# ~ APPENDIX B-1 SMALL BUSINESS ENTERPRISE (SBE) PROGRAM

#### 1. SMALL BUSINESS ENTERPRISE (SBE) REQUIREMENT:

The SBE requirements of the Authority's DBE Program Plan apply to this contract. Accordingly, the Contractor shall carry out the requirements of the Authority's DBE Program Plan and this Appendix in the performance of this U.S. Department of Transportation (US DOT) assisted contract.

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#### 2. POLICY:

It is the policy of the Authority (WMATA), the Federal Transit Administration (FTA), and U.S.DOT to foster small business participation in federally funded contracts. In order to facilitate competition and maximize participation by small businesses, WMATA will assign small business participation within the established threshold on a contract-by-contract basis on USDOT assisted construction contracts and on non-construction procurements (i.e., contracts for services, supplies and equipment having a total value not to exceed \$500,000). The threshold may be satisfied by utilizing one (1) or more small business concerns as primes or subcontractors or suppliers of goods and services provided that the small business performs a minimum of fifty one percent (51%) of the tasks pursuant to the awarded Contract. The Contractor hereby agrees to carry out this policy in the award and administration of subcontracts to the fullest extent possible consistent with efficient Contract performance.

#### 3. **DEFINITIONS**:

- A. **Appendix B-1.** The Notice of Requirements for Small Business Enterprise Program, when attached to a solicitation, implements the SBE requirements of the Authority's DBE Program Plan in the award and administration of federally funded Authority contracts.
- B. **Certified SBE.** Is a for-profit small business concern (a) that is at least fifty one percent (51%) owned by one or more individuals who are economically disadvantaged or, in the case of a corporation, in which fifty one percent (51%) of the stock is owned by one (1) or more such individuals; (b) whose management and daily business operations are controlled by one (1) or more of the economically disadvantaged individuals who own it; and (c) whose eligibility is evidenced by a current MWUCP (WMATA or D.C. Department of Transportation Certification letter), or an SBE certification letter issued by WMATA's DBE Office.
- C. **Contractor.** One who participates, through a contract or subcontract (at any tier), in a US DOT assisted highway, transit or airport program.

D. Commercially Useful Function (CUF). An SBE performs a commercially useful function when it is responsible for execution of the work of the contract and is carrying out its responsibilities by actually performing, managing, and supervising the work involved. To perform a commercially useful function, the SBE must also be responsible, with respect to materials and supplies used on the contract, for negotiating price, determining quality and quantity, ordering the material, and installing (where applicable) and paying for the material itself. To determine whether an SBE is performing a commercially useful function, the Authority will consider the amount of work subcontracted, industry practices, whether the amount the firm is to be paid under the contract is commensurate with the work it is actually performing.

- (1) An SBE does not perform a commercially useful function if its role is limited to that of an extra participant in a transaction, contract, or project through which funds are passed in order to obtain the appearance of SBE participation.
- (2) If an SBE does not perform or exercise responsibility for at least fifty one percent (51%) of the total cost of its contract with its own work force, or if the SBE subcontracts a greater portion of the work of a contract than would be expected on the basis of normal industry practice for the type of work, the Authority will presume that the SBE is not performing a commercially useful function.
- E. The following factors will be used by the Authority in determining whether an SBE trucking company is performing a commercial useful function:
  - (1) The SBE must be responsible for the management and supervision of the entire trucking operation for which it is responsible for on a particular contract.
  - (2) The SBE must itself own and operate at least one fully licensed, insured and operational truck used on the contract.
  - (3) The SBE may lease trucks from another SBE firm, including an owner-operator who is certified as an SBE.
  - (4) The SBE may also lease trucks from a non-SBE firm, including an owner-operator. The SBE who leases trucks from a non-SBE is entitled to credit only for the fee or commission it receives as a result of the lease arrangement.
  - (5) The lease must indicate that the SBE has exclusive use of and control over the truck. This does not preclude the leased truck from working for others during the terms of the lease with the consent of the SBE, so long as the lease gives the SBE absolute priority for use of the leased truck. Leased trucks must display the name and identification number of the SBE.
- F. **DC DOT.** The District of Columbia Department of Transportation.
- G. **Economically Disadvantaged Individual.** Any individual who is a citizen (or other lawfully admitted permanent resident) of the United States and, in general, whose net worth is less than \$1.32 million (excluding equity in personal residence and applicant's firm).

H. **Joint Venture.** An association of an SBE firm and one (1) or more other firms to carry out a single, for-profit business enterprise, for which the parties combine their property, capital, efforts, skills and knowledge, and in which the SBE is responsible for a distinct, clearly defined portion of the work of the Contract and shares in the capital contribution, control, management, risks, and profits of the joint venture commensurate with its ownership interest.

- I. Metropolitan Washington Unified Certification Program (MWUCP). A unified certification program mandated by 49 CFR §26.81 between two Federal transit recipients (WMATA and the D.C. Department of Transportation). The agreement became effective January 2005.
- J. Race-conscious. A measure or program that is focused specifically on assisting only DBEs, including women-owned DBEs.
- K. **Race-neutral.** A measure or program that is, or can be, used to assist all small businesses. For the purposes of the SBE and DBE programs, race-neutral includes gender-neutrality.
- L. **Small Business Concern.** With respect to firms seeking to participate as SBEs in US DOT assisted contracts, a small business concern as defined pursuant to Section 3 of the Small Business Act and Small Business Administration's implementing regulations (13 C.F.R. Part 121) that also does not exceed the cap on average annual gross receipts specified in 49 C.F.R. § 26.65(b).
- M. **US DOT Assisted Contract.** Any contract between the Authority and a contractor (at any tier) funded, in whole or in part, with US DOT financial assistance, including letters of credit or loan guarantees.
- N. **WMATA.** Washington Metropolitan Area Transit Authority, the transit system (rail and bus) serving the metropolitan Washington area, including parts of Virginia and Maryland.

#### 4. SOLICITATION REQUIREMENTS:

The bidder shall submit the following <u>with</u> its bid or proposal, no later than the time of the bid or proposal due date. Any bidder who fails to complete and return this information with its bid shall be deemed to be not responsive and may be ineligible for contract award. Bidders that are not SBE certified shall be deemed to be not responsible and will be ineligible for Contract award.

- A copy of a current WMATA, D.C. DOT or MWUCP certification letter(s) or SBE certification letter shall be attached to evidence SBE pre-certification. All SBE firms must be pre-certified. Participation by a firm that is not currently certified as an SBE by the Authority at the time of bid opening does not count. All SBE firms must be in compliance with 49 CFR, Part 26.
- b. Information for Determining Joint Venture Eligibility, if applicable (Attachment 1, pgs. 1-4). Submittal shall be signed by all parties, dated and notarized.
- C. Copy of Joint Venture Agreement, <u>if applicable.</u> Submittal shall be signed by all parties, dated and notarized.
- D. Completed "Schedule of Participation for SBE Contracts" (Attachment 2) identifying the area of work and percentage of contract performance for SBE prime contractor and all subcontractors. The SBE must perform, at least fifty one percent (51%) of the total Contract value, to meet the SBE contract performance requirement.
- E. Executed "Letter of Intent to Perform as Subcontractor on SBE Contract" (Attachment 3) must be submitted for all subcontractors.

#### 5. CONTRACT ADMINISTRATION REQUIREMENTS:

The following requirements apply after contract award:

a. The Contractor shall include the following provision in each subcontract it awards:

"The contractor shall not discriminate on the basis of race, color, national origin or sex in the performance of this contract. The contractor shall carry out applicable requirements of 49 CFR Part 26 in the award and administration of U.S. DOT assisted contracts. The Contractor's failure to carry out these requirements is a material breach of this Contract, which may result in termination of this contract or such other remedy as the Authority deems appropriate."

- b. The Contractor shall report on SBE performance on the attached, SBE Prime Contractor Prompt Payment Report (Attachment 4) which shall be submitted monthly with each payment request. Failure to submit these report(s) may result in suspension of contract payments. The Contractor shall certify, with each payment request, that payment has been or will be made to all subcontractors due payment, within ten (10) days after receipt of payment from the Authority for work by that subcontractor. The Contractor shall inform the COR or COTR, with its payment request, of any situation where scheduled subcontractor payments have not been made and the reason therefore. The Contractor shall require each subcontractor to complete and forward to the Small Business Coordinator on a monthly basis a "SBE Subcontractor Prompt Payment Report" (Attachment 5). The subcontractor shall certify that payment has been received.
- c. The Contractor must have the prior written approval of the contracting officer and the SBE office before substitution for an SBE subcontractor, regardless of the reason for substitution. Failure to obtain Authority approval could result in the Authority declaring the Contractor ineligible to receive further Authority contracts for three years from the date of the finding.
- d. The contractor shall forward copies of all subcontracts to the Small Business Coordinator at the time of their execution.
- e. If the Contracting Officer or other delegated Authority representative determines that the Contractor has failed to comply with this Appendix B-1, he/she will notify the Contractor of such noncompliance and the action to be taken. The Contractor shall, after receipt of such notice, take corrective action. If the Contractor fails or refuses to promptly comply, the Contracting Officer or other delegated Authority representative may issue a "stop work order" stopping all or part of the work, until satisfactory corrective action has been taken. No part of the time lost due to any such stop work order shall be made the subject of a claim for extension of time or for excess costs or damages by the Contractor. When the Authority proceeds with such formal actions, it has the burden of proving that the Contractor has not met the requirements of this Appendix, but the Contractor's failure to meet its Appendix B-1 goal shall shift to it, the requirement to come forward with evidence to show that it has met the good faith requirements of this Appendix.
- f. The Contractor agrees to cooperate in any studies or surveys that the Authority conducts which are necessary to determine the extent of the Contractor's compliance with this Appendix.

g. The Contractor shall keep records and documents for three (3) years following performance of this Contract to indicate compliance with this Appendix. These records and documents, or copies thereof, shall be made available at reasonable times and places for inspection by any authorized representative of the Authority and will be submitted upon request together with any other compliance information that such representative may require.

- h. If the Authority, the FTA or the U.S. DOT has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements regarding the SBE Program, the matter shall be referred to the WMATA's DBE Office, and WMATA's Office of Inspector General (OIG).
- i. The Contractor's failure to carry out the requirements of this Appendix is a material breach of this Contract, that may result in the termination of this Contract or such other remedy as the Authority deems appropriate.

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Page 1						
Name and address of Joint Venture:						
Contact Person:						
Have you attached a copy of the Joint Venture agreement? [] Yes	[] No					
NOTE: Affidavit will not be processed without a copy of the Joint Ve	enture agreement.					
Name and address of Joint Venture partner:						
Contact Person:	Telephone:					
Status of firm: [] DBE [] Non-Minority [] Female [] Veteran.						
Does firm have current WMATA, DC DOT or MWUCP DBE certification	tion? []Yes []No					
Name and address of Joint Venture partner:						
Contact Person:						
Status of firm: [] DBE. [] Non-Minority [] Female [] Veteran.						
Does firm have current WMATA, DC DOT or MWUCP DBE certification						
Describe the nature of the Joint Venture business:						
Describe the role in the Joint Venture of each partner listed above:						

Describe the experience and business qualifications of each partner in the Joint Venture listed above:

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Indicate the percentage of ownership in the Joint Venture for each Joint Venture partner, indicating dollar amounts wherever applicable.

Nam	e of Partner	Percentage of Ownership	Profit and Loss Sharing	Capital Contribut including Equipo		Other	Agreements	
	TALS:							
ldent	ify by name,		and company a	offiliation those inc				
1.	Financial d	ecisions, such as	s payroll, insura	nce, surety and/or	bond	ing requir	ements:	
	Name:			Race:				_
	Title:				Sex:	[] Male	[] Female	
	Company a	affiliation:						
2.	Manageme	ent decisions, suc	h as estimating	, marketing and sa	ales, ł	niring and	firing, purch	asing supplies:
	Name:			Race:				
	Title:				Sex:	[] Male	[] Female	
	Company a	affiliation:						
3.	Supervision	n of field operatio	ns:					
	Name:			Race: _				
	Title:				Sex:	[] Male	[] Female	
	Company a	affiliation:						

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#### Page 3

	The	undersigne	d swear	that t	he 1	foregoing	statements	are	correct	and	include	all	material	inform	atior
neces	sary t	o identify an	d explai	n the t	term	ns and op	erations of o	our fo	ollowing	nam	ed Joint	Ve	enture:		

and the intended participation by each Joint Venturer in the undertaking. Further the undersigned covenant and agree to provide the Authority current, complete and accurate information regarding actual Joint Venture work and the payment thereof and any proposed changes in any of the Joint Venture arrangements and to permit the audit and examination of the books, records and files of the Joint Venture, or those of each Joint Venturer relevant to the Joint Venture, by authorized representatives of the Authority or the Federal funding agency. Any material misrepresentation will be grounds for terminating any contract that may be awarded and for initiating action under Federal and State laws concerning false statements.

It is recognized and acknowledged that the Authority's SBE Program shall have access to the information provided herein above for the purpose of establishing eligibility of the Joint Venture.

It is understood that trade secrets and information privileged by law, as well as commercial, financial, geological and geophysical data furnished will be protected.

(NAME OF FIRM)	(NAME OF SECOND FIRM)	
(SIGNATURE OF AFFIANT)	(SIGNATURE OF AFFIANT)	
(PRINT NAME)	(PRINT NAME)	
(TITLE)	(TITLE)	
(DATE)	(DATE)	

		Page 4		
Date:		County:		
On this	day of		, 20,	
before me appe	ared	(Name)		
to me personally	known, who, being duly s	(Name) worn, did execute the foregoin (Name of Firm)	g Affidavit, and did stat	e that he or she
to execute the A	ffidavit and did so as his o	(Name of Firm) or her free act and deed.		
(Seal)	Sworn and s	ubscribed before me(N	lotary Public)	
	Commission	Expires:		_
		County:		
this	day of		, 20	
before me appe	ared	(Name)		
		sworn, did execute the foregoin		te that he or she
	ffidavit and did so as his o	(Name of Firm)		
(Seal)	Sworn and s	ubscribed before me	(Notary Public)	
	Commission	Expires:		_

Signature & Title of Contractor Representative

# SUBMIT WITH BID/PROPOSAL

Contract Number: FQ18119

**Date** 

#### **SCHEDULE OF PARTICIPATION on SBE Contract**

		Contract No.	
Name of Bidde	nu/Dunn non	Project Name	
Name of Bidde	•		
reed to perform work on	this Contract. The bidder/	by identifying those firms, (with scope proposer agrees to enter into a formal in this Schedule subject to award of a	agreement with the firm(s) list
Name of Subcontractor	Address	Type of Work (Electrical, Paving, Etc.) and Contract Items or Parts Thereof to be Performed and Work Hours Involved	Agreed Price
		Subtotal \$ Subcontractors	
Name of Prime Contractor	Address	Type of Work (Electrical, Paving, Etc.) and Contract Items or Parts Thereof to be Performed and Work Hours Involved	Agreed Price
		Subtotal \$ SBE Prime Contractor	
TOTAL \$ ALL	CONTRACTORS	TOTAL	

# LETTER OF INTENT TO PERFORM AS A SUBCONTRACTOR/JOINT VENTURE (ALL ITEMS <u>MUST</u> BE COMPLETED)

TO:		
(Name of Bidder/Proposer)		
The undersigned intends to perform work in connection with  An individual  A partnership	the above projects as (check one):  A corporation A joint venture	
Specify in detail particular work items or parts thereof to be		
at the following price: \$		<u> </u>
Please indicate% of the dollar value of the subconundersigned will enter into a formal agreement with you for Authority.		
Name of SBE Firm's Subcontractor/Joint Venture	Phone Number	
Address	WMATA Vendor ID	
Signature & Title	Date	
The following is to be completed by the Prime Contractor. <i>A</i> indicate acceptance.		subcontractor to
To:(Name of Subcontractor)		
(Name of Subcontractor) You have projected your interest and intent for such work, a follows:		on of such work as
WORK ITEMS:		
PROJECTED SUBCONTRACTOR COMMENCEMENT DA	<u>TE:</u>	
PROJECTED SUBCONTRACTOR COMPLETION DATE:		
(Name of Prime Contractor & Acceptance Signature)		

### **Washington Metropolitan Area Transit Authority (WMATA)**

SMALL BUSINESS ENTE	RPRISE (SBE)
PRIME CONTRACTOR'S	<b>PROMPT PAYMENT REPORT</b>

Page	of	
Reporting Pe	eriod	
Contract Nu	mher	

Γhis Rep	ort is required to be submitted to ents of WMATA's DBE Program P	the DBE Off	fice, Attn: Coordinator, Sma	ıll Business Progran	ns, 8201 Ardwick /	Contra	ct Number ct Number	
	Name of SBE Prime Contractor:							_
-	Prime Contract Amount:		<u>:</u>					_
	Name of Sub-Contractor	SBE (Y/N)	Description of Work	Date Contract Awarded	Amount of Subcontractor Award	Amount Paid This Reporting Period	Cumulative Paid To Sub- Contractor	
								-
								-
								-
rime co	the information furnished with ontractor with subcontractors for racts will be paid within ten (10)	r the desig	nated period covered by th	nis report. Further				
Signature	& Title of Authorized Representa	tive:			Dat	e:		

# **Washington Metropolitan Area Transit Authority (WMATA)**

SMALL BUSINESS ENTERPRISE (SBE)
SUBCONTRACTOR'S PROMPT PAYMENT REPORT

Page	of	
Reporting I	Period	
Contract N	umber	

SMALL BUSINESS ENTERPRISE (SBE) SUBCONTRACTOR'S PROMPT PAYMENT REPORT				Page of Reporting Period Contract Number		
	oort is required to be submitted to the DBE Office ents of WMATA's DBE Program Plan and 49 CF		mall Business Progra	ms, 8201 Ardwick Ardmore	Road, Landover, MD 20785,	pursuant to the
Subcon	tractor:					
SBE Pr	ime Contractor:		Subcontract Amount	:		
	Description of Service/Product Performed	Invoice Date	Invoice Amount	Payment Received From Prime Contractor (Check # or EFT Confirmation #)	Cumulative Payments Received From Prime Contractor	
	that the information furnished with respect t ge and belief.	o payment(s) by the	prime contractor for	the above services/produ	cts is true and accurate to	the best of my
	Signature & Title of Authorized Representative:			Date:		