

*Unified Certification Program*

**Disadvantaged Business Enterprise Program**

## **Disadvantaged Business Enterprise Program**

---

Unified Certification Program

This page intentionally left blank.

# Disadvantaged Business Enterprise Program

---

Unified Certification Program

## UCP Development Team

Delano R. Rackard	Director, Civil Rights and Business Development North Carolina Department of Transportation
Robert Mathes	North Carolina Department of Transportation
Angela M. Watson	City of High Point
Ruth Bowden	City of Greensboro
Kathleen Smith	City of Greensboro
Donna L. Davis	City of Fayetteville
A. Cleon Umphrey, Jr.	Raleigh-Durham Airport Authority
Todd Horsley	Triangle Transit Authority
Sharon Smiley	Greensboro Transit Authority
Scott Rhoney	Charlotte Area Transit System
Jim Mills	Charlotte Area Transit System
Lynise DeVance	Federal Highway Administration
Ken Weeden	Consultant, Ken Weeden & Associates, Inc.

## Team Advisors

Assad Tavakoli	Consultant
Joseph Herrin	Assistant Attorney General
Ned Harris	Supportive Services Consultant

## Team Support Personnel

Phil Henry	North Carolina Department of Transportation
Odessa McGlown	North Carolina Department of Transportation
Serena Favorite	North Carolina Department of Transportation

## **Disadvantaged Business Enterprise Program**

### Unified Certification Program

---

The North Carolina Department of Transportation (NCDOT) is the largest direct recipient of funds from the United States Department of Transportation (USDOT) in the State. The NCDOT shall act as the lead agency and shall perform Disadvantaged Business Enterprise Program certifications in accordance with this Unified Certification Program. The list below contains those entities that receive funds, both directly and indirectly, from USDOT and are required to abide by the terms and conditions of this UCP. Any questions concerning this list may be directed to the NCDOT Office of Civil Rights and Business Development.

### **United States Department of Transportation Direct Recipients**

#### **Highway**

City of Asheboro  
City of Charlotte  
City of Concord  
City of Durham  
City of Fayetteville  
City of Gastonia  
City of Goldsboro  
City of Greensboro  
City of Greenville  
City of Hickory  
City of Highpoint  
City of Monroe  
City of Raleigh  
City of Roanoke Rapids  
City of Shelby  
City of Statesville  
City of Wilmington  
City of Wilson  
City of Winston-Salem  
County of Columbus  
County of Anson  
County of Avery  
County of Currituck  
County of Franklin  
County of Harnett  
County of Lee  
County of Onslow  
County of Person  
County of Rutherford  
County of Sampson  
Town of Chapel Hill  
Town of Edenton  
Town of Elkin  
Town of Plymouth  
Town of Siler City  
Town of Tarboro  
Town of Wallace

#### **Aviation**

Albert J. Ellis Airport  
Asheville Regional Airport  
Charlotte-Douglas International Airport  
Craven County Regional Airport  
Fayetteville Regional / Grannis Field  
Piedmont-Triad International Airport  
Pitt-Greenville Airport  
Raleigh-Durham International Airport  
Wilmington International Airport  
Hickory Regional Airport  
Moore County Airport

#### **Transit**

City of Asheville / Asheville Transit System  
Town of Cary  
Town of Chapel Hill  
City of Charlotte  
City of Durham / Durham Area Transit Authority  
City of Fayetteville / Fayetteville Area System of Transit  
City of Gastonia / Gastonia Transit  
Goldsboro-Wayne Transportation Authority  
City of Greensboro / Public Transportation Division  
City of Greensboro / Piedmont Authority for Regional Transportation  
City of Greenville / Greenville Area Transit  
City of Hickory / Piedmont Wagon  
City of High Point  
City of Raleigh / Department of Transportation  
Research Triangle Regional Public Transportation Authority / Triangle Transit Authority  
City of Rocky Mount / Tar River Transit  
City of Wilmington / Wilmington Transit Authority  
City of Winston-Salem / Winston Salem Transit Authority

# Disadvantaged Business Enterprise Program

---

Unified Certification Program

## Table of Contents

<b>Introduction</b>	6
Purpose	
Operational Viability	
Reciprocity	
Applicability	
DBE Directory	
Penalties	
<b>Team and Process Development</b>	10
<b>Procedures</b>	
Certification Process	12
Appeal Process	16
Annual Affidavit	18
Recertification Process	20
Decertification Process	22
Third-party Challenges	25
Forms and Letters	28
<b>General Administration</b>	57
Governance and Management	
Implementation Schedule	

## **Disadvantaged Business Enterprise Program**

Unified Certification Program

---

### **Introduction**

#### *Purpose*

The purpose of the Unified Certification Program (or “UCP”) is to develop standardized procedures for certification of businesses as Disadvantaged Business Enterprises, also known as “DBEs”. The UCP is an agreement required by USDOT standardizing the process for certification of DBEs among those entities within a state that receive USDOT funds either directly or indirectly.

Recipients are those entities that receive funds directly from a USDOT agency – FHWA, FAA, or FTA. All participating recipients are required to be part of this agreement by signature. Although subrecipients (those that receive funds indirectly from a USDOT agency) are not required to sign this UCP agreement, they are legally bound to follow UCP certification actions.

This UCP shall follow all certification procedures and standards as required by 49 CFR, Part 23 and 26 and shall cooperate fully with oversight, review and monitoring activities of USDOT and its operating administrations. The UCP shall implement all USDOT directives and guidance concerning certification matters.

#### *Operational Viability*

The North Carolina Department of Transportation (NCDOT) shall commit the appropriate resources and expertise to ensure the requirements of this agreement are implemented timely. Upon receipt of final approval of this UCP by USDOT, start-up and maintenance budgets will be developed. The NCDOT shall bear the expense associated with program start-up, and a cost-sharing formula will be developed to determine each recipient’s contribution to the maintenance of the program.

The NCDOT and other recipients understand that the cost of maintaining the program must be shared among the users. So that the cost share is equitable, fair and supported by actual data (rather than estimates), the NCDOT has opted to assume all operational costs for the first year; During the first year, operational data will be gathered, stratified, and evaluated to determine the actual cost of operation.

After the actual cost of operation is determined, stakeholders will reconvene to evaluate possible cost sharing options, and select the option that is most reasonable and feasible to implement. In the event the stakeholders are unable to reach consensus on an alternative, the USDOT will be asked to intervene by providing mediation services.

#### *Reciprocity*

This UCP complies with the certification and non-discrimination requirements of 49 CFR, Part 23 and 26. Recipients may use only UCP’s that comply with the certification and non-discrimination requirements of 49 CFR, Part 23 and 26.

This UCP will not process an application for certification from a firm having its principal place of business outside the state if the firm is not certified by the UCP in the state where it maintains its principal place of business. Upon verification of information and documents, out-of-state certifications may be

## **Disadvantaged Business Enterprise Program**

### Unified Certification Program

---

accepted. NCDOT and its certifying agencies reserve the option to require additional documentation to meet North Carolina's certification requirements.

#### *Applicability*

Participation in the UCP would apply to any entity that receives FHWA, FAA, or FTA funds. Other than NCDOT, other entities primarily affected would be airport authorities and municipalities with local transit systems.

This UCP shall make all certification decisions on behalf of all USDOT recipients in North Carolina with respect to participation in the DOT DBE program.

1. Certification decisions by the UCP shall be binding on all DOT recipients within the state of North Carolina.
2. All recipients in this state will honor "one-stop" shopping to applicants for certification, such that an applicant is required to apply only once for a DBE certification.

Under North Carolina's UCP, all certifications will be conducted by the North Carolina Department of Transportation, with the exception of airport concessions, whose certifications will be completed by the airport itself. With regard to certifications, participants have agreed to the following stipulations:

1. The NCDOT will independently perform the certification of DBE firms as described in specific sections of 49 CFR Part 23 and 26 on behalf of the recipient.
2. The NCDOT will maintain a unified DBE directory containing, for all firms certified by the UCP, the information required by 49 CFR Part 26.31, and make it available to the public electronically, on the internet, as well as in print. The UCP shall update the electronic version of the directory by including additions, deletions, and other changes as soon as they are made.

The Recipient will ensure the following measure(s) are carried out:

1. The recipient will initiate the appropriate measures to ensure their database files accurately reflect qualified and certified DBE's prior to relinquishing said files to the NCDOT. The recipient will bear the cost of this clean up and transfer of data.
2. The recipient will participate in a reasonable cost sharing option as agreed upon by the stakeholders.

#### *DBE Directory*

In accordance with 49 CFR, Part 26.31, this UCP shall maintain and make available to interested persons a unified DBE directory identifying all firms eligible (including those from other states certified under the provisions of 49 CFR, Part 26) to participate as a DBE in North Carolina's program. This directory shall contain, at a minimum, the firm's name, address, phone number, and the types of work the firm is qualified to perform as a DBE. The on-line unified DBE directory will support real-time revisions and access, and will be made available to the public electronically, on the internet, and in print. The hard-copy directory will be printed and made available to interested persons at least annually.

## **Disadvantaged Business Enterprise Program**

### Unified Certification Program

---

The NCDOT will maintain the information contained in the directory and implement the appropriate measures to ensure the integrity of the data is preserved.

Terms in the document are more particularly defined in the Federal requirements for Disadvantaged Business Enterprises as set forth in the Code of Federal Regulations, including, but not limited to those terms contained in 49 CFR Part 26 et. seq.

