

# Maryland Certified MBE Utilization and Fair Solicitation Affidavit

*(Submit with bid or offer)*

<b>Contract Number:</b>	<b>Contract Title:</b>
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This document **MUST** be included with the bid or offer. If the Bidder or Offeror fails to complete and submit this form with the bid or offer as required, the Procurement Officer shall deem the bid non-responsive or shall determine that the bid or offer is not reasonably susceptible of being selected for award.

In conjunction with the bid or offer submitted in response to the contract listed above, I affirm the following:

1. **Check One Box**

- I acknowledge and intend to meet the overall certified Minority Business Enterprise (MBE) participation goal of \_\_\_\_ percent and, if specified in the solicitation, sub goals of \_\_\_\_ percent for MBEs classified as African American-owned and \_\_\_\_ percent for MBEs classified as women-owned.

**OR**

- I conclude that I am unable to achieve the MBE participation goal and/or subgoals. I hereby request a waiver of the overall goal and/or subgoals. Within ten (10) business days of receiving notice that our firm is the apparent awardee, I will submit all required waiver documentation in accordance with COMAR 21.11.03.11.
2. I understand that if I am notified that I am the apparent awardee, I must submit the following additional documentation within ten (10) working days of receiving notice of the potential award or from the date of conditional award (per COMAR 21.11.03.10), whichever is earlier.
- (a) Outreach Efforts Compliance Statement (Form DPSCS OS 04 MBE)
  - (b) Subcontractor Project Participation Certification (Form DPSCS OS 03 MBE)
  - (c) Any other documentation, including waiver documentation, if applicable, required by the Procurement Officer to ascertain bidder or offeror responsibility in connection with the certified MBE participation goal.

This document shall be completed fully and accurately and shall be included with the bid. If the bidder fails to submit this document and the referenced forms with the bid as required, the procurement officer shall deem the offeror / bidder non-responsive.

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I understand that if I fail to return each completed document within the required time, the Procurement Officer may determine that I am not responsible and therefore not eligible for contract award. If the contract has already been awarded, the award is voidable.

3. In the solicitation of subcontract quotations or offers, MBE subcontractors were provided not less than the same information and amount of time to respond as were non-MBE subcontractors.
4. Set forth below are the (i) certified MBEs I intend to use, (ii) the work they are certified to perform with their own forces and (iii) the percentage of the total contract amount allocated to each MBE for this project.

Prime Contractor: (Firm Name, Address, Phone)	Contract Title:
Contract Number:	Total Contract Amount: \$

Minority Firm Name:	MBE Certification Number:
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
2. Minority Firm Name:	MBE Certification Number:
Only check if MBE is Dually Certified: <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	

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3. Minority Firm Name:            MBE Certification Number:	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
4. Minority Firm Name:            MBE Certification Number:	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
5. Minority Firm Name:            MBE Certification Number:	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
6. Minority Firm Name:            MBE Certification Number:	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	

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7. Minority Firm Name: _____ MBE Certification Number: _____	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
8. Minority Firm Name: _____ MBE Certification Number: _____	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
9. Minority Firm Name: _____ MBE Certification Number: _____	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	
10. Minority Firm Name: _____ MBE Certification Number: _____	
Only check if MBE is Dually Certified : <i>(For purposes of MBE sub-goal attainment)</i>	
<input type="checkbox"/> African American Owned	<input type="checkbox"/> Woman-Owned
Specific Work to be Performed:	
Federal Employer Identification Number:	
MBE Phone Number:	MBE Email:
Percentage of Total Contract:	

Continue on a separate page, if needed.

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**MBE Participation Summary**

Total African-American MBE Participation: \_\_\_\_\_ %  
 Total Woman-Owned MBE Participation: \_\_\_\_\_ %  
 Total MBE Participation: \_\_\_\_\_ %

I solemnly affirm under the penalties of perjury that the contents of this paper are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
 Bidder/Offeror Name  
 (PLEASE PRINT OR TYPE)

\_\_\_\_\_  
 Signature of Affiant

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Email: \_\_\_\_\_

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(DPSCS Official Use Only)		(DPSCS Official Use Only)
SIGNATURE – DPSCS MBE OFFICE	DATE	APPROVED: <input type="checkbox"/> YES <input type="checkbox"/> NO