



# MBE/WBE/DBE Contract Goals Request

Date: December 3, 2018  
 To: Jai'esha Releford, Human Relations Department  
 From: Chad Thompson, Project Manager - Public Works Department

<b>Project Number:</b> 89005580				<b>Project Name:</b> DP Services - Swope Park Industrial Flyer Over Bridge		
<b>Contract ID Number</b>				<b>Estimated Cost: (cost breakdown attached)</b> \$650,000.00		<b>Solicitation Date:</b> Waiver
<b>Estimated Project Duration:</b>						

Note: Click the box to select

→ FICB		<b>PREVAILING WAGE:</b>		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Contract Category:	<input type="checkbox"/> Construction	<input type="checkbox"/> Design-Build	<input type="checkbox"/> Non-Municipal Agency		
	<input checked="" type="checkbox"/> Design Professional	<input type="checkbox"/> Other Goods & Services	<input type="checkbox"/> Lease		
	<input type="checkbox"/> Professional Services	<input type="checkbox"/> Facilities Maintenance/Repair	<input type="checkbox"/> Tenant (MBE/WBE)		
	<input type="checkbox"/> Other (Enter Type):	<input type="checkbox"/> Concession			
Type:	<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Amendment No.			
Funding:	<input checked="" type="checkbox"/> City(MBE/WBE)	<input type="checkbox"/> Federal (DBE)	<input type="checkbox"/> State (DBE)		
	<input type="checkbox"/> Other:	<input type="checkbox"/> Grant#			
Construction Workforce Goals: Are the estimated construction labor hours greater than 800 and the estimated cost greater than \$300,000? If yes, complete "Required Crafts" Worksheet and include total number of hours in Description of Work.					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Estimated Cost Breakdown attached - Page 2		<input type="checkbox"/> List of Required Crafts attached - Page 3			

**Description of work:**

Provide brief description of the type of services being performed.

cc: Darrell Everette, Keely Golden, Carla Hardin (General Services)

<b>FOR HUMAN RELATIONS DEPARTMENT USE ONLY:</b>	
<input type="checkbox"/> No Goals are set for this Project; OR	
<input checked="" type="checkbox"/> The following Goals are approved for this Project	<u>14</u> % MBE <u>10</u> % WBE OR _____ % DBE
Human Relations Department	Date: <u>12/26/18</u>

<b>FOR FAIRNESS IN CONSTRUCTION BOARD USE ONLY<sup>2</sup></b>		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> N/A
_____		Date		

<b>FOR GRANT AGENCY USE ONLY<sup>3</sup></b>		<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	<input type="checkbox"/> N/A
_____		Date		

<sup>1</sup> DBE Programs apply to specific federal or state grant requirements.  
<sup>2</sup> For Projects subject to prevailing wage requirements only.  
<sup>3</sup> Federal and state grant agreements may require granting agency approval of contract goals.