Some common acronyms seen throughout the document are defined below:

<b>UCP</b>	Unified Certification Program	The UCP is a Unified agreement required by USDOT standardizing the process for certification of DBEs among those entities within a state that receive USDOT funds either directly or indirectly.
<b>DBE</b>	Disadvantaged Business Enterprise	The Department has the important responsibility of ensuring that firms competing for DOT-assisted contracts are not disadvantaged by unlawful discrimination. For eighteen years, the Department's most important tool for meeting the responsibility has been its Disadvantaged Business Enterprise (DBE) program. The program began in 1980. Originally, the program was a minority/women's business enterprise program established by regulation under the authority of Title VI of the Civil Rights Act of 1964 and other nondiscrimination statutes that apply to DOT financial assistance programs.
<b>USDOT</b>	United States Department of Transportation	The Department of Transportation was established by an act of Congress on October 15, 1966, the Department's first official day of operation was April 1, 1967. The mission of the Department is to serve the United States by ensuring a fast, safe, efficient, accessible and convenient transportation system that meets our vital national interests and enhances the quality of life of the American people, today and into the future.
<b>FHWA</b>	Federal Highway Administration	The FHWA is the branch of USDOT that administers highway transportation activities including standards development, research and technology, training, technical assistance, highway access to federally owned lands and



## Disadvantaged Business Enterprise Program

---

### Unified Certification Program

Indian lands, and commercial vehicle safety enforcement. Further, FHWA has a significant role, working through partnerships, programs, policies, and allocating resources which facilitate the strategic development and maintenance of State and local transportation systems as effective and efficient elements of the national intermodal transportation system.

<b>FAA</b>	Federal Aviation Administration	The Federal Aviation Administration (FAA) is the branch within USDOT with primary responsibility for the safety of civil aviation. The FAA was originally designated the Federal Aviation Agency when established by the Federal Aviation Act of 1958. The present name was adopted in 1967 when the FAA became a component of the Department of Transportation.
<b>FTA</b>	Federal Transit Administration	The Federal Transit Administration is the branch of USDOT that provides financial and technical assistance to the local transit systems.
<b>SBA</b>	Small Business Administration	SBA and USDOT have jointly entered into Memorandums of Understanding (MOUs) and Partnership Agreements in an effort to: streamline procedures for expediting the certification requirements of SBA regulations; establish basic procedures for expediting the award of requirements pursuant to section 8(a) of the Small Business Act; and to support the government-wide major procurement goal for participation of small business concerns owned and controlled by women.

### *Penalties*

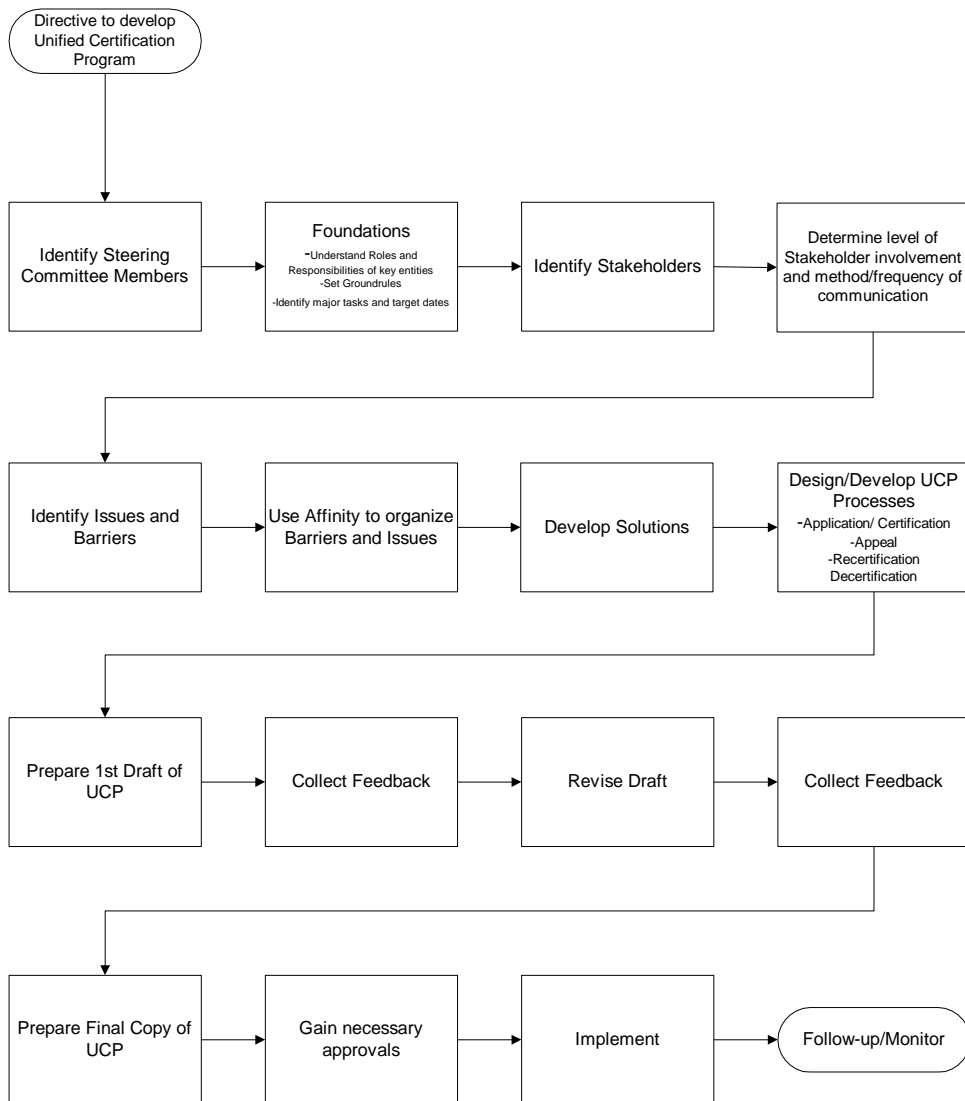
The penalties for failing to comply or enter into a UCP agreement could include suspension or termination of Federal funds, or refusal to approve projects, grants, or contracts until the UCP is in place.

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### Team Process and Development

A provision to provide “one-stop” certification for Disadvantaged Business Enterprises, commonly known as the Unified Certification Program (UCP), is contained in the new 49 CFR Part 26. The North Carolina Department of Transportation was entrusted to spearhead the development of the UCP and thus act as the lead agency. The lead agency was expected to develop the process, identify stakeholders, and host meetings to facilitate the development of the UCP. Additionally, the lead agency was to ensure that the document was prepared and submitted for approval within the necessary timeframes. After the document is approved, the lead agency will answer inquiries from recipients and ensure the data are properly maintained.



## **Disadvantaged Business Enterprise Program**

---

### Unified Certification Program

Since buy-in must exist to achieve the overall goal of developing and submitting an agreement, stakeholder involvement was paramount throughout the process. The approach that would be used to achieve the overall goal and maintain stakeholder involvement was to:

- Identify a core planning group comprised of the NCDOT Director of Civil Rights and Business Development (or the designee), the Civil Rights Program Manager from FHWA, an Attorney for the North Carolina Department of Justice to provide legal counsel to NCDOT, and two Consultants from Productivity Services. The group was responsible for gathering information, preparing correspondence, and planning meetings of the UCP Development Team.
- Plan and conduct a series of UCP Development Team meetings to facilitate the development of the UCP. The UCP Development Team was responsible for identifying and resolving issues that impact the development and management of the Unified Certification Program.

The UCP Development Team was selected from the group that attended the UCP Workshop sponsored by the Federal Highway Administration in Atlanta in March 2001. These people were found to have in-depth knowledge of the certification process and represented a balanced cross-section of the recipients that must participate in the UCP following its development.

The team identified stakeholders and created a communication plan to continuously involve them in the development process. The team also identified issues that needed to be resolved in order to meet the implementation date directed by USDOT, created action plans, and assigned tasks to subgroups.

The team circulated the program draft among the stakeholders, including certifying agencies, DBEs, and agency management, to gather feedback on the layout and content. The feedback was collected and integrated, then redistributed for additional feedback. With the feedback, a conference was held to present the final plan for North Carolina's Unified Certification Program.

## Disadvantaged Business Enterprise Program

Unified Certification Program

---

### Certification Process

#### Purpose

The purpose of the certification process is to provide NCDOT a standardized process for reviewing, and approving or denying requests for certification as a Disadvantaged Business Enterprise.

#### Process Description:

1. An application packet is received by the certifying agency. The applicant may call the agency to request an application packet or one may be downloaded from the website.
2. The application (*Attachment A*) is entered into the database and given a status of “Received”. The appropriate blocks are annotated on the checklist to indicate the documentation that was received within the packet. *SBA certified applicants go to step 3; all other applicants will proceed to step 4.*
3. The application is reviewed to determine if the applicant is currently SBA certified. If it is found that the applicant holds a SBA certification, the certifying agency will contact the agency that issued the certification to request the certification documents. A letter will be sent to the applicant to provide the status of the application (*Attachment C2*). The applicant’s status in the database will be changed to “Pending”.
  - a) After the documentation is received from the SBA certifying agency, a site visit will be conducted. If the applicant is out of state, the lead certifying agency for that state will be contacted and asked to conduct the site visit, otherwise the site visit will be conducted by the in-state certifying agency that received the application.
  - b) A recommendation for approval or denial will be presented to the appropriate authorities within the certifying agency and a decision will be made.
    - If the application is approved, a “Confirmation” letter will be sent to the applicant (*Attachment G1*). The applicant’s status will be changed to “Approved” in the database. The DBE Directory is updated.
    - If the application is denied, a “Denial” letter will be sent (*Attachment D1*). The applicant’s status will be changed to “Denied” in the database.
    - SBA applicants will be afforded the same appeal rights as non SBA applicants.
4. The application packet is reviewed for completeness and basic eligibility. During the review, the application is assigned a status of “Pending” in the database.
  - a) If the application packet is incomplete, an “Exception” letter will be forwarded to the applicant. The letter will inform the applicant that the packet has been received, but is missing specific documentation that is required to make a decision (*Attachment B1*). The applicant will be allowed fifteen days to provide the required documentation.
    - After the fifteen-day wait period has elapsed, and required documentation has been received, the applicant will receive an “Acknowledgement” letter (*Attachment C1*).
    - If required documentation has not been received within the fifteen day wait period, a “Second Notice: Exception Letter” will be mailed giving the applicant an additional fifteen days to provide the required documentation (*Attachment B2*).
      - If required documentation is received, an “Acknowledgement” letter (*Attachment C1*) will be forwarded.

## Disadvantaged Business Enterprise Program

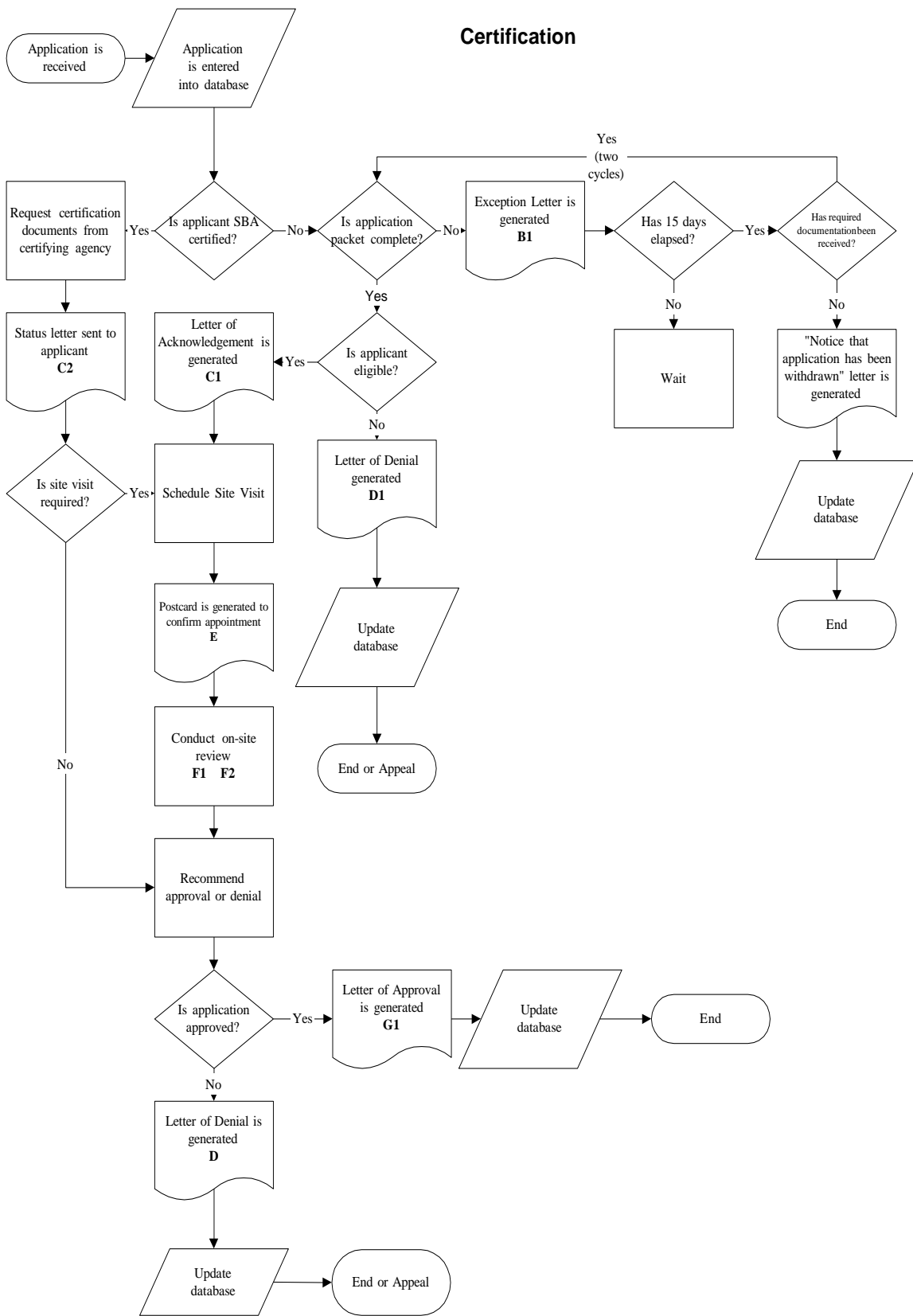
---

### Unified Certification Program

- If required documentation is not received, the applicant will receive a “Notification that Application has been withdrawn” letter (*Attachment D3*). The applicant’s status in the database may be changed to “withdrawn”. The applicant may reapply at any time.
- b) If the packet is complete, an eligibility decision will be made and a letter of “Acknowledgement” or “Denial” will be sent.
  - 1) The “Acknowledgement” letter will inform the applicant that the application has been received and a site visit will be scheduled (*Attachment C1*). The applicant’s status in the database will be changed to “Pending”.
  - 2) The “Denial” letter will inform the applicant that the application has been received, but the applicant does not meet the basic eligibility criteria. The applicant will be informed of appeal rights and procedures (*Attachment D1*). The applicant’s status in the database will be changed to “Denied”.
- 5. A post card will be forwarded to the applicant informing him/her of the scheduled site visit date (*Attachment E*). The site visit will be conducted by the certifying agency that received the application.
- 6. The site visit is conducted (*Attachment F*).
- 7. A recommendation for approval or denial will be presented to the appropriate authority within the certifying agency. A decision will be made.
  - If the application is approved, an “Approval” letter will be sent to the applicant (*Attachment G1*). The applicant’s status will be changed to “Approved” in the database. The DBE Directory is updated.
  - If the application is denied, a “Denial” letter will be sent (*Attachment D1*). The applicant’s status will be changed to “Denied” in the database.

# Disadvantaged Business Enterprise Program

## Unified Certification Program



## **Disadvantaged Business Enterprise Program**

---

Unified Certification Program

### Reapplication

- If an applicant's request for certification is denied, the applicant may reapply one year from the date of denial. Pursuant to the provisions of 49 CFR Part 26.85(b), when a firm is denied it shall not be allowed to reapply for certification for a period of twelve months from the date that the applicant receives notice of the denial. Notices of denial will be sent to the applicant by certified mail, return receipt requested.
- The process to reapply is the same as the application process. All applicable forms must be completed and all required documentation must be submitted.

## Disadvantaged Business Enterprise Program

Unified Certification Program

---

### Appeal Process

#### Purpose

The purpose of the appeal process is to provide NCDOT a standardized method for review of certification decisions.

Note: The North Carolina appeals process is not a remedy a firm must exhaust before transmitting a certification appeal to USDOT. That is, after an initial denial, a firm could go to the North Carolina appeals process, and then to USDOT, or go directly to the USDOT process, bypassing the North Carolina appeal process.

#### Process Description

1. The appeal process may be initiated by the applicant upon receipt of a denial letter generated by the certifying agency. The denial letter will explain to the applicant why the application was denied, provide appeal procedures, and a timeline to appeal. The date on the returned receipt will start the 30-day appeal clock. Appeal rights following initial denial of an applicant's request for DBE certification are more specifically set forth under 49 CFR Part 26.85(a).
2. The applicant must inform the certifying agency *in writing* of the intent to appeal the denial decision.
  - If the written notification is not received within the required 30-day timeframe, a "Missed Deadline" letter will be generated (*Attachment H*). The status in the database will remain "denied".
  - If the written notification is received within the required 30-day timeframe, a "Confirmation of Appeal" letter will be generated (*Attachment I*). The status in the database will be changed to "Appeal".
3. The certifying agency shall appoint a hearing panel which will consist of a Chairperson and two additional members from the certifying agency with knowledge of the certification process. The person who originally denied the application cannot be a member of the panel.
4. The Chairperson shall contact the applicant to schedule a hearing. The hearing is conducted at a mutually agreed upon time and place of the applicant and the panel.
5. After the hearing appointment is scheduled, an "Appointment Confirmation" postcard will be generated and forwarded to the applicant (*Attachment E2*).
6. The hearing information is reviewed and a decision to uphold or overturn the original determination is rendered.
  - If the panel decides to uphold the original determination, a "Denial Upheld" letter (*Attachment J*) is generated and forwarded to the applicant. The status in the database will be changed to "Denied".
  - If the panel decides to overturn the original determination, a "Denial Overturned (Decision Reversed)" letter (*Attachment G2*) is generated and the applicant is awarded a "Certificate" (*Attachment P*). The status in the database will be changed to "Approved".

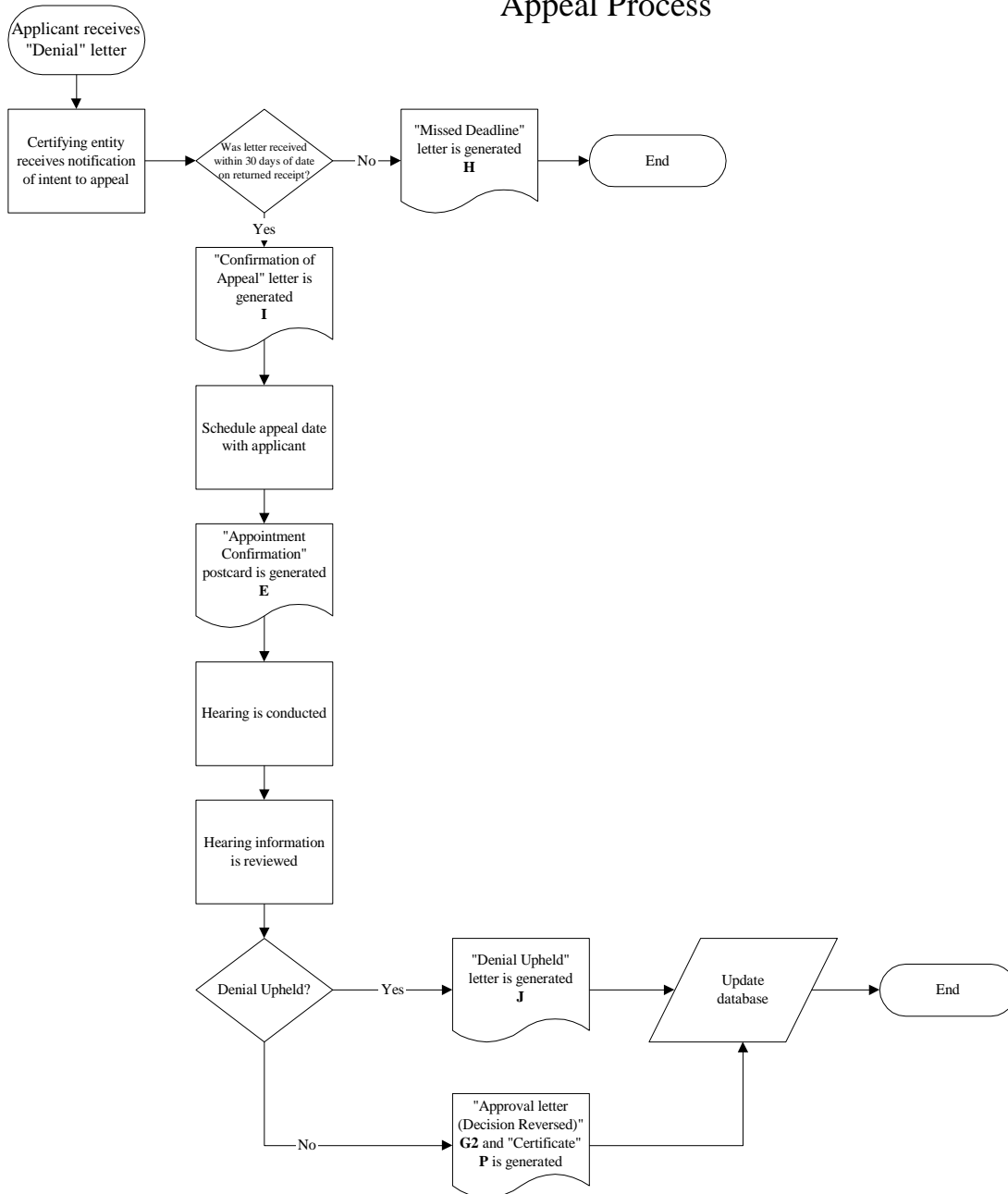


# Disadvantaged Business Enterprise Program

## Unified Certification Program

- If the hearing panel upholds the original determination, the applicant may appeal to the USDOT. Pending the decision of the USDOT, the decision of the hearing panel is administratively final and remains in effect.

### Appeal Process



## Disadvantaged Business Enterprise Program

---

Unified Certification Program

### Annual Affidavit Process

#### Purpose

The purpose of the Annual Affidavit Process is to provide NCDOT a standardized process for validating the status of a business' structure, ownership, control, or financial status within the previous year that would affect eligibility for continued participation in the DBE program.

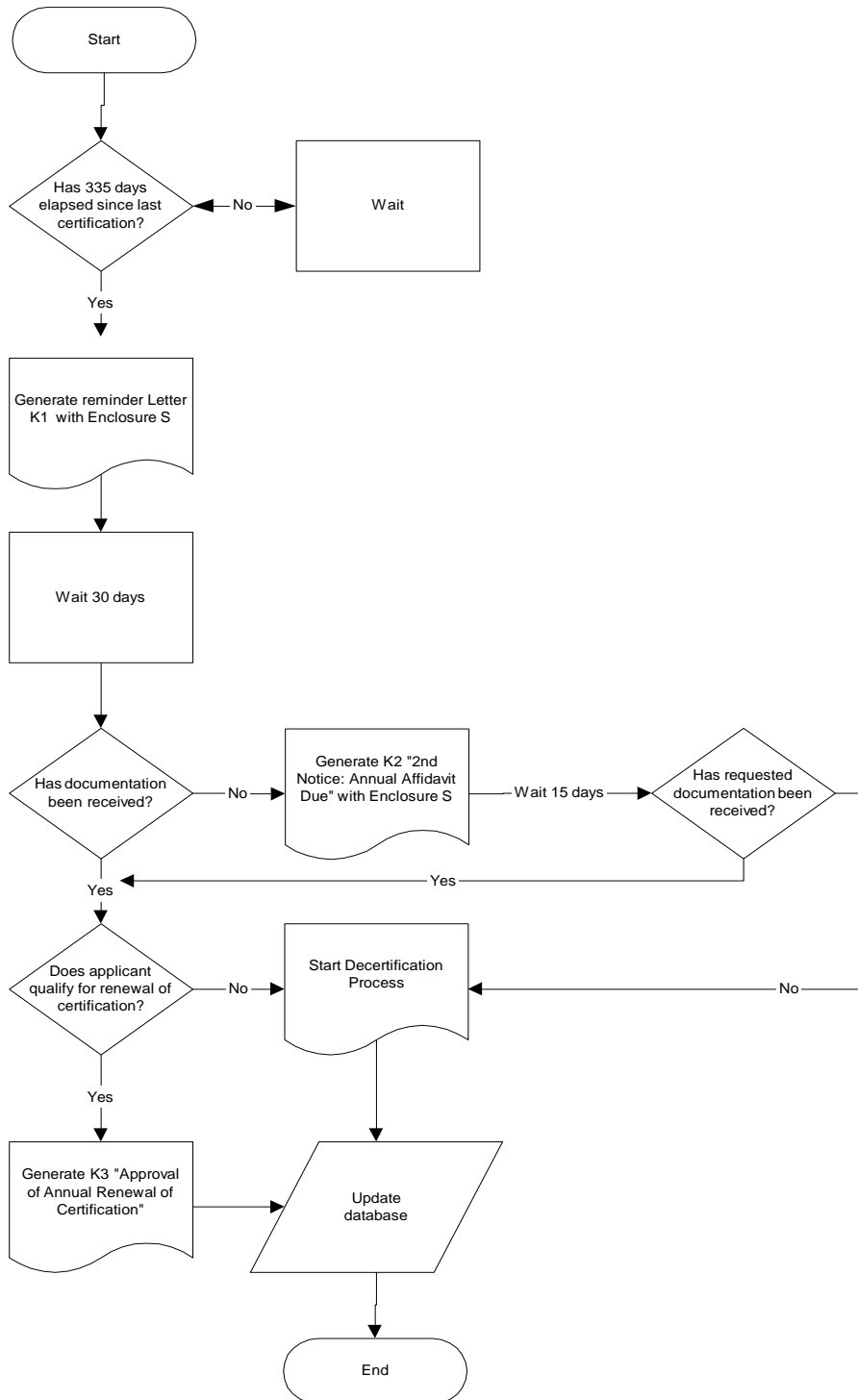
#### Process Description

1. Each year on the anniversary of the original certification, the DBE is required to submit an affidavit that confirms business operations, when compared to the previous year, remain unchanged. On or about the 335<sup>th</sup> day after initial certification is granted and on the same date each year thereafter, an affidavit form (*Attachment S*) and reminder letter (*Attachment K1*) with instructions will be forwarded to the DBE. The computer will maintain the clock and remind the certifying agency that the appropriate time has elapsed.
2. The NCDOT will wait 30 days for a response from the DBE.
  - a. If 30 days have elapsed and the documentation *has not* been received, the NCDOT will generate a "2<sup>nd</sup> Notice- Annual Affidavit Due" (*Attachment K2*) and "Affidavit: Annual Renewal of Certification for DBE Programs" (*Attachment S*) to notify the DBE of the certifying entity's intent to initiate decertification action.
  - b. If the appropriate documentation is received prior to the completion of the decertification process, the NCDOT will review the affidavit to determine if the firm meets the eligibility requirements set forth in the regulation.
  - c. If the documentation is received after the completion of the decertification process, the firm must wait for twelve months and submit an application for certification.
- (1) If the firm meets the eligibility requirements, the NCDOT will prepare the "Approval of Annual Renewal of Certification" (*Attachment K3*). The database will be updated to reflect a certified status.
- (2) If the firm does not meet the eligibility requirements, the NCDOT will prepare the "Decertification" (*Attachment M*). The letter will outline the NCDOT's decision, the reason for the decision, and appeal rights and procedures. The firm's status will be updated to reflect the "not certified" status.

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### Annual Affidavit Process



## **Disadvantaged Business Enterprise Program**

---

Unified Certification Program

### **Recertification Process**

#### Purpose

The purpose of the Recertification Process is to provide NCDOT a standardized process for reviewing three-year certification data for compliance, which will allow continued participation in the DBE program.

