

FINAL REPORT - UTILIZATION OF UNDERUTILIZED/DISADVANTAGED BUSINESS ENTERPRISES (U/DBE) AND SMALL BUSINESS (SB), FIRST-TIER SUBCONTRACTORS

Contract No.	County	Location	Project Description			Federal Aid Project No.	Administering Agency		Contract Completion Date					
Task/Job Order No.								Task/Job Order Completion Date						
Prime Consultant/Contractor (Company Name)	Prime Consultant/Contractor Business Address			Business Ownership by Minority Code						Final Contract or Task/Job Order Amount \$				
	Address: City, State, Zip Code:			BA - Black American	NA - Native American	APA - Asian Pacific American								
						W - Woman	HA - Hispanic American	SCA - Subcontinent Asian American		Federal Share \$				
SUBCONTRACTOR	CERTIFICATE		CONTRACT/TASK/JOB ORDER PAYMENTS											
	SB Cert #	DBE Cert #	TOTAL PAYMENTS			TOTAL PAYMENTS BY MINORITY GROUP						Date Work Complete	Date of Final Payment	Description of Work Performed & Material Provided
Name _____			SB*	DBE*	UDBE* (FTA Only)	APA	BA (UDBE)	HA (UDBE)	NA (UDBE)	SCA (UDBE)	W (UDBE)			
Address _____														
Name _____														
Address _____														
Name _____														
Address _____														
Name _____														
Address _____														
Name _____														
Address _____														
			Total Payments	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	DBE Goal Attainment	0%	
Original UDBE/DBE/SB Commitment												UDBE Goal Attainment	0%	
												SB Participation	0%	

*If Sub is both SB, DBE & UDBE enter the total dollar amount in all three fields

The decision of which column to be used for entering the UDBE/DBE dollar value is based on what program(s) the firm is certified. This program status is determined by the Caltrans Civil Rights Certification Unit based on ethnicity, gender, ownership, and control issues at time of certification. DBE program status may be obtained by accessing the Civil Rights website DBE, SWBE DBE, SMBE, SWBE (www.dot.ca.gov/hq/bep/) and downloading the Calcert Extract or by calling (916) 227-2207.

List all first-tier subconsultants, SB, DBEs, and Underutilized DBEs, regardless of tier, whether or not the firms were originally listed for goal credit. If actual U/DBE utilization (or item of work) was different than that approved at time of award, provide comments on a separate page. List actual amount paid to each entity.

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
CONSULTANT REPRESENTATIVE NAME	BUSINESS PHONE NUMBER	DATE
TO THE BEST OF MY KNOWLEDGE THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
SRTA PROJECT MANAGER'S NAME	BUSINESS PHONE NUMBER	DATE

INSTRUCTIONS

Final Report – Utilization of Underutilized/Disadvantaged Business Enterprise (U/DBE) and Small Business, First-Tier Subcontractors

The form requires information from the SRTA contract.

CONTRACT INFORMATION

The Contract/Task/Job Order fields are shown in green in the example.

Enter the following information:

- Contract No.:** SRTA contract number
- County:** County in which work was performed
- Location:** Location in which work was performed
- Project Description:** Provide a brief description of the project (project title)
- Federal Aid Project No.:** Contact CFO if unknown
- Administering Agency:** SRTA
- Contract Completion Date:** As applicable
- Final Contract Amount \$:** Inclusive of all amendments/change orders
- Federal Share \$:** Contact CFO, if unknown

The screenshot shows the top portion of the SRTA report form. The fields for Contract No., County, Location, Project Description, Federal Aid Project No., Administering Agency, and Contract Completion Date are highlighted in green. Below these are sections for Business Ownership by Minority Code and a table for Subcontractor information.

PRIME CONSULTANT/CONTRACTOR INFORMATION

The Prime Consultant/Contractor fields are shown in blue in the example.

Enter the following information:

- Prime Consultant/Contract:** Prime company name
- Business Address:** Address, City, State, & Zip Code
- Business Ownership by Minority Code:** If applicable. This section is used to determine if the prime contractor belongs to a minority group.

The screenshot shows the same SRTA report form, but the fields for Prime Consultant/Contract, Business Address, and Business Ownership by Minority Code are highlighted in blue.

SUBCONTRACTOR/SUBCONSULTANT INFORMATION

The Prime Consultant/Contractor fields are shown in purple in the example.

Enter the following information:

Subcontractor

The screenshot shows the same SRTA report form, but the Subcontractor table and its associated fields are highlighted in purple.

Name: Subcontractor/Subconsultant company name

Address: Subcontractor/Subconsultant Address, City, State, & Zip Code

Original UDBE/DBE/SB Commitment: Commitment and not advertised goal percentage.

Certificate

SB Cert #: Small Business Certification number, if applicable

DBE Cert #: DBE Certification number, if applicable.

Total Payments

Enter the total payments for each subcontractor in the SB, DBE, and/or UDBE fields. If a subcontractor is more than one (1), i.e., SB and DBE or SBE, DBE and UDBE, enter the amount in each field.

SB: Total payments to this Subcontractor/Subconsultant, if they are a certified Small Business

DBE: Total payments to this Subcontractor/Subconsultant, if they are a certified DBE

UDBE: Total payments to this Subcontractor/Subconsultant, if they are a certified DBE and belong to one of the following minority groups: Black American, Hispanic American, Native American, Subcontinent Asian America, Women. ***This is for FTA-funded Contracts/Task/Job Orders only.***

Total Payments By Minority Group

[Enter the total payments for each subcontractor by Minority Group. The decision of which column to be used for entering the total payments by minority group is based on their business' ownership, ethnicity, gender, and control issues at time of certification DBE certification. To confirm a subcontractor's DBE certification, access the CUCP database at: <https://dot.ca.gov/programs/civil-rights/dbe-search> or call \(916\) 324-1700.](#)

APA: Asian Pacific American

BA: Black American

HA: Hispanic American

NA: Native American

SCA: Subcontinent Asian American

W: Women

Note: If a contractor performing work as a DBE on the project becomes decertified and still performs work after their decertification date, enter the total dollar value performed by this contractor under the appropriate DBE identification column.

Note: If a contractor performing work as a non-DBE on the project becomes certified as a DBE, enter the dollar value of all work performed after certification as a DBE under the appropriate identification column.

Work

Enter the following information regarding the work for each subcontractor:

Date Work Complete: The date the subcontractor’s work was finished

Date of Final Payment: The date the final check was sent to the subcontractor

Description of Work Performed & Material Provided: Description of services/materials provided.

Finalizing

The Totals fields are shown in orange in the example

- The totals payments will be automatically calculated as data is entered.
- The DBE Goal Attainment, UDBE Goal Attainment, and SB Participation fields will be automatically calculated as data is entered.

The Authorization fields are shown in red in the example.

Consultant Representative Name: Enter the name of the Prime Contractor/Consultant representative.

Business Phone Number: Enter the phone number of the Prime Contractor/Consultant representative

Date: Enter the date the form was completed and verified.

The image shows a form titled "FINAL REPORT - CERTIFICATION OF UNDERUTILIZED/UNAWARDED BUSINESS ENTERPRISES (DBE) AND SMALL BUSINESS (SBE) FIRM-TIER SUBCONTRACTORS". The form includes fields for Contract No., County, Location, Project Description, Federal Aid Project No., and Administering Agency. It also has sections for Prime Contractor/Consultant information and Business Ownership by Minority/Disability. The main part of the form is a table with columns for Subcontractor Name, DBE Goal, UDBE Goal, SBE, DBE, UDBE, SBE, and various identification codes (A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z). The table is mostly empty, with orange shading under the Totals Payments row. At the bottom, there are red-shaded fields for Consultant Representative Name, Business Phone Number, and Date, along with checkboxes for UDBE Goal Attainment, UDBE Goal Attainment, and SB Participation.

FINAL REPORT - UTILIZATION OF UNDERUTILIZED/DISADVANTAGED BUSINESS ENTERPRISES (U/DBE) AND SMALL BUSINESS (SB), FIRST-TIER SUBCONTRACTORS

Contract No.	County	Location	Project Description			Federal Aid Project No.	Administering Agency		Contract Completion Date					
Task/Job Order No.											Task/Job Order Completion Date			
Prime Consultant/Contractor (Company Name)	Prime Consultant/Contractor Business Address Address: City, State, Zip Code:			Business Ownership by Minority Code						Final Contract or Task/Job Order Amount \$				
				BA - Black American		NA - Native American		APA - Asian Pacific American						
			W - Woman		HA - Hispanic American		SCA - Subcontinent Asian American		Federal Share \$					
			CONTRACT/TASK/JOB ORDER PAYMENTS											
SUBCONTRACTOR	CERTIFICATE		TOTAL PAYMENTS			TOTAL PAYMENTS BY MINORITY GROUP						Date Work Complete	Date of Final Payment	Description of Work Performed & Material Provided
	SB Cert #	DBE Cert #	SB*	DBE*	UDBE* (FTA Only)	APA	BA (UDBE)	HA (UDBE)	NA (UDBE)	SCA (UDBE)	W (UDBE)			
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
			Total Payments	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			

