: \_\_\_\_\_

Signature of Authorized Representative: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_ EIN#: \_\_\_\_\_

Replacement Subcontractor/Supplier: \_\_\_\_\_

Signature of Authorized Representative: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_ EIN#: \_\_\_\_\_

**DEI Staff Use: Debarment Check**

- Cincinnati List
- Ohio List
- Federal List

Debarment Review Comments:

Request is: Approved _____ Denied _____
_____ Date: _____
Authorized Signature: Economic Inclusion