



OFFICE OF SUPPLIER DIVERSITY
CITY OF NEW ORLEANS

DBE Compliance Form-1 | **DBE RESPONSIVENESS FORM**

Contact Office of Supplier Diversity for questions on completing this form.
Via email: supplierdiversity@nola.gov

Instructions: Prior to award of a City contract, please complete and submit DBE Compliance Form-1. *List all DBE and Non-DBE firms* that will be utilized, and list scopes of work/services or goods they will perform or provide. Please ensure that all authorized signatories of each DBE firm listed signs this form. If you have not attained the amount of DBE participation to meet the contract goal, you are required to complete and submit DBE Compliance Form-2 along with all required supporting Good Faith Efforts documentation. Please reference the GFE Policy for further guidance. The GFE Policy is available via www.nola.gov or by request at supplierdiversity@nola.gov.

Solicitation #: _____ Project Name: _____ Date: ____/____/____

Name of Bidder/Proposer: _____ has satisfied the requirements of the bid/proposal specifications for the above referenced ITB/RFP/RFQ or solicitation by the City of New Orleans in the following manner:

(Please check the appropriate space)

- The bidder/proposer is committed to the contract goal of _____ % DBE utilization on this contract.**
- The bidder/proposer is unable to meet the current DBE contract goal, however, is committed to a minimum of _____ % DBE utilization on this contract and will submit documentation demonstrating good faith efforts in addition to this form. *(Please complete and submit DBE Compliance Form-2 along with all required supporting documentation)***

Total Bid/Proposal Amount:	\$	100%
Total proposed DBE Amount:	\$	%

Bidder/Proposer's point-of-contact:

Name: _____ Title: _____ Phone: _____ Email: _____



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Solicitation #: _____ Bidder/Proposer: _____

DBE COMMITTEMENT TO CONTRACT GOAL: (Attach additional pages if necessary)

Every DBE firm listed must be utilized on the project, and must perform a Commercially Useful Function. To remove or replace a DBE firm you must request & submit a DBE Removal/Substitution Request Form and receive approval from the OSD prior to removal or replacement the DBE firm.

Sub-Contractors/Sub-Consultants and Manufacturers

Name of DBE Firm	CERTIFICATION <small>(SLDBE or LAUCP)</small>	Scope(s) of Work to be performed by the DBE	Tier 1, 2, or 3 Subcontractor?	Value of Proposed Contract with DBE	% OF TOTAL CONTRACT
1.				\$	%
2.				\$	%
3.				\$	%
4.				\$	%
5.				\$	%
6.				\$	%
7.				\$	%
8.				\$	%
9.				\$	%
10.				\$	%
TOTAL				\$	%

Suppliers (For participation towards DBE Goal, count only 60% of total proposed Contract Value)

Name of DBE Firm	Certification <small>(SLDBE or LAUCP)</small>	Supplies to be provided by the DBE	100% of Value of Proposed Contract with DBE Supplier	60% Value of Proposed Contract with DBE Supplier	% OF TOTAL CONTRACT
1.			\$	\$	%
2.			\$	\$	%
3.			\$	\$	%
4.			\$	\$	%
5.			\$	\$	%
TOTAL				\$	%



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Bidder/Proposer: _____

DBE AFFIRMATION: (Attach additional pages if necessary)

The listed DBE firm(s) below affirm(s) that it will perform the Scope of Work for the estimated dollar value as stated in the DBE Commitment to Contract Goal section on page 2 of the DBE Compliance Form-6.

NAME of DBE FIRM	PRINT NAME of DBE FIRM'S AUTHORIZED SIGNATORY	SIGNATURE of DBE FIRM'S AUTHORIZED SIGNATORY	DATE
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			



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RFP/RFQ/Bid/Solicitation/Other #: _____ Bidder/Proposer: _____

NON-DBE SUBCONTRACTORS AND SUPPLIERS: (Attach additional pages if necessary)

NAME of FIRM	PHONE	Scope of Work to be performed by the Subcontractor	VALUE of PROPOSED CONTRACT	% OF TOTAL CONTRACT
1.			\$	%
2.			\$	%
3.			\$	%
4.			\$	%
5.			\$	%
6.			\$	%
7.			\$	%
8.			\$	%
9.			\$	%
10.			\$	%
11.			\$	%
12.			\$	%
13.			\$	%
14.			\$	%
15.			\$	%

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

PRINT NAME: _____ SIGNATURE: _____ TITLE: _____ DATE: _____