\$ -
Original UDBE/DBE/SB Commitment

*If Sub is both SB, DBE & UDBE enter the total dollar amount in all three fields

DBE Goal Attainment 0%
UDBE Goal Attainment 0%
SB Participation 0%

The decision of which column to be used for entering the UDBE/DBE dollar value is based on what program(s) the firm is certified. This program status is determined by the Caltrans Civil Rights Certification Unit based on ethnicity, gender, ownership, and control issues at time of certification. DBE program status may be obtained by accessing the Civil Rights website DBE, SWBE DBE, SMBE, SWBE (www.dot.ca.gov/hq/bep/) and downloading the Calcert Extract or by calling (916) 227-2207.

List all first-tier subconsultants, SB, DBEs, and Underutilized DBEs, regardless of tier, whether or not the firms were originally listed for goal credit. If actual U/DBE utilization (or item of work) was different than that approved at time of award, provide comments on a separate page. List actual amount paid to each entity.

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
CONSULTANT REPRESENTATIVE NAME	BUSINESS PHONE NUMBER	DATE
TO THE BEST OF MY KNOWLEDGE THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
SRTA PROJECT MANAGER'S NAME	BUSINESS PHONE NUMBER	DATE

FINAL REPORT - UTILIZATION OF UNDERUTILIZED/DISADVANTAGED BUSINESS ENTERPRISES (U/DBE) AND SMALL BUSINESS (SB), FIRST-TIER SUBCONTRACTORS

Contract No.	County	Location	Project Description				Federal Aid Project No.			Administering Agency		Contract Completion Date		
Task/Job Order No.												Task/Job Order Completion Date		
Prime Consultant/Contractor (Company Name)	Prime Consultant/Contractor Business Address Address: City, State, Zip Code:				Business Ownership by Minority Code						Final Contract or Task/Job Order Amount \$			
					BA - Black American	NA - Native American	APA - Asian Pacific American							
						W - Woman	HA - Hispanic American	SCA - Subcontinent Asian American			Federal Share \$			
SUBCONTRACTOR	CONTRACT/TASK/JOB ORDER PAYMENTS													
	CERTIFICATE		TOTAL PAYMENTS			TOTAL PAYMENTS BY MINORITY GROUP						Date Work Complete	Date of Final Payment	Description of Work Performed & Material Provided
SB Cert #	DBE Cert #	SB*	DBE*	UDBE* (FTA Only)	APA	BA (UDBE)	HA (UDBE)	NA (UDBE)	SCA (UDBE)	W (UDBE)				
Name _____														
Address _____														
Name _____														
Address _____														
Name _____														
Address _____														
Name _____														
Address _____														
Name _____														
Address _____														
\$ -		Total Payments		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	DBE Goal Attainment 0%		
Original UDBE/DBE/SB Commitment												UDBE Goal Attainment 0%		
												SB Participation 0%		

*If Sub is both SB, DBE & UDBE enter the total dollar amount in all three fields

The decision of which column to be used for entering the UDBE/DBE dollar value is based on what program(s) the firm is certified. This program status is determined by the Caltrans Civil Rights Certification Unit based on ethnicity, gender, ownership, and control issues at time of certification. DBE program status may be obtained by accessing the Civil Rights website DBE, SWBE DBE, SMBE, SWBE (www.dot.ca.gov/hq/bep/) and downloading the Calcert Extract or by calling (916) 227-2207.

List all first-tier subconsultants, SB, DBEs, and Underutilized DBEs, regardless of tier, whether or not the firms were originally listed for goal credit. If actual U/DBE utilization (or item of work) was different than that approved at time of award, provide comments on a separate page. List actual amount paid to each entity.

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
CONSULTANT REPRESENTATIVE NAME	BUSINESS PHONE NUMBER	DATE
TO THE BEST OF MY KNOWLEDGE THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
SRTA PROJECT MANAGER'S NAME	BUSINESS PHONE NUMBER	DATE

FINAL REPORT - UTILIZATION OF UNDERUTILIZED/DISADVANTAGED BUSINESS ENTERPRISES (U/DBE) AND SMALL BUSINESS (SB), FIRST-TIER SUBCONTRACTORS

