

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
ANTICIPATED DBE PARTICIPATION ('ADBEPS') STATEMENT

275-030-11A
 EQUAL OPPORTUNITY OFFICE
 03/11

1. FINANCIAL PROJECT NO.	2. FAP NO.	3. CONTRACT NO.	4. COUNTY(IES)	5. DISTRICT	
6. PRIME CONTRACTOR NAME			7. PRIME'S FEID NUMBER		
8. CONTRACT DOLLAR AMOUNT			9. ADBEPS REVISION? <input type="checkbox"/> NO <input type="checkbox"/> YES IF YES, REVISION NUMBER: _____		
10. IS THE PRIME CONTRACTOR A FLORIDA CERTIFIED "DBE"? (Disadvantaged Business Enterprise)		<input type="checkbox"/> NO <input type="checkbox"/> YES	11. IS THE WORK OF THIS CONTRACT <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> MAINTENANCE <input type="checkbox"/> OTHER		
12. ANTICIPATED DBE SUBCONTRACTS:					
DBE SUBCONTRACTOR or SUPPLIER COMPANY NAME AND FEID NUMBER		TYPE OF WORK AND FDOT SPECIALTY CODE(S)	DOLLAR AMOUNT	PERCENT OF CONTRACT DOLLARS	
A	NAME: FEID:	WORK: SPEC CODE:			
B	NAME: FEID:	WORK: SPEC CODE:			
C	NAME: FEID:	WORK: SPEC CODE:			
D	NAME: FEID:	WORK: SPEC CODE:			
E	NAME: FEID:	WORK: SPEC CODE:			
			12F TOTAL DOLLARS TO DBE'S	12G TOTAL PERCENT OF CONTRACT	
			\$0.00	0.00%	

13. SUBMITTED BY		14. DATE	15. TITLE OF SUBMITTER	
16. EMAIL ADDRESS OF SUBMITTER		17. FAX NUMBER	18. PHONE NUMBER	

NOTE: THIS INFORMATION IS USED TO TRACK AND REPORT ANTICIPATED DBE PARTICIPATION IN ALL STATE AND FEDERALLY FUNDED FDOT CONTRACTS. THE ANTICIPATED DBE AMOUNT IS VOLUNTARY AND WILL NOT BECOME A PART OF THE CONTRACTUAL TERMS. THIS FORM MUST BE SUBMITTED AT THE PRE CONSTRUCTION OR PRE WORK CONFERENCE. FDOT STAFF FORWARDS THE FORM TO THE EQUAL OPPORTUNITY OFFICE.

THE FOLLOWING SECTIONS ARE FOR FDOT USE					
DIST	19. PROCESSED BY	20. DATE TO EO OFFICE	21. LETTING DATE	22. EXECUTED DATE	23. PRECON CONF DATE
	24. SUBMITTED TO EO BY		<input type="checkbox"/> FAX <input type="checkbox"/> EMAIL <input type="checkbox"/> SHARED FOLDER		
EO OFFICE	25. INCLUDED IN DBE PARTICIPATION REPORT OF (M/D/Y)				