

Disadvantaged Business Enterprise Program

DBE Form 2: Solicitation Form

(an excel spreadsheet with the same information can be used in lieu of this form)
Copy this side of Form 2 as needed, to document DBE contacts.

v.9.10.14

Bidder Name:		Bid Date:	
Project Name:			
Project Number:			

DBE Firm:			Contact Person:		
Scope of Work:			NAICS Code:		
Initial Contact:	Date:	Method:	☐ Email	☐ Fax	☐ Mail ☐ Courier
Follow-up:	Date:	Method:	☐ Phone	☐ In person	
Response:	☐ No response ☐ Not bidding ☐ Is bidding \$ _____ ☐ Other (explain)				
Selected?	☐ YES ☐ NO. If not, why?				
DBE Firm:			Contact Person:		
Scope of Work:			NAICS Code:		
Initial Contact:	Date:	Method:	☐ Email	☐ Fax	☐ Mail ☐ Courier
Follow-up:	Date:	Method:	☐ Phone	☐ In person	
Response:	☐ No response ☐ Not bidding ☐ Is bidding \$ _____ ☐ Other (explain)				
Selected?	☐ YES ☐ NO. If not, Why?				
DBE Firm:			Contact Person:		
Scope of Work:			NAICS Code:		
Initial Contact:	Date:	Method:	☐ Email	☐ Fax	☐ Mail ☐ Courier
Follow-up:	Date:	Method:	☐ Phone	☐ In person	
Response:	☐ No response ☐ Not bidding ☐ Is bidding \$ _____ ☐ Other (explain)				
Selected?	☐ YES ☐ NO. If not, why?				
DBE Firm:			Contact Person:		
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Initial Contact:	Date:	Method:	☐ Email	☐ Fax	☐ Mail ☐ Courier
Follow-up:	Date:	Method:	☐ Phone	☐ In person	
Response:	☐ No response ☐ Not bidding ☐ Is bidding \$ _____ ☐ Other (explain)				
Selected?	☐ YES ☐ NO. If not, why?				

Company _____

Signature of Authorized Official _____

Title _____

Submittal Date _____