Contract No.	County	Location	Project Description	Federal Aid Project No.	Administering Agency	Contract Completion Date
Task/Job Order No.						Task/Job Order Completion Date
Prime Consultant/Contractor (Company Name)	Prime Consultant/Contractor Business Address		Business Ownership by Minority Code			Final Contract or Task/Job Order Amount \$
Address:			BA - Black American	NA - Native American	APA - Asian Pacific American	
City, State, Zip Code:			W - Woman	HA - Hispanic American	SCA - Subcontinent Asian American	Federal Share \$

SUBCONTRACTOR	CONTRACT/TASK/JOB ORDER PAYMENTS												Date Work Complete	Date of Final Payment	Description of Work Performed & Material Provided	
	CERTIFICATE		TOTAL PAYMENTS			TOTAL PAYMENTS BY MINORITY GROUP										
	SB Cert #	DBE Cert #	SB*	DBE*	UDBE* (FTA Only)	APA	BA (UDBE)	HA (UDBE)	NA (UDBE)	SCA (UDBE)	W (UDBE)					
Name _____ Address _____																
Name _____ Address _____																
Name _____ Address _____																
Name _____ Address _____																
Name _____ Address _____																
Name _____ Address _____																
Name _____ Address _____																

\$ -	Total Payments	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	DBE Goal Attainment	0%
Original UDBE/DBE/SB Commitment												UDBE Goal Attainment	0%
												SB Participation	0%

*If Sub is both SB, DBE & UDBE enter the total dollar amount in all three fields

The decision of which column to be used for entering the UDBE/DBE dollar value is based on what program(s) the firm is certified. This program status is determined by the Caltrans Civil Rights Certification Unit based on ethnicity, gender, ownership, and control issues at time of certification. DBE program status may be obtained by accessing the Civil Rights website DBE, SWBE DBE, SMBE, SWBE (www.dot.ca.gov/hq/bep/) and downloading the Calcert Extract or by calling (916) 227-2207.

List all first-tier subconsultants, SB, DBEs, and Underutilized DBEs, regardless of tier, whether or not the firms were originally listed for goal credit. If actual U/DBE utilization (or item of work) was different than that approved at time of award, provide comments on a separate page. List actual amount paid to each entity.

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
CONSULTANT REPRESENTATIVE NAME	BUSINESS PHONE NUMBER	DATE
TO THE BEST OF MY KNOWLEDGE THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
STRA PROJECT MANAGER'S NAME	BUSINESS PHONE NUMBER	DATE

Contract No.	County	Location	Project Description			Federal Aid Project No.	Administering Agency		Contract Completion Date					
Task/Job Order No.								Task/Job Order Completion Date						
Prime Consultant/Contractor (Company Name)	Prime Consultant/Contractor Business Address			Business Ownership by Minority Code						Final Contract or Task/Job Order Amount \$				
	Address: City, State, Zip Code:			BA - Black American	NA - Native American	APA - Asian Pacific American								
			W - Woman	HA - Hispanic American	SCA - Subcontinent Asian American		Federal Share \$							
SUBCONTRACTOR	CERTIFICATE		TOTAL PAYMENTS			TOTAL PAYMENTS BY MINORITY GROUP						Date Work Complete	Date of Final Payment	Description of Work Performed & Material Provided
	SB Cert #	DBE Cert #	SB*	DBE*	UDBE* (FTA Only)	APA	BA (UDBE)	HA (UDBE)	NA (UDBE)	SCA (UDBE)	W (UDBE)			
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
Name _____ Address _____														
			Total Payments	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	DBE Goal Attainment	0%	
Original UDBE/DBE/SB Commitment												UDBE Goal Attainment	0%	
												SB Participation	0%	

*If Sub is both SB, DBE & UDBE enter the total dollar amount in all three fields

The decision of which column to be used for entering the UDBE/DBE dollar value is based on what program(s) the firm is certified. This program status is determined by the Caltrans Civil Rights Certification Unit based on ethnicity, gender, ownership, and control issues at time of certification. DBE program status may be obtained by accessing the Civil Rights website DBE, SWBE DBE, SMBE, SWBE (www.dot.ca.gov/hq/bep/) and downloading the Calcert Extract or by calling (916) 227-2207.

List all first-tier subconsultants, SB, DBEs, and Underutilized DBEs, regardless of tier, whether or not the firms were originally listed for goal credit. If actual U/DBE utilization (or item of work) was different than that approved at time of award, provide comments on a separate page. List actual amount paid to each entity.

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
CONSULTANT REPRESENTATIVE NAME	BUSINESS PHONE NUMBER	DATE
TO THE BEST OF MY KNOWLEDGE THE ABOVE INFORMATION IS COMPLETE AND CORRECT		
SRTA PROJECT MANAGER'S NAME	BUSINESS PHONE NUMBER	DATE