



Disadvantaged/Small Business Enterprise Forms

All TJPA contracts include the requirement that the Contractor submit the following forms as part of our Disadvantaged Business Enterprise (DBE) and Small Business Enterprise (SBE) Programs:

Bidders/Proposers Information Request Form	To be submitted with a bid or proposal; must also be submitted upon contract award if the information has changed
Progress Payment Report	To be submitted with every invoice
Subcontractor Payment Declaration	To be submitted within five days of each Contractor payment to a subcontractor (and a Contractor is to pay all subcontractors within ten days of receiving payment)
Final Expenditure Report	To be submitted upon contract completion

These forms are necessary to monitor our federally-mandated DBE Program and Board-mandated SBE Program.

How to fill out the Bidders/Proposers Information Request Form

1. Name of Project/Proposal – insert name of the TJPA Request for Proposals (RFP) or Invitation for Bids (IFB)
2. Project/Proposal Number – insert TJPA-assigned number of the relevant RFP or IFB
3. Proposer Business Name and Address – insert company name and address of prime contractor. If proposal or bid is being made by a joint venture, contact the TJPA for an alternate form.
4. Name of Person Submitting Bid – insert contact name for the prime contractor
5. Signature of Proposer – signature of person listed in number 4
6. Date – date proposal or bid is being submitted
7. Note the requirements in small print – “IMPORTANT: 1) Identify all DBE/SBE firms being claimed for credit. 2) List names of all DBE/SBE subcontractors and their respective items of work. 3) Attach copy of the proof of DBE/SBE certification for each DBE/SBE subcontractor listed on this form. 4) Attach “Intent to Perform” letter signed by the subcontractor.”

Certification must be attached. The TJPA accepts DBE participation only from firms currently certified in the California Unified Certification Program (CUCP). For SBE participation, certifications are accepted from the CUCP, the San Francisco Human Rights Commission, and/or the State of California Department of General Services. If a proposal or bid includes subcontractors, a letter stating the subcontractor’s intent to perform work on the project must be attached.

8. Sections A and B must be completed, even if there is no DBE/SBE participation planned for the contract. The information in this section is required for TJPA DBE/SBE Program monitoring purposes and for maintaining a federally-required bidders list. **Do not write “not applicable” or “n/a”.** If a proposal or bid is being submitted by one firm or individual, with no partners or subcontractors, then that firm or individual is the PRIME Contractor and must complete Section A. Even if the name, address and phone number are the same as provided above on the form, the remaining columns must be completed; do not write “same as above”. **All subcontractors, whether DBE/SBE or non-DBE/SBE, must be listed in Section B.** Use additional sheets if necessary. If there are no subcontractors proposed, Section B will remain blank.
 - Age of firm – how many years the firm has been in business
 - NAICS Code – North American Industry Classification System Code. Codes can be found at www.census.gov/naics.
 - Annual Gross Receipts of Firm – a range may be provided, e.g., less than \$500,000; \$500,000 - \$1,000,000; \$1,000,000 - \$5,000,000; \$5,000,000 - \$10,000,000; etc.

- Certified DBE/SBE – mark yes or no in this column. If “yes”, list the type of certification: CUCP, HRC, DGS.
- DBE/SBE Certifying Agency – if you marked yes as a Certified DBE/SBE, note which agency your certification letter is from—BART, SFMTA, HRC, etc.
- Type of DBE/SBE – if you marked yes as a Certified DBE/SBE, put the number that corresponds to the type of DBE/SBE as follows—
 1. African-American
 2. Hispanic
 3. Native American
 4. Asian-Pacific
 5. Asian-Indian
 6. Female-Woman
 7. Other
- Award Amount – leave this column blank, unless you are submitting an updated form after contract award
- Percentage of Contract Participation – if only one firm or individual is proposing or bidding, with no partners or subcontractors, this is 100% for the prime contractor. Fill in appropriate percentages for each firm if some of the work is being subcontracted. Note that the total at the bottom of the form must be 100% when all percentages are added.

How to fill out the Progress Payment Report

- Contract Award Date – insert date from cover page of your contract
- TJPA Contract No. – this number should be listed on your Notice to Proceed (NTP). If unsure, contact the TJPA Contracts Compliance Manager or the Project Manager you are working with
- Contract Title – this should also be in the subject line of your NTP. If unsure, contact the TJPA Contracts Compliance Manager or the Project Manager you are working with
- Prime Contractor – self explanatory
- Contact Person – self explanatory
- Contact Phone No. – self explanatory
- Contact Email – self explanatory
- Prime Contractor Address – self explanatory
- Signature – self explanatory
- Invoice Date – self explanatory
- Invoice No. – self explanatory
- For the Period – invoice period
- 1. Award Amount of Prime Contract – insert the total dollar amount of the contract, which can be found in the Compensation clause of the contract. Please note that NTP’s may be for less than the total amount of the contract; enter the total amount of the contract, not the total for any one NTP or task order
- 2. Amount of Change Orders, Amendments and Modifications to Date – enter the total amount of any contract change orders, amendments or modifications
- 3. Total Contract Amount to Date – add Lines 1 and 2
- 4. Total Amount for this Invoice – amount of the invoice this report is accompanying. If contract has retention provisions, subtract the retention amount for this invoice from this amount

5. Total Previously Invoiced Awaiting Payment – amount of any previously submitted invoices not yet paid (less retention if the contract has a retention provision)
6. Total Amount Paid to Date – total amount received; this does not include the invoices in Lines 4 or 5
7. Total Invoice Amount Requested to Date – add Lines 4, 5 and 6
8. Total Retention to Date (*for contracts with retention only*) – total amount retained to date. As retention is released, deduct the released amount from this total, and add to the Total Amount Paid to Date
- 8/9. Percent Complete – contract percentage completed; divide Line 7 by Line 3 (*Lines 7 + 8 divided by Line 3 for contracts with retention*)

Part 2: Consultant/Subconsultant Payment Detail Summary

This section is very similar to Part 1, above, but has lines for inputting the same information for each contract participant—prime and subs.

- A. Name of Firm – all firms working on the contract should have a row, even if they are not billing on this particular invoice
- B. DBE/SBE – mark DBE, SBE, or N. If a firm is both a DBE and either a CA SBE or SF HRC SBE, please mark as a DBE.
- C. Portion of Work – percentage of work that each firm is expected to perform on the contract. The sum of this column should be 100%
- D. Contract Amount – the dollar amount that each firm is expected to perform on the contract at the time of award. The sum of this column should equal the contract amount in Line 1 on page 1
- E. Amount of Change Orders to Date – the dollar amount of any change orders, modifications or amendments, broken down by contractor (prime and/or subs). The sum of this column should equal the amount in Line 2 on page 1
- F. Total Contract Amount + Change Orders – the total dollar amount that each firm is expected to perform on the contract. The sum of this column should equal the total contract amount in Line 3 on page 1
- G. Amount Invoiced This Period – the dollar amount invoiced by each contractor, prime and sub, for this invoice. If a particular firm did not bill on this invoice, put \$0.00. The sum of this column should equal the total invoice amount (Line 4 on page 1)
- H. Previously Invoiced Awaiting Payment – broken down by company. The sum of this column should equal Line 5 on page 1
- I. Amount Paid to Date – again, broken down by company. The sum of this column should equal Line 6 on page 1
- J. Total Retention to Date (*for contracts with retention only*) – total amount retained to date broken down by company. The sum of this column should equal Line 8 on page 1
- J/K. Percent Complete to Date – total amount billed divided by contract amount, broken down by company. The percentage total of this column should equal Line 8 (Line 9 for contracts with retention) on page 1

How to fill out the Subcontractor Payment Declaration

The items required on this form are self explanatory. Subconsultants must be paid within ten days of the prime contractor's receipt of payment from the TJPA, and this form must be submitted within five days of payment to the subconsultant. Please contact the TJPA Contracts Compliance Manager or your Project Manager with any questions.

How to fill out the Final Expenditure Report

This report is an update of your Bidders/Proposers Information Request Form, based on actual contract data. The information required on this form should be self explanatory. Please contact the TJPA Contracts Compliance Manager or your Project Manager with any questions.

**TRANSBAY JOINT POWERS AUTHORITY
PROGRESS PAYMENT REPORT**

To be completed by Prime Contractor and submitted to Project Manager with every monthly invoice.

PART 1: PROJECT SUMMARY

Contract Award Date: 31-Jan-08		TJPA Contract No.: 08-01-CONTRACT-000		Contract Title: Professional Services	
Prime Contractor: ABC Contractors		Contact Person: Jane Smith		Contact Phone No.: (415) 555-1212	Contact Email: jane.smith@abc.com
Prime Contractor Address: 1234 Market St., Ste. 567, San Francisco, CA 94108			Signature:		
Invoice Date: 3/5/2008		Invoice No.: 1		For the Period: February 1 - 29, 2008	

1. Award amount of Prime Contract	\$	1,000,000.00
2. Amount of Change Orders, Amendments and Modifications to Date	\$	-
3. Total Contract Amount to Date including Change Orders, Amendments and Modifications (Line 1 + Line 2)	\$	1,000,000.00
4. Total Amount for this Invoice	\$	25,000.00
5. Total Previously Invoiced Awaiting Payment	\$	-
6. Total Amount Paid to Date (not including Lines 4 and 5)	\$	-
7. Total Invoice Amount Requested to Date (Line 4 + Line 5 + Line 6)	\$	25,000.00
8. Percent Complete (Line 7/Line 3)		2.5%

**TRANSBAY JOINT POWERS AUTHORITY
PROGRESS PAYMENT REPORT**

PART 2: CONSULTANT/SUBCONSULTANT PAYMENT DETAIL SUMMARY

A	B	C	D	E	F	G	H	I	J
Name of Firm (Including Prime, Subs, Vendors, and Joint Ventures)	DBE/SBE (Y/N)	Portion of Work (%)	Contract Amount (\$)	Amount of Change Orders to Date (\$)	Total = Contract Amount + Change Orders (D+E) (\$)	Amount Invoiced This Period (\$)	Previously Invoiced Awaiting Payment (\$)	Amount Paid to Date (\$)	Percent Complete to Date ((G+H+I) / F) (%)
ABC Contractors	N	50%	\$500,000.00	\$0.00	\$500,000.00	\$16,250.00	\$0.00	\$0.00	3.25%
123 Subs	DBE	25%	\$250,000.00	\$0.00	\$250,000.00	\$6,250.00	\$0.00	\$0.00	2.50%
Mr. Electrical	N	15%	\$150,000.00	\$0.00	\$150,000.00	\$0.00	\$0.00	\$0.00	0.00%
Drywall Tech	SBE	5%	\$50,000.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$0.00	0.00%
Earthworks Plus	N	5%	\$50,000.00	\$0.00	\$50,000.00	\$2,500.00	\$0.00	\$0.00	5.00%
TOTAL		100%	\$1,000,000.00	\$0.00	\$1,000,000.00	\$25,000.00	\$0.00	\$0.00	2.50%

**TRANSBAY JOINT POWERS AUTHORITY
PROGRESS PAYMENT REPORT**

To be completed by Prime Contractor and submitted to Project Manager with every monthly invoice.

PART 1: PROJECT SUMMARY

Contract Award Date: 31-Jan-08	TJPA Contract No.: 08-01-CONTRACT-000	Contract Title: Professional Services with Retention	
Prime Contractor: ABC Contractors	Contact Person: Jane Smith	Contact Phone No.: 415-555-1212	Contact Email: jane.smith@abc.com
Prime Contractor Address: 1234 Market St., Ste. 567, San Francisco, CA 94108		Signature:	
Invoice Date: 5-Mar-08	Invoice No.: 1	For the Period: February 1 - February 29, 2008	

1. Award amount of Prime Contract	\$	1,000,000.00
2. Amount of Change Orders, Amendments and Modifications to Date	\$	-
3. Total Contract Amount to Date including Change Orders, Amendments and Modifications (Line 1 + Line 2)	\$	1,000,000.00
4. Total Amount for this Invoice (Less Retention)	\$	25,000.00
5. Total Previously Invoiced Awaiting Payment (Less Retention)	\$	-
6. Total Amount Paid to Date (not including Lines 4 and 5)	\$	-
7. Total Invoice Amount Requested to Date (Line 4 + Line 5 + Line 6)	\$	25,000.00
8. Total Retention to Date ¹	\$	1,250.00
9. Percent Complete ((Line 7 + Line 8) / Line 3)		2.63%