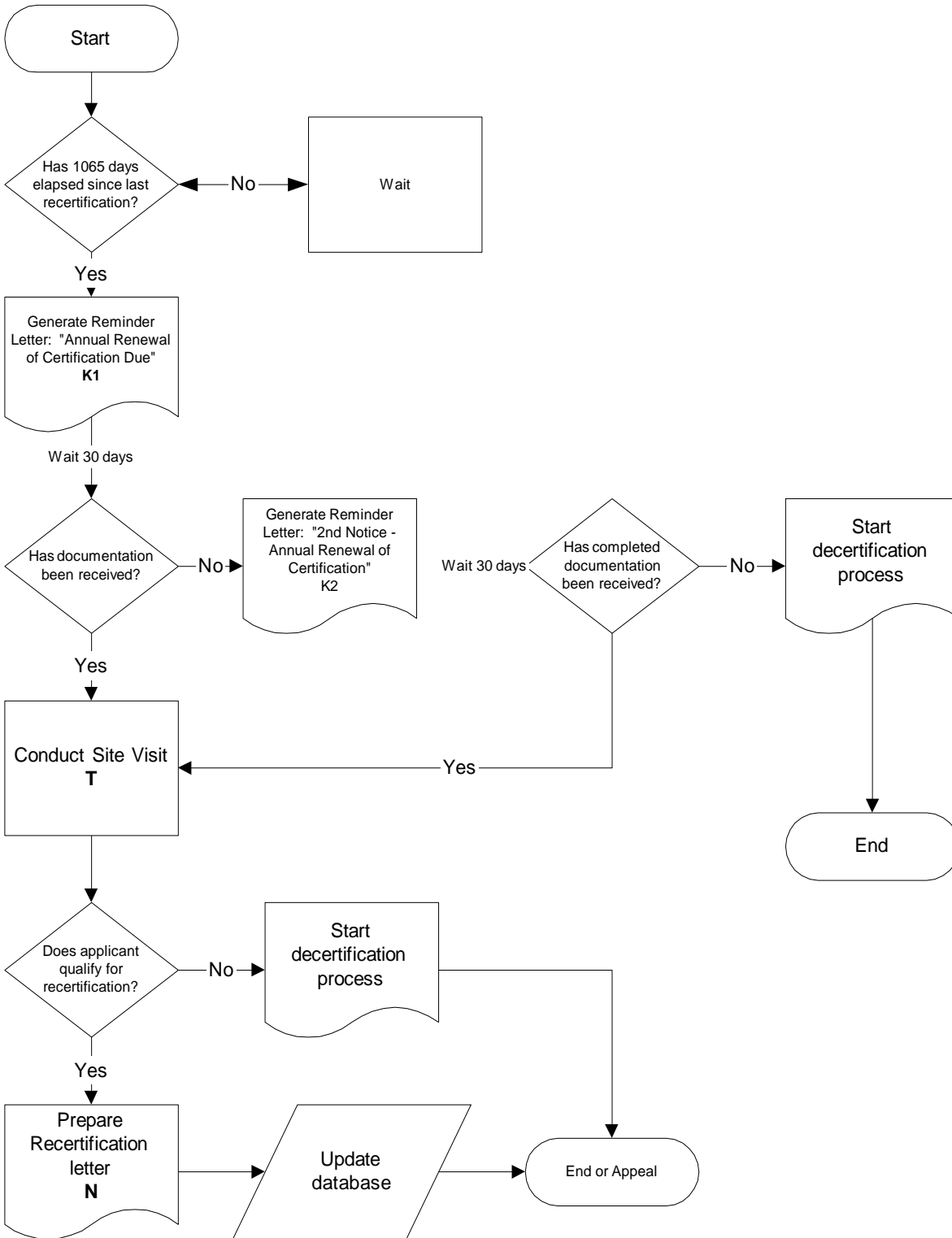
#### Process Description

1. On or about the 1065<sup>th</sup> day after initial certification is granted, an affidavit form and an “Annual Renewal of Certification Due” reminder letter with instructions will be forwarded to the DBE. The computer will maintain the clock and remind the certifying agency that the appropriate time has elapsed.
2. The NCDOT will wait 30 days for a response from the DBE.
  - a. If 30 days have elapsed and the documentation *has not* been received, the NCDOT will generate a “Annual Renewal of Certification Due – 2<sup>nd</sup> Notice” letter (*Attachment K2*) and a duplicate affidavit form and forward these documents to the DBE. The NCDOT will wait an additional 30 days. If the necessary documentation has not been received, the NCDOT will start the decertification process. The database will remain unchanged until the completion of the certification process.
  - b. If 30 days have elapsed and the documentation *has* been received, the NCDOT will determine if a site visit is required. If a site visit is required, the DBE will be notified of the time and date of the visit (*Attachment E*). The visit will be conducted and a recertification decision made. If a site visit is not required, the renewal decision will be made using other available documentation.
  - c. If it is determined that the DBE is not eligible for recertification, the NCDOT will start the decertification process. The database will remain unchanged until the completion of the certification process.
3. If the DBE is eligible for continued certification, a “Recertification” letter (*Attachment N*) and certificate will be generated. The database will be updated with the status “certified”.

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### Recertification



## Disadvantaged Business Enterprise Program

Unified Certification Program

---

### Decertification Process

#### Purpose

The purpose of the decertification process is to provide NCDOT a standardized process for making decertification decisions. Reasons for decertification include but are not limited to the transfer of ownership and/or control to a non-qualified individual, or when the personal net worth or gross receipts have exceeded the requirements. A decertification proceeding can also commence as a result of a directive from a USDOT operating administration, a recipient's own initiative, as well as a third party challenge.

#### Process Description

1. The NCDOT should review documentation currently on file to identify factual information regarding the firm.
2. The NCDOT will determine what additional documentation, if any, is required to continue the investigation. The additional documentation will be requested in *writing (Attachment R1: "Request for Documentation" letter)*.
3. The NCDOT will wait 30 days for documentation to be received. If after 30 days the documentation has *not* been received, the NCDOT will generate a second request for the documentation (*Attachment R1: "Second Notice – Request for Documentation"*). After the letter is mailed, the NCDOT will wait an additional fifteen days for the documentation to be received.
  - a. If the documentation has not been received after the additional fifteen day period, the NCDOT will generate a "Decertification" letter (*Attachment M*).
  - b. If the documentation has been received within the initial thirty-day or the additional fifteen-day period, the NCDOT will review the documentation.
4. After reviewing the documentation, the NCDOT will determine if a site visit is necessary.
  - a. If a site visit is necessary, the NCDOT will schedule the site visit and inform the firm of any additional documentation that should be made available during the visit. A confirmation of appointment postcard will be mailed to the firm (*Attachment E1*). The site visit will be conducted as scheduled.
  - b. If a site visit is not necessary, the NCDOT will use the available documentation to make a decertification recommendation.
5. After a thorough review of documentation and/or the site visit, the NCDOT will make a certification decision.
  - a. If it is determined that the firm is eligible for continued participation, an approval letter (*Attachment G1*) will be generated and mailed to the firm.
  - b. If it is determined that the firm is not eligible for continued participation, the recommendation will be forwarded to the DBE Liaison in the certifying agency to review and make a final decision.
    - (1) If the DBE liaison does not agree with the decertification recommendation, an approval letter (*Attachment G1*) will be generated and mailed to the firm.
    - (2) If the DBE liaison approves the recommendation, the firm will be de-certified, a "Decertification Letter" (*Attachment M*) will be generated, and the database will be updated with the status "Not Certified".

## **Disadvantaged Business Enterprise Program**

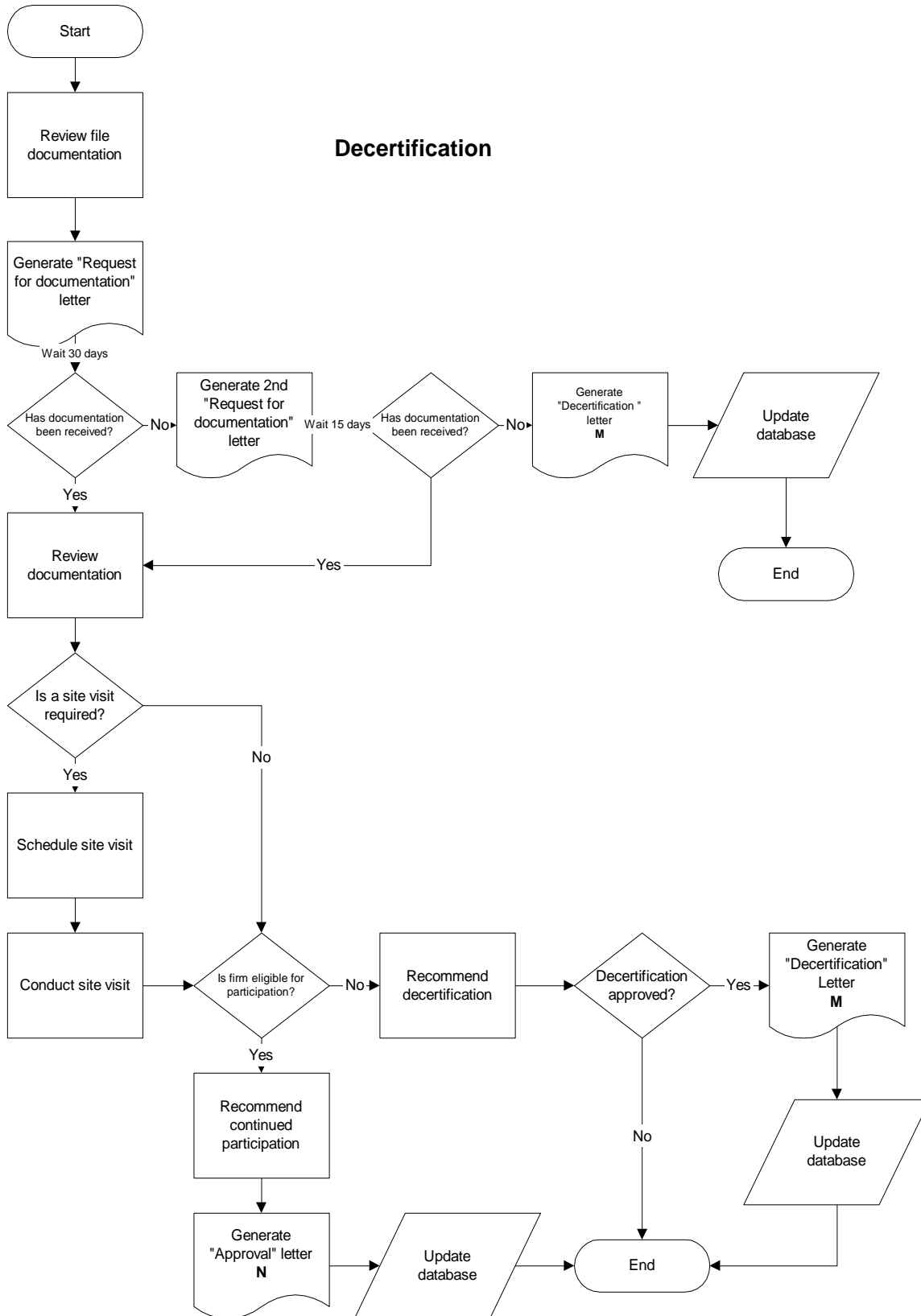
---

### Unified Certification Program

6. A party may appeal its decertification in the same manner as a party who has been denied certification. Pending the decision of the USDOT, the decision of the hearing panel is administratively final and remains in effect.

