## **MBE Attachment D-3B**

## MBE PRIME PROJECT PARTICIPATION CERTIFICATION

PLEASE COMPLETE AND SUBMIT THIS FORM TO ATTEST EACH SPECIFIC ITEM OF WORK THAT YOUR MBE FIRM HAS LISTED ON THE MBE PARTICIPATION SCHEDULE (ATTACHMENT \_\_-1A) FOR PURPOSES OF MEETING THE MBE PARTICIPATION GOALS. THIS FORM MUST BE SUBMITTED WITHIN 10 WORKING DAYS OF NOTIFICATION OF APPARENT AWARD. IF THE BIDDER/OFFEROR FAILS TO RETURN THIS AFFIDAVIT WITHIN THE REQUIRED TIME, THE PROCUREMENT OFFICER MAY DETERMINE THAT THE BIDDER/OFFEROR IS NOT RESPONSIBLE AND THEREFORE NOT ELIGIBLE FOR CONTRACT AWARD.

THE BID	DER/OFFEROR IS NOT RESPO	OCUREMENT OFFICER MAY DET ONSIBLE AND THEREFORE NOT	
CONTRA	CT AWARD.		
Provided t	hat	(Prime Co	ntractor's Name)
with Certif	fication Number is aw	varded the State contract in conjunction	with Solicitation
No	, such MBE I	Prime Contractor intends to perform with of the Total Contract Amount for performance of the Total Contract Con	n its own forces
at least \$	which equals to% of products/services for the Contract:	of the Total Contract Amount for perfor	ming the
	•		
NAICS CODE	WORK ITEM, SPECIFICATION NUMBER, LINE ITEMS OR WORK CATEGORIES (IF APPLICABLE) For Construction Projects, General Conditions must be listed separately.	DESCRIPTION OF SPECIFIC PRODUCTS AND/OR SERVICES	VALUE OF THE WORK
MBE PR	ZIME CONTRACTOR		
	of Representative:		
Olginature o	4 representative.		
Printed Nar	me and Title:		
Firm's Nam	ie:		
Federal Ide	entification Number:		
Address:			
-			
Telephone:			

Date: