## THE UNIVERSITY OF ALABAMA

Minority Business Enterprise Utilization Plan Disadvantaged Business Enterprise (DBE)

UA Project Name & Number:	Contractor Name:
Bid Date:	Address:
Contract Amount:	
Percent DBE Utilization Required:	Number of Non-DBE Contracts:
•	Total Amount of Non-DBE Contracts:

Disadvantaged Firm Name & Certification Number	Ethnicity & Gender	Mailing Address	Description of Work (IN DETAIL) Attach additional pages if needed	Materials or Work Items	Dollar Amount DBE
Name:					
DBE Number:					
Name:					
DBE Number:					
Name:					
DBE Number:					
Note: Use Multiple Pages if Necessary		Total Dollar Amount to DBE's \$			
		Required Dollar Amount of DBE Utilization \$			

I do hereby agree to commit this firm to use the certified DBE subcontractor(s) to perform the above described work in this contract. I also agree to credit only the value of work actually performed by the DBE towards the DBE goal as required in the DBE program and 49 CFR Part 26.

Signature of Company Official:

Date:

Name:	
Date:	

Name & Title of Company Official: