

**ATTACHMENT 9**  
**DVBE PARTICIPATION FORM**

Firm Name: \_\_\_\_\_  
RFP Project Title: \_\_\_\_\_  
RFP Number: \_\_\_\_\_

This Project has a DVBE participation goal of three percent (3%) (“DVBE Participation Goal”). The Architect must document its DVBE compliance with the DVBE Project Goal by completing the DVBE Participation Form.

*1. Complete Parts A & B*

“Contractor’s Tier” is referred to several times below; use the following definitions for tier:

- 0 = Prime or Joint Contractor;
- 1 = Prime subcontractor/supplier;
- 2 = Subcontractor/supplier of level 1 subcontractor/supplier

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**PART A – COMPLIANCE WITH DVBE**

**FIRM**

Company Name: \_\_\_\_\_  
Nature of Work: \_\_\_\_\_ Tier: \_\_\_\_\_  
Claimed Value: DVBE \$ \_\_\_\_\_  
Percentage of Total Contract Amount: DVBE \_\_\_\_\_ %

**SUBCONTRACTORS/SUB-SUBCONTRACTORS/PROPOSERS/SUPPLIERS**

1. Company Name: \_\_\_\_\_  
Nature of Work: \_\_\_\_\_ Tier: \_\_\_\_\_  
Claimed Value: DVBE \$ \_\_\_\_\_  
Percentage of Total Contract Amount: DVBE \_\_\_\_\_ %

2. Company Name: \_\_\_\_\_  
Nature of Work: \_\_\_\_\_ Tier: \_\_\_\_\_  
Claimed Value: DVBE \$ \_\_\_\_\_  
Percentage of Total Contract Amount: DVBE \_\_\_\_\_ %

3. Company Name: \_\_\_\_\_  
Nature of Work: \_\_\_\_\_ Tier: \_\_\_\_\_  
Claimed Value: DVBE \$ \_\_\_\_\_  
Percentage of Total Contract Amount: DVBE \_\_\_\_\_ %

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GRAND TOTAL: DVBE \_\_\_\_\_ %

I hereby certify that the Contract Price, as defined herein, is the amount of \$ \_\_\_\_\_. I understand that the Contract Price is the total dollar figure against which the DVBE participation requirements will be evaluated.

NAME OF FIRM \_\_\_\_\_  
SIGNATURE OF PERSON SIGNING FOR FIRM \_\_\_\_\_  
NAME (PRINTED) OF PERSON SIGNING FOR FIRM \_\_\_\_\_  
TITLE OF ABOVE-NAMED PERSON \_\_\_\_\_  
DATE \_\_\_\_\_

**PART B – CERTIFICATION**

I hereby certify that I have made a diligent effort to ascertain the facts with regard to the representations made herein and, to the best of my knowledge and belief, each firm set forth in this bid as a Disabled Veterans Business Enterprise complies with the relevant definition set forth in California Code of Regulations, Title 2, section 1896.61, and Military and Veterans Code, section 999.

**IT IS MANDATORY THAT THE FOLLOWING BE COMPLETED ENTIRELY; FAILURE TO DO SO WILL RESULT IN IMMEDIATE REJECTION.**

NAME OF FIRM \_\_\_\_\_  
SIGNATURE OF PERSON SIGNING FOR FIRM \_\_\_\_\_  
NAME (PRINTED) OF PERSON SIGNING FOR FIRM \_\_\_\_\_  
TITLE OF ABOVE-NAMED PERSON \_\_\_\_\_  
DATE \_\_\_\_\_

**END OF ATTACHMENT**