# Disadvantaged Business Enterprise Program

## Unified Certification Program





## Disadvantaged Business Enterprise Program

Unified Certification Program

---

### Third-Party Challenge Investigation

#### Purpose

The purpose of the third-party challenge investigation process is to provide NCDOT a standardized process for investigating third-party challenges and making a decertification decision. Reasons for decertification include but are not limited to the transfer of ownership and/or control to a non-qualified individual, or when the personal net worth or gross receipts have exceeded the requirements. A decertification proceeding can commence as a result of a directive from a USDOT operating administration, a recipient's own initiative, as well as a third party challenge.

#### Process Description

1. The receipt of a notarized "DBE Eligibility Complaint Form" (*Attachment T*) initiates a third-party complaint. The form may be downloaded from the forms directory or requested from a NCDOT. The form cannot be accepted without proper notarization. The complaint must be directed to the NCDOT.
2.
  - a. An "Acknowledgement of Receipt of Third-party Complaint" letter (*Attachment U1*) is generated and sent to the complainant. The letter will acknowledge receipt of the complaint form, and inform the complainant of the investigation process and the estimated time to complete the investigation.
  - b. A "Notice of Investigation" letter (*Attachment U2*) will be generated and sent to the firm against whom the complaint is alleged. The letter will inform the firm of the investigation process, the estimated time to complete the investigation, and the firm's status during the investigation period.
3. The NCDOT should review documentation currently on file to identify factual information regarding the firm. The NCDOT will determine what additional documentation, if any, is required to continue the investigation. The additional documentation will be requested in writing (*Attachment R1: "Request for Documentation" letter*).
4. The NCDOT will wait 30 days for documentation to be received. If after 30 days the documentation has *not* been received, the NCDOT will generate a second request for the documentation (*Attachment R2: "Second Notice – Request for Documentation"*). After the letter is mailed, the NCDOT will wait an additional fifteen days for the documentation to be received.
  - a. If the documentation has not been received after the additional fifteen-day period, the NCDOT will continue the investigation using the information currently on file.
  - b. If the documentation has been received within the initial thirty-day or the additional fifteen-day period, the NCDOT will review the documentation.
5. After reviewing the documentation, the NCDOT will determine if a site visit is necessary and if the necessary site visit should be scheduled or impromptu. If a site visit is necessary, the NCDOT may schedule the site visit and inform the firm of any additional documentation that should be available during the visit. A confirmation of appointment postcard may be mailed to the firm (*Attachment E1*). If a site visit is not necessary, the NCDOT will use the available documentation to make a decertification recommendation.
6. After a thorough review of documentation and/or the site visit, the NCDOT will make a recommendation to the DBE Liaison within the agency.

## **Disadvantaged Business Enterprise Program**

---

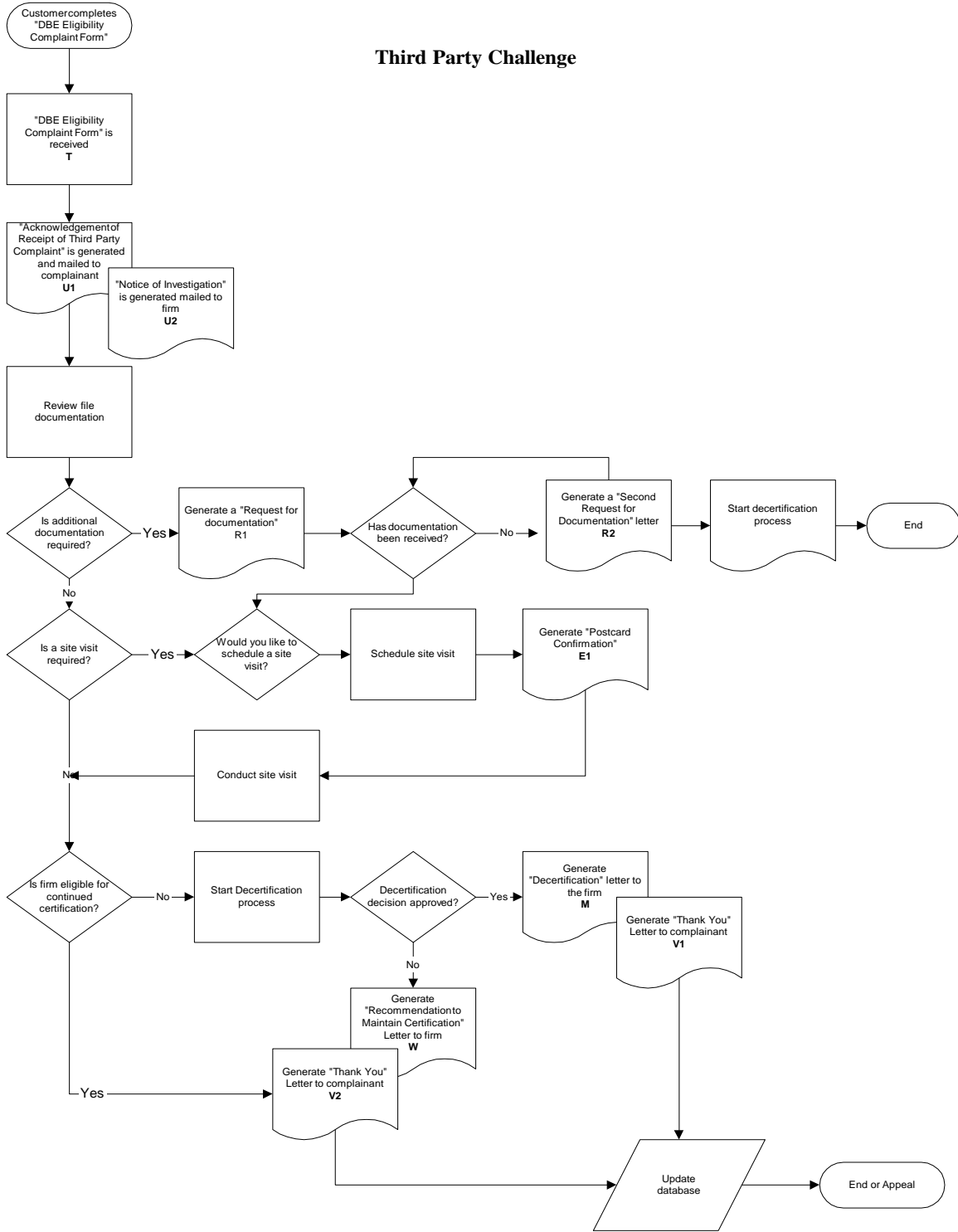
### Unified Certification Program

7.
  - a. If it is recommended that the firm maintain its current certification status, a “Recommendation to Maintain Certification” letter (*Attachment G1*) will be generated and mailed to the firm. A “Thank You” letter (*Attachment V2*) will be generated and mailed to the complainant. The letter will state the results of the investigation.
  - b. If it is determined that the firm is not eligible for continued participation in the DBE program, the NCDOT will start the decertification process. A “Thank You” letter (*Attachment VI*) will be generated and mailed to the complainant. The letter will state the results of the investigation. The firm’s status will remain unchanged until after the completion of the decertification process.
8. A party may appeal its decertification in the same manner as a party who has been denied certification.

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### Third Party Challenge



## **Disadvantaged Business Enterprise Program**

---

Unified Certification Program

### **Forms and Letters**

#### Purpose

Forms and letters are provided as templates for the UCP to use to collect information to be used in the certifying decision, and to communicate with the applicant throughout the process.

The substance of the letters will be applied to the NCDOT's letterhead and signed by the manager responsible for the coordination of the Unified Certification Program.

#### Attachment List

- A. Unified Certification Application
- B1. Exception Letter
- B2. Second Exception Letter
- C1. Acknowledgement Letter
- C2. SBA Acknowledgement Letter
- D1. Denial Letter
- D2. Denial Letter: Failure to Maintain Certification
- D3. Notification that application has been withdrawn
- E1. Postcard Confirmation
- E2. Postcard Confirmation (Appeal)
- F. Site Visit Questionnaire
- G1. Approval Letter
- G2. Approval Letter (Decision Reversed)
- H. Denial of Appeal Procedures Letter
- I. Confirmation of Appeal Letter
- J. Denial Upheld Letter
- K1. Reminder "Annual Affidavit Due" Letter (with Attachment S)
- K2. 2<sup>nd</sup> Notice – Annual Affidavit
- K3. Approval of Annual Renewal of Certification
- M. Decertification
- P. Certificate of Achievement
- Q. Customer Request for Removal from Directory
- R1. Request for Documentation
- R2. Request for Documentation (2<sup>nd</sup> Request)
- S. Annual Renewal of Certification Affidavit
- T. DBE Eligibility Complaint Form
- U1. Acknowledgement of Receipt of Third-party Complaint
- U2. Notice of Investigation
- V1. Thank You Letter (3<sup>rd</sup> Party Challenge / Decertified)
- V2. Thank You Letter (3<sup>rd</sup> Party Challenge / No Change in Status)
- W. Recommendation to Maintain Certification
- X. Memorandum of Agreement

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### A. Unified Certification Application

*Disadvantaged Business Enterprise Program  
49 C.F.R. part 26*

#### Uniform Certification Application

*Roadmap for Applicants*

⌘ **Should I apply?**

- Is your firm at least 51%-owned by a socially and economically disadvantaged individual(s) who also controls the firm?
- Is the disadvantaged owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
- Is your firm a small business that meets the Small Business Administration's (SBA's) size standard and does not exceed \$17.42 million in gross annual receipts?
- Is your firm organized as a for-profit business?

⇒ If you answered "Yes" to all of the questions above, you may be eligible to participate in the U.S. DOT DBE program.

⌘ **Is there an easier way to apply?**

If you are currently certified by the SBA as an 8(a) and/or SDB firm, you may be eligible for a streamlined certification application process. Under this process, the certifying agency to which you are applying will accept your current SBA application package in lieu of requiring you to fill out and submit this form. **NOTE: You must still meet the requirements for the DBE program, including undergoing an on-site review.**

⌘ **Be sure to attach all of the required documents listed in the Documents Check List at the end of this form with your completed application.**

⌘ Where can I find more information?

- U.S. DOT – <http://osdbuweb.dot.gov/business/dbe/index.html> (this site provides useful links to the rules and regulations governing the DBE program, questions and answers, and other pertinent information)
- SBA – <http://www.ntis.gov/naics> (provides a listing of NAICS codes) and <http://www.sba.gov/size/index/size.html> (provides a listing of SIC codes)
- 49 CFR Part 26 (the rules and regulations governing the DBE program)

Under Sec. 26.107 of 49 CFR Part 26, dated February 2, 1999, if at any time, the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 49 CFR Part 29, take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### Section 1: CERTIFICATION INFORMATION

#### A. Prior/Other Certifications

Is your firm currently certified for any of the following programs? (If Yes, check appropriate box(es))	<input type="checkbox"/> DBE	Name of certifying agency:
		Has your firm's state UCP conducted an on-site visit?
		<input type="checkbox"/> Yes, on ___/___/___ State: _____ <input type="checkbox"/> No
	<input type="checkbox"/> 8(a)	<b>⊗ STOP!</b> If you checked either the 8(a) or SDB box, you <u>may not</u> have to complete this application. Ask your state UCP about the streamlined application process under the SBA-DOT MOU.
	<input type="checkbox"/> SDB	

#### B. Prior/Other Applications and Privileges

Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application for any of the programs listed above, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?

Yes, on \_\_\_/\_\_\_/\_\_\_  No

If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action:

### Section 2: GENERAL INFORMATION

#### A. Contact Information

(1) Contact person and Title:		(2) Legal name of firm:		
(3) Phone #:	(4) Other Phone #:	(5) Fax #:		
(6) E-mail:		(7) Website (if have one):		
(8) Street address of firm (No P.O. Box):	City:	County/Parish:	State:	Zip:
(9) Mailing address of firm (if different):	City:	County/Parish:	State:	Zip:

#### B. Business Profile

(1) Describe the primary activities of your firm:	(2) Federal Tax ID (if any):
(3) This firm was established on ___/___/___	(4) I/We have owned this firm since: ___/___/___
(5) Method of acquisition (check all that apply): <input type="checkbox"/> Started new business <input type="checkbox"/> Bought existing business <input type="checkbox"/> Inherited business <input type="checkbox"/> Secured concession <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other (explain) _____	

(6) Is your firm "for profit"? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>⊗ STOP!</b> If your firm is NOT for-profit, then you do NOT qualify for this program and do NOT need to fill out this application.
(7) Type of firm (check all that apply): <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other, Describe: _____	
(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, explain: _____	

# Disadvantaged Business Enterprise Program

## Unified Certification Program

(9) Number of employees: Full-time _____ Part-time _____ Total _____
(10) Specify the gross receipts of the firm for the last 3 years: Year _____ Total receipts \$ _____ <div style="text-align: center;">Year _____ Total receipts \$ _____  Year _____ Total receipts \$ _____</div>

### C. Relationships with Other Businesses

(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity? <input type="checkbox"/> Yes <input type="checkbox"/> No  If Yes, identify: Other Firm's name: _____ Explain nature of shared facilities: _____									
(2) At present, or at any time in the past, has your firm:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">(a) been a subsidiary of any other firm?</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td style="padding: 2px;">(b) consisted of a partnership in which one or more of the partners are other firms?</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td style="padding: 2px;">(c) owned any percentage of any other firm?</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td style="padding: 2px;">(d) had any subsidiaries?</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </table>	(a) been a subsidiary of any other firm?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(b) consisted of a partnership in which one or more of the partners are other firms?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(c) owned any percentage of any other firm?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(d) had any subsidiaries?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(a) been a subsidiary of any other firm?	<input type="checkbox"/> Yes <input type="checkbox"/> No								
(b) consisted of a partnership in which one or more of the partners are other firms?	<input type="checkbox"/> Yes <input type="checkbox"/> No								
(c) owned any percentage of any other firm?	<input type="checkbox"/> Yes <input type="checkbox"/> No								
(d) had any subsidiaries?	<input type="checkbox"/> Yes <input type="checkbox"/> No								
(3) Has any other firm had an ownership interest in your firm at present or at any time in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No									
(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each ( <i>attach extra sheets, if needed</i> ):									
<u>Name</u>	<u>Address</u>								
<u>Type of Business</u>									
1.									
2.									
3.									

### D. Immediate Family Member Businesses

Do any of your immediate family members own or manage another company? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If Yes, then list ( <i>attach extra sheets, if needed</i> ):				
<u>Name</u>	<u>Relationship</u>	<u>Company</u>	<u>Type of Business</u>	<u>Own or Manage?</u>
1.				
2.				

## Section 3: OWNERSHIP

**Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below** (*If more than one owner, attach separate sheets for each additional owner*):

### A. Background Information

(1) Name:	(2) Title:	(3) Home Phone #:
(4) Home Address ( <i>street and number</i> ):		City: State: Zip:
(5) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		(6) Ethnic group membership ( <i>Check all that apply</i> ): <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Asian Pacific <input type="checkbox"/> Subcontinent Asian <input type="checkbox"/> Other ( <i>specify</i> ) _____
(7) U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
(8) Lawfully Admitted Permanent Resident: <input type="checkbox"/> Yes <input type="checkbox"/> No		

### B. Ownership Interest

(1) Number of years as owner:	(2) Initial investment to acquire ownership interest in firm:	<u>Type</u>	<u>Dollar Value</u>
(3) Percentage owned:		Cash	\$
(4) Familial relationship to other owners:		Real Estate	\$
		Equipment	\$
		Other	\$
(5) Shares of Stock: <u>Number</u> <u>Percentage</u> <u>Class</u> <u>Date acquired</u> <u>Method Acquired</u>			

# Disadvantaged Business Enterprise Program

## Unified Certification Program

(6) Does this owner perform a management or supervisory function for any other business?  $\pi$  Yes  $\pi$  No  
 If Yes, identify: Name of Business: \_\_\_\_\_ Function/Title: \_\_\_\_\_

(7) Does this owner own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)?  $\pi$  Yes  $\pi$  No  
 If Yes, identify: Name of Business: \_\_\_\_\_ Function/Title: \_\_\_\_\_  
 Nature of Business Relationship: \_\_\_\_\_

**C. Disadvantaged Status – NOTE: Complete this section only for each owner applying for DBE qualification (i.e. for each owner claiming to be socially and economically disadvantaged)**

(1) What is the Personal Net Worth (PNW) of the owner(s) applying for DBE qualification? (Use and attach the Personal Financial Statement form at the end of this application; attach additional sheets if more than one owner is applying)

(2) Has any trust been created for the benefit of this disadvantaged owner(s)?  $\rho$  Yes  $\rho$  No  
 If Yes, explain (attach additional sheets if needed):

### Section 4: CONTROL

**A. Identify your firm's Officers & Board of Directors (If additional space is required, attach a separate sheet):**

	Name	Title	Date Appointed	Ethnicity	Gender
<b>(1) Officers of the Company</b>	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
<b>(2) Board of Directors</b>	(a)				
	(b)				
	(c)				
	(d)				
	(e)				

(3) Do any of the persons listed in (1) and/or (2) above perform a management or supervisory function for any other business?  $\pi$  Yes  $\pi$  No  
 If Yes, identify for each: Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_ Function: \_\_\_\_\_

(4) Do any of the persons listed (1) and/or (2) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)?  $\pi$  Yes  $\pi$  No  
 If Yes, identify for each: Firm Name: \_\_\_\_\_ Person: \_\_\_\_\_  
 Nature of Business Relationship: \_\_\_\_\_

**B. Identify your firm's management personnel who control your firm in the following areas (If more than two persons, attach a separate sheet):**

	Name	Title	Ethnicity	Gender
(1) Financial Decisions (responsibility for acquisition of lines of credit, surety bonding, supplies, etc.)	a.			
	b.			
(2) Estimating and bidding	a.			
	b.			
(3) Negotiating and Contract Execution	a.			
	b.			



# Disadvantaged Business Enterprise Program

## Unified Certification Program

(4) Hiring/firing of management personnel	a.			
	b.			
(5) Field/Production Operations Supervisor	a.			
	b.			
(6) Office management	a.			
	b.			
(7) Marketing/Sales	a.			
	b.			
(8) Purchasing of major equipment	a.			
	b.			
(9) Authorized to Sign Company Checks (for any purpose)	a.			
	b.			
(10) Authorized to make Financial Transactions	a.			
	b.			