**TRANSBAY JOINT POWERS AUTHORITY
PROGRESS PAYMENT REPORT**

PART 2: CONSULTANT/SUBCONSULTANT PAYMENT DETAIL SUMMARY

A	B	C	D	E	F	G	H	I	J	K
Name of Firm (Including Prime, Subs, Vendors, and Joint Ventures)	DBE/SBE (Y/N)	Portion of Work (%)	Contract Amount (\$)	Amount of Change Orders to Date (\$)	Total = Contract Amount + Change Orders (D+E) (\$)	Amount Invoiced This Period (Less Retention) (\$)	Previously Invoiced Awaiting Payment (Less Retention) (\$)	Amount Paid to Date (\$)	Total Retention to Date ¹ (\$)	Percent Complete to Date $\left(\frac{[G+H+I+J]}{F}\right)$ (%)
ABC Contractors	N	50%	\$500,000.00	\$0.00	\$500,000.00	\$15,437.50	\$0.00	\$0.00	\$812.50	3.25%
123 Subs	DBE	25%	\$250,000.00	\$0.00	\$250,000.00	\$5,937.50	\$0.00	\$0.00	\$312.50	2.50%
Mr. Electrical	N	15%	\$150,000.00	\$0.00	\$150,000.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
Drywall Tech	SBE	5%	\$50,000.00	\$0.00	\$50,000.00	\$0.00	\$0.00	\$0.00	\$0.00	0.00%
Earthworks Plus	N	5%	\$50,000.00	\$0.00	\$50,000.00	\$2,375.00	\$0.00	\$0.00	\$125.00	5.00%
TOTAL		100.00%	\$ 1,000,000.00	\$ -	\$ 1,000,000.00	\$ 23,750.00	\$ -	\$ -	\$ 1,250.00	2.50%

¹ As retention is requested and paid, move out of "Total Retention to Date" and into "Amount Paid to Date"

**TRANSBAY JOINT POWERS AUTHORITY
BIDDERS/PROPOSERS INFORMATION REQUEST FORM**

To be completed by Prime Contractor and submitted as part of bid/proposal.

NAME OF PROJECT/PROPOSAL							PROJECT/PROPOSAL NUMBER				
PROPOSER BUSINESS NAME AND ADDRESS											
NAME OF PERSON SUBMITTING BID				SIGNATURE OF PROPOSER					DATE		
CONTACT PERSON NAME				CONTACT PHONE NUMBER				CONTACT EMAIL			
IMPORTANT: 1) Identify all DBE/SBE firms being claimed for credit. 2) List names of all DBE/SBE subcontractors and their respective items of work. 3) Attach a copy of the proof of DBE/SBE certification for each DBE/SBE subcontractor listed on this form. 4) Attach "Intent to Perform" letter signed by the subcontractor.											
							DBE-SBE Participation				
LIST BUSINESS FIRM(s) List Name, Address, and Contact Person (if not the same as above)	Phone Number	Email Address	Age of Firm	Item of Work, Service or Materials Supplied	NAICS Code (if known) *	Annual Gross Receipts of Firm	Certified DBE or SBE (Y/N)	Certifying Agency	Type of DBE or SBE **	Award Amount	Percentage of Contract Participation
A. PRIME Contractor											
B. Subcontractor/Vendor/Joint Venture											
TOTAL										\$0	0.00%

* **NAICS Code:** North American Industry Classification System Code. Codes can be found at <http://www.census.gov/naics>.
 ** **Type of DBE/SBE:** (1) African-American (2) Hispanic (3) Native American (4) Asian-Pacific (5) Asian-Indian (6) Female-Woman (7) Other (designated as a Small Business)
 - DBEs must be certified by Caltrans or an agency participating in the California Unified Certification Program. Visit the Caltrans website at <http://dot.ca.gov/hq/bep/lucp.htm> for a list of participating agencies.
 - SBEs must be certified by the San Francisco Human Rights Commission (<http://www.sfgov.org/sfhumanrights>) or the California Department of General Services (<http://www.eprocure.dgs.ca.gov/default.htm>)
 - Important: Attach the proof of certification for each DBE/SBE firm used toward meeting the DBE/SBE goal.
 - This information will be used to create and maintain a federally-required Bidders List, regardless of DBE/SBE participation.
 - Use additional sheets as necessary.

**TRANSBAY JOINT POWERS AUTHORITY
SBE PARTICIPATION GOOD FAITH EFFORTS FORM**

This form must be completed and submitted along with compelling documentation detailing the good faith efforts made to meet the SBE participation goal **if the information submitted on the Bidders/Proposers Information Form indicates that the SBE goal has not been met.**

If the SBE participation goal is not met, and if this form, along with compelling documentation detailing the good faith efforts made to meet the goal, is not completed and returned with the bid or **proposal, the bid or proposal shall be deemed non-responsive and rejected.**

Even if the Bidders/Proposers Information Form indicates that the SBE goal has been met, bidders/proposers are still encouraged to submit good faith efforts documentation to protect their eligibility for the contract.

Contract No.: _____ **Contract Name:** _____

Bidder/Proposer: _____

Please supply the following information:

1. Attended any pre-solicitation, pre-proposal, or pre-bid meetings held to inform all bidders about the contract and SBE requirements

Meeting Date: _____

Attendee(s): _____

Meeting Date: _____

Attendee(s): _____

Meeting Date: _____

Attendee(s): _____

Meeting Date: _____

Attendee(s): _____

2. List below and/or on an attached sheet the names and dates of all certified SBEs solicited for this project. List the dates and methods used for initial contact and any follow-up contact. Attach copies of letters, faxes, emails and any other supporting documentation that you would like the Contract Compliance Manager to consider in determining good faith efforts.

3. Summarize below and/or on an attached sheet the items of work for which the Bidder requested subcontractor services of SBEs, the information furnished to interested SBEs regarding work requirements, and any breakdown of tasks into economically feasible units to facilitate SBE participation. Where there are SBEs available for doing portions of the work normally performed by the bidder with its own staff, the bidder will be expected to make portions of such work available for SBEs.

**TRANSBAY JOINT POWERS AUTHORITY
SBE PARTICIPATION GOOD FAITH EFFORTS FORM**

4. List below and/or on an attached sheet the names of any SBEs solicited for the work above, and a summary of the discussions or negotiations with them.

a. List solicited SBEs not available to participate on the contract, stating the reason.

b. List solicited SBEs chosen to participate, and the reasons for the choice.

c. List solicited SBEs not chosen to participate, reasons for the choice, and any actions taken by the bidder to assist the rejected SBEs in remedying deficiencies in their proposal.

If insurance or bonding is a reason for rejecting any potential SBE, a complete explanation including contact and discussions with insurance and surety firms must be provided.

Print Name: _____
Signature: _____
Company: _____
Address: _____
City, State, ZIP: _____

Date: _____
Phone: _____
Email: _____

**TRANSBAY JOINT POWERS AUTHORITY
PROGRESS PAYMENT REPORT**

To be completed by Prime Contractor and submitted to Project Manager with every monthly invoice.

PART 1: PROJECT SUMMARY

Contract Award Date:	TJPA Contract No.:	Contract Title:	
Prime Contractor:	Contact Person:	Contact Phone No.:	Contact Email:
Prime Contractor Address:		Signature:	
Invoice Date:	Invoice No.:	For the Period:	

1. Award amount of Prime Contract	\$ -
2. Amount of Change Orders, Amendments and Modifications to Date	\$ -
3. Total Contract Amount to Date including Change Orders, Amendments and Modifications (Line 1 + Line 2)	\$ -
4. Total Amount for this Invoice	\$ -
5. Total Previously Invoiced Awaiting Payment	\$ -
6. Total Amount Paid to Date (not including Lines 4 and 5)	\$ -
7. Total Invoice Amount Requested to Date (Line 4 + Line 5 + Line 6)	\$ -
8. Percent Complete (Line 7/Line 3)	0%

**TRANSBAY JOINT POWERS AUTHORITY
PROGRESS PAYMENT REPORT**

PART 2: CONSULTANT/SUBCONSULTANT PAYMENT DETAIL SUMMARY

A	B	C	D	E	F	G	H	I	J
Name of Firm (Including Prime, Subs, Vendors, and Joint Ventures)	DBE or SBE (Y/N)	Portion of Work (%)	Contract Amount (\$)	Amount of Change Orders to Date (\$)	Total = Contract Amount + Change Orders (D+E) (\$)	Amount Invoiced This Period (\$)	Previously Invoiced Awaiting Payment (\$)	Amount Paid to Date (\$)	Percent Complete to Date ((G+H+I) / F) (%)
TOTAL		0	0	0	0	0	0	0	0

**TRANSBAY JOINT POWERS AUTHORITY
SUBCONTRACTOR PAYMENT DECLARATION**

This form must be completed and submitted by the Prime Contractor for all subcontractors, vendors, and joint venture partners for every invoice submitted to TJPA within five (5) working days following actual payment to subconsultant. Payments to subconsultant shall be made no later than ten (10) working days following receipt of progress payment from TJPA. Use additional sheets if necessary. Failure to submit all required information may lead to partial withholding of progress payment.

Date: _____ Contract No.: _____

Contract Title: _____

Prime Contractor: _____

Invoice Date: _____ Invoice No.: _____

For the Period: _____

Total Amount of Invoice: _____ TJPA Check No.: _____

Subcontractor/ Vendor/JV	DBE/ SBE (Y/N)	Business Address Payment Sent To	Amount Paid	Payment Date	Check Number
Total Amount Paid to Subconsultants (this Pay Period)			\$0.00		

I/We declare under penalty of perjury under the laws of the State of California that the above information is complete, and that the tabulated amounts paid to date are accurate and correct.

Signature of Contact Person

Date

Print Name

Phone

**TRANSBAY JOINT POWERS AUTHORITY
FINAL EXPENDITURE REPORT**

To be completed by Prime Contractor at the end of the contract.

CONTRACT TITLE/NO.					TOTAL CONTRACT AWARD AMOUNT			DATE OF AWARD				
PRIME CONTRACTOR/CONSULTANT NAME AND ADDRESS					TOTAL EXPENDITURES AT END OF CONTRACT			DATE OF CONTRACT COMPLETION				
PROJECT MANAGER NAME					PROJECT MANAGER SIGNATURE						DATE	
CONTACT PERSON NAME RE: FINAL EXP. REPORT					CONTACT PHONE NUMBER			CONTACT EMAIL				
IMPORTANT: 1) Identify all DBE/SBE firms being claimed for credit. 2) List names of all DBE/SBE subcontractors and their respective items of work.												
					DBE Participation							
LIST BUSINESS FIRM(s) List Name, Address, and Contact Person (if not the same as above)	Phone Number	Email Address	Item of Work, Service or Materials Supplied	NAICS Code (if known) *	Certified DBE/SBE (Y/N)	Certifying Agency	Type of DBE or SBE**	Date of Work Completed	Date of Final Payment	Total Amount Paid	% of Total Expenditures	
A. PRIME Contractor												
B. Subcontractor/Vendor/Joint Venture												
TOTAL										\$	-	0.00%
Comments/Notes: (Explain cost overruns or discrepancies; DBE firm substitutions, etc...)												

* NAICS Code: North American Industry Classification System Code. Codes can be found at <http://www.census.gov/naics>.
 ** Type of DBE/SBE: (1) African-American (2) Hispanic (3) Native American (4) Asian-Pacific (5) Asian-Indian (6) Female-Woman (7) Other (designated as a Small Business)
 - DBEs must be certified by Caltrans or an agency participating in the California Unified Certification Program. Visit the Caltrans website at <http://dot.ca.gov/hq/bep/ucp.htm> for a list of participating agencies.
 - SBEs must be certified by the San Francisco Human Rights Commission (<http://www.sfgov.org/sfhumanrights>) or the California Department of General Services (<http://www.eprocure.dgs.ca.gov/default.htm>)
 - Important: Attach the proof of certification for each DBE/SBE firm used toward meeting the DBE/SBE goal.
 - This information will be used to create and maintain a federally-required Bidders List, regardless of DBE/SBE participation.
 - Use additional sheets as necessary.