CERTIFICATION OF DBE ACCOMPLISHMENT

(To be completed by the Prime Contractor and submitted with the final documents, for all Federal-Aid contracts.) County: ___ Letting Date: Contract I.D.: Prime Contractor: _____ Total DBE Commitment Listed on Form 102115: *For Suppliers Only Dollar % For Dollars Dollars Committed Amount Goal Credit **DBE** Companies (102115 Form) (1) Paid (100% or *60%) To DBE Goal \$ \$ % \$ \$ % \$ \$ % \$ \$ \$ \$ % \$ \$ % \$ \$ % \$ \$ \$ \$ \$ \$ TOTAL (1) If no DBE goal was established for the contract, enter \$0 the (Corporate Officer) Certify the DBE accomplishment to be (Prime Contractor) true and accurate. It is understood that the accompli shment will be compared to the commitment and may result in a penalty in accordance with Article 1102.17 of the Standard Specifications. (Signature) (Date) Form 102115 Commitment (1) Approved Adjustments Revised 102115 Commitment Contractor Accomplishment ** Reduction in Prime Contractor Payment * Locally Paid Projects Only* Federal Dollars in Contract: ** Please include a copy of change order for any reduction in Prime Contractor Payment. I have monitored the work performed by the DBE and certify that the work performed was done by the DBE listed above as required by Article 1102.17 F and G of the Standard Specifications. (Project Engineer) (Office)

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