(11) Do any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business?  $\pi$  Yes  $\pi$  No  
 If Yes, identify for each: Person: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business: \_\_\_\_\_ Function: \_\_\_\_\_

(12) Do any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)?  
 $\pi$  Yes  $\pi$  No

If Yes, identify for each: Firm Name: \_\_\_\_\_ Person: \_\_\_\_\_  
 Nature of Business Relationship: \_\_\_\_\_

**C. Indicate your firm's inventory in the following categories (attach additional sheets if needed):**

**(1) Equipment**

Type of Equipment	Make/Model	Current Value	Owned or Leased?
(a)			
(b)			
(c)			

**(2) Vehicles**

Type of Vehicle	Make/Model	Current Value	Owned or Leased?
(a)			
(b)			
(c)			

**(3) Office Space**

Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

**(4) Storage Space**

Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

# Disadvantaged Business Enterprise Program

Unified Certification Program

**D. Does your firm rely on any other firm for management functions or employee payroll?  $\pi$  Yes  $\pi$  No**

If Yes, explain:

--

**E. Financial Information**

(1) **Banking Information:**

(a) Name of bank: \_\_\_\_\_ (b) Phone No: ( ) \_\_\_\_\_  
 (c) Address of bank: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(2) **Bonding Information:** If you have bonding capacity, identify: (a) Binder No: \_\_\_\_\_  
 (b) Name of agent/broker \_\_\_\_\_ (c) Phone No: ( ) \_\_\_\_\_ (d) Address of agent/broker: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 (e) Bonding limit: Aggregate limit \$ \_\_\_\_\_ Project limit \$ \_\_\_\_\_

**F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner:**

Name of Source	Address of Source	Name of Person Securing the Loan	Original Amount	Current Balance	Purpose of Loan
1.					
2.					
3.					

**G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years (attach additional sheets if needed):**

Contribution/Asset	Dollar Value	From Whom Transferred	To Whom Transferred	Relationship	Date of Transfer
1.					
2.					
3.					

**H. List current licenses/permits held by any owner and/or employee of your firm (e.g. contractor, engineer, architect, etc.)(attach additional sheets if needed):**

Name of License/Permit Holder	Type of License/Permit	Expiration Date	License Number and State
1.			
2.			
3.			

**I. List the three largest contracts completed by your firm in the past three years, if any:**

Name of Owner/Contractor	Name/Location of Project	Type of Work Performed	Dollar Value of Contract
1.			
2.			
3.			

## Disadvantaged Business Enterprise Program

Unified Certification Program

---

**J. List the three largest active jobs on which your firm is currently working:**

Name of Prime Contractor and Project Number	Location of Project	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
1.					
2.					
3.					

AFFIDAVIT OF CERTIFICATION

A material or false statement or omission made in connection with the application is sufficient cause for denial of certification, revocation of a prior approval, initiation of suspension or debarment proceedings, and may subject the person and/or entity making the false statement to any and all civil and criminal penalties available pursuant to applicable federal and state laws.

I \_\_\_\_\_ (full name), swear or affirm under penalty of law that I am \_\_\_\_\_ (title) of applicant firm \_\_\_\_\_ (firm name) and that I have read and understand all of the questions in the application and that all of the foregoing information and statements submitted in the application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions in are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities, and pertinent history of the named firm as well as the ownership, control, affiliations thereof.

I recognize that the information submitted in the application is for the purpose of obtaining certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of the books records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its place(s) of business and equipment, and to permit interviews of principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor, if any, and the Department, recipient agency, or federal funding agency on an ongoing basis, current, complete, and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the recipient agency or Unified Certified Program (UCP) of any material change in the information contained in the original application within 30 days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in the application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state laws concerning false statement, fraud or other applicable offenses.

I declare under penalty of perjury that the foregoing is true and correct.

Signature of owner, officer, or partner \_\_\_\_\_ Date (mm/dd/yy) \_\_\_\_\_

I declare under penalty of perjury that the information provided in the application and supporting documents relating to my disadvantaged status and me is true and correct.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTARY CERTIFICATE**

STATE OF \_\_\_\_\_

} SS:

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Signature of Notary Public \_\_\_\_\_ Printed/typed name of Notary Public \_\_\_\_\_

County of residence \_\_\_\_\_ Date commission expires \_\_\_\_\_

# Disadvantaged Business Enterprise Program

## Unified Certification Program

### AFFIDAVIT OF SOCIAL AND ECONOMIC DISADVANTAGE

The form must be signed and notarized for each owner upon which disadvantaged status is relied.

#### SOCIAL DISADVANTAGE

I hereby certify under penalty of perjury that I am a member of one of the following groups:

- African American       Hispanic       Native American       Caucasian       Asian Pacific       Asian Indian

Other Ethnic Group (*Explain*) \_\_\_\_\_

And that I have held myself out as a member of that group and have acted as a member of that group.

I further certify that I am an owner of the company seeking DBE certification and that I have experienced social disadvantage due to the effects of discrimination based upon my (*check all that apply*)

- Race       Ethnicity       Gender       Other  
(*explain*) \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### PERSONAL FINANCIAL STATEMENT

I hereby certify under penalty of perjury that my personal net worth does not exceed \$750,000.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The statement is supported by (*check one*):

- A signed, notarized statement of personal net worth, with appropriate supporting documentation.  
 A signed, notarized statement from a certified public accountant (CPA) attesting that he/she has examined my personal net worth and determined, consistent with the provisions of §26.67CFR (a)(2) and generally accepted accounting standards, that my personal net worth does not exceed \$750,000.

#### NOTARY CERTIFICATE

STATE OF \_\_\_\_\_

} SS:

COUNTY OF \_\_\_\_\_

Subscribed and sworn to before me the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Signature of Notary Public \_\_\_\_\_ Printer/typed name of Notary Public \_\_\_\_\_

County of residence \_\_\_\_\_ Date commission expires \_\_\_\_\_

# Disadvantaged Business Enterprise Program

## Unified Certification Program

---

### B1. Exception Letter

**Date:** \_\_\_\_\_

Dear (Sir/Madam):

\_\_\_\_\_ has received and reviewed your application for certification in the \_\_\_\_\_ Program. We have, however, found your application to be incomplete.

In order to process your request for certification and to complete your file, please submit the information checked below to our office within 15 days of the date of this notice.

### ALL APPLICANTS:

- Work experience resume(s) that include places of ownership/employment and corresponding dates.
- Personal Net Worth statement (form enclosed) **OR** statement from CPA.
- Spouse's Personal Net Worth statement (form enclosed) **OR** statement from CPA.
- Social & Economic Disadvantage statement.
- Entire copy of personal tax returns for the last 3 years, if applicable.
- Entire copy of corporate, partnership, or joint venture tax returns for the last 3 years.
- Documented proof of contributions used to acquire ownership for each owner (e.g. both sides of cancelled checks).
- List of equipment leased along with signed lease agreements.
- List of construction equipment and vehicles owned and titles/proof of ownership.
- End of Year Balance Sheets and Income Statements for the past 3 years (or life of firm if less than 3 years old). A new business must provide a current Balance Sheet.
- Copies of relevant licenses.
- Other DBE/MBE/WBE, SBA 8(a) or SDB certifications or denials and decertifications.

### SOLE PROPRIETORSHIP:

- Assumed name, fictitious name or other registration certificate from appropriate governmental agency.

### PARTNERSHIP OR JOINT VENTURE:

- Original and any amended Partnership or Joint Venture Agreements.
- Assumed name, fictitious name, or other registration certificate from appropriate governmental agency, if applicable.

### CORPORATION OR LLC:

- Official Articles of Incorporation (signed by state official).
- Both sides of all Corporate Stock Certificates and Stock.
- Transfer Ledger.
- Shareholders Agreement.
- Minutes of all stockholder and Board of Directors meetings.
- Corporate by-laws and any amendments.

Thank you in advance for your prompt attention to the matter. If you have any questions, please contact the office at (phone number).

Sincerely,

# Disadvantaged Business Enterprise Program

## Unified Certification Program

---

### B2. Second Exception Letter

**Date:** \_\_\_\_\_

Dear (Sir/Madam):

In our previous correspondence dated \_\_\_\_\_, we informed you/your company that your application for \_\_\_\_\_ certification was incomplete. **This serves as your second and final notice.**

Please submit the information checked below so that we may finish processing your application. Please submit the information to our office within 15 days or your application will unfortunately be removed from consideration.

#### ALL APPLICANTS:

- Work experience resume(s) that include places of ownership/employment and corresponding dates.
- Personal Net Worth statement (form enclosed) **OR** statement from CPA.
- Spouse's Personal Net Worth statement (form enclosed) **OR** statement from CPA.
- Social & Economic Disadvantage statement.
- Entire copy of personal tax returns for the last 3 years, if applicable.
- Entire copy of corporate, partnership, or joint venture tax returns for the last 3 years.
- Documented proof of contributions used to acquire ownership for each owner (e.g. both sides of cancelled checks).
- List of equipment leased along with signed lease agreements.
- List of construction equipment and vehicles owned and titles/proof of ownership.
- End of Year Balance Sheets and Income Statements for the past 3 years (or life of firm if less than 3 years old). A new business must provide a current Balance Sheet.
- Copies of relevant licenses.
- Other DBE/MBE/WBE, SBA 8(a) or SDB certifications or denials and decertifications.

#### SOLE PROPRIETORSHIP:

- Assumed name, fictitious name or other registration certificate from appropriate governmental agency.

#### PARTNERSHIP OR JOINT VENTURE:

- Original and any amended Partnership or Joint Venture Agreements.
- Assumed name, fictