



Project Office DBE On-Site Review for Architect & Engineering/Professional Services Firms

This document provides guidelines for reviewing Architect & Engineering (A & E)/Professional Services Disadvantage Business Enterprise (DBE) firms to verify compliance with the Commercially Useful Function (CUF) requirements of 49 CFR 26.55 which states in part:

“A DBE performs a CUF when it is responsible for execution of the work of the contract and is carrying-out its responsibilities by actually performing, managing, and supervising the work involved...A DBE does not perform a CUF if its role is limited to that of an extra participant in a transaction, contract, or project through which funds are passed in order to obtain the appearance of DBE participation....”

WSDOT/Local Agency will perform onsite reviews on DBE A & E Consultants, and Professional Services firms. Project owner staff are required to perform a minimum of one review for each DBE for each project, for each construction season (Calendar Year) and for each primary scope of work.

NOTE: If the DBE firm is not located on the project site or is out of state, then this review needs to be accomplished by telephone.

1. Prime Contractor/Consultant:	2. Federal Aid Number:
3. DBE Firm:	4. Contract Agreement Number:
5. WSDOT Project Engineer:	6. WSDOT Region/Local Agency:
7. Project Title:	

INDICATE THE DBE WORK OBSERVED THIS DATE

8. Scope of Work	9. Approximate % Complete	10. Actual work being performed. <i>If more lines are needed use a continuation sheet</i>	11. DBE Dollar Amount

12. Have you checked the Office of Minority & Women’s Business Enterprises Website (www.omwbe.wa.gov) to ensure firm is certified in the above work? If no, please explain:	Yes	No
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13. DBE Firms’ Start Date:	14. WSDOT Contract Percent Complete:	15. DBE Anticipated Completion Date:
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DBE PROJECT MANAGER/SUPERVISOR

16. First Name:	17. Last Name:	18. Phone Number:
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19. Is the DBE Project Manager/Site Supervisor exclusively employed by the DBE? If no, please explain:	Yes	No
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20. Is the DBE Project Manager/Site Supervisor shown on the monthly invoice or Certified Payroll:	Yes	No
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21. Is the DBE Project Manger/Site Supervisor shown on any other firms’ invoice? If yes, please explain:	Yes	No
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22. Who does the DBE’s Project Manager/Site Supervisor report to within his/her organization?	
Name:	Title:

23. Does the work described in block #10 match the type of work listed on the executed contract/agreement?	Yes	No
24. Who is paying this DBE firm?		
24(a). What are the negotiated rates?		
25. Are any of the DBE firm's employees assigned to this project working for any other firm's on this project? If yes, please explain:	Yes	No
26. Has another firm performed work in place of the DBE for the scope of work identified exclusively for the DBE? If yes, please explain:	Yes	No
27. Is the DBE owner personally involved in the day to day operations of the company?	Yes	No
28. Does the DBE firm appear to have control over their contracted scope of work?	Yes	No
29. Review Conducted By (Print Name):	30. Title (Print):	
31. Signature	32. Date of this Review:	
<p>This form must be completed in its entirety and submitted to WSDOT Office of Equal Opportunity within two (2) weeks of its completion. If the form is submitted with missing/incomplete information, it will be returned to the PE Office for completion.</p>		

INSTRUCTION GUIDE

(for A&E/Professional Services DBE On-Site Review Form)

Block #1: Enter the business name of the prime contractor/contractor for this project.

Example: Doobi Brothers Consulting

Block #2: Enter the federal aid number for this project.

Example: NH-0002(180)

Block #3: Enter the business name of the DBE firm being reviewed.

Example: Chavez Engineering Inc.

Block #4: Enter the contract or agreement number.

Example: 8066 or TA-XXXX or #Y11101 AA or 10-019-WDOT

Block #5: Enter the name of the WSDOT/Local Agency Project Engineer (or other Manager, as appropriate) who is responsible for this project.

Example: Joe Smith

Block #6: Enter the WSDOT region name or the municipality (local agency) responsible for this project.

Example: Eastern Region, or Spokane County (as appropriate)

Block #7: Enter the name of this project.

Example: SR 520 Floating Bridge & Landings

Block #8: Enter the type of work the DBE has been contracted to perform. (In general, this form is for A&E contracts which will have a scope of work. If it is a personal services contract to a contractor, use the scope of work from the DBE Utilization Certification documents or the DBE line item breakdown.

Example: Trucking; rebar; drafting; hydraulic design, etc.

Block #9: Enter the approximate percentage of work completed by the DBE for each line item scope of work.

Example: 80% completed

Block #10: Specifically describe the actual work being performed by this DBE on the day you are conducting this onsite interview.

Example: Operating belly dump trucks over the project site to haul bituminous pavement material to the dump site; drafting plan sheets for Bridge A1; running hydraulic models for storm sewer system Z, etc.

Block #11: Enter the contracted dollar amount the DBE will receive for performing this work. (This amount should be obtained from the DBE Utilization Certification form; or DBE Bid Item Breakout; or the Request to Sublet form.)

Example: \$185,000.00

Block #12: Check mark the appropriate block to acknowledge that you have verified through the OMWBE web site that this DBE is "currently" certified as a DBE and that they are performing work as contained in the "Description of Work" block on the firm's profile page in the OMWBE DBE Directory. (Note: It is important to do this as early on as possible; day one if possible.)

Example: "Yes" or "No" (as appropriate). If "no," provide an explanation as to why you did not check the OMWBE website.

Block #13: Enter the date the DBE started working on its contracted scope of work.

Example: 12/20/2014

Block #14: Enter the percent completed for the overall contracted work completed up to the date of this onsite review. (On large design-build projects this may not be exact so use best estimation in that case.)

Example: 70%

Block #15: Enter the expected completion date for this DBE's scopes of work.

Example: 6/30/2015

Block #16: Enter the first name of the designated DBE project manager or supervisor, as appropriate.

Example: John

INSTRUCTION GUIDE

(for A&E/Professional Services DBE On-Site Review Form)

Block #17: Enter the last name of the designated DBE project manager or supervisor, as appropriate. This may or may not be the person interviewed.

Example: Smith

Block #18: Enter the phone number of the designated DBE project manager or supervisor, as appropriate.

Example: 360-705-7090

Block #19: Check mark the appropriate “yes” or “no” block to acknowledge whether or not you believe the DBE Project Manager/Site Supervisor is exclusively employed by this DBE (not working for another contractor on this project).

Example: “Yes” or “No” (as appropriate). If “no,” provide an explanation as to why not.

Block #20: Check mark the appropriate “yes” or “no” block to acknowledge whether or not the DBE Project Manager/Site Supervisor is listed on the monthly invoice or certified payrolls (If certified payrolls are applicable). (Note: If this is a Consultant Services contract there may not be certified payroll. In this situation, FHWA has indicated we need to obtain a copy of the firm’s internal payroll documents)

Example: “Yes” or “No” (as appropriate). If “no,” provide an explanation as to why not.

Block #21: Check mark the appropriate “yes” or “no” block to acknowledge whether or not the DBE Project Manager / Site Supervisor is listed on any other contractor’s monthly invoice/certified payroll.

Example: “Yes” or “No” (as appropriate). If “yes,” provide an explanation as to why not.

Block #22: Enter the name and job title of the person who this DBE Project Manager reports to within this DBE organization.

Example: John Smith, DBE Business Owner

Block #23: Check mark the appropriate “yes” or “no” block to acknowledge whether or not the work described in Block #10 matches the type of work listed on the executed consultant agreement and approved DBE plan; or DBE subcontract.

Example: “Yes” or “No” (as appropriate). If “no,” provide an explanation as to why not.

Block #24: Enter the name of the company which is paying this DBE firm for the contracted work (Hiring Contractor).

Example: Doobi Brothers Consulting

Block 24(a): Enter the rates as defined in the task order or subcontract.

Block #25: Check mark the appropriate “yes” or “no” block to acknowledge whether or not any of this DBE firm’s employees are working for another contractor/consultant on this project.

Example: “Yes” or “No” (as appropriate). If “yes,” provide an explanation

Block #26: Check mark the appropriate “yes” or “no” block to acknowledge whether or not another consultant has performed work exclusively contracted to this DBE.

Example: “Yes” or “No” (as appropriate). If “yes,” provide an explanation.

Block #27: Check mark the appropriate “yes” or “no” block to acknowledge whether or not this DBE owner appears to be personally involved in the firm’s day-to-day operations for this project.

Example: “Yes” or “No” (as appropriate)

Block #28: Check mark the appropriate “yes” or “no” block to acknowledge whether or not this DBE firm has control over its contracted scope of work.

Example: “Yes” or “No” (as appropriate)

Block #29: Enter the name of WSDOT individual who conducted this review.

Example: Pleasant Paul Love

Block #30: Enter the job title of the WSDOT individual who conducted this review.

Example: WSDOT On-Site Inspector

Block #31: Sign this document as the reviewer.

Example: Pleasant Paul Love

Block #32: Enter the date of this review.

Example: December 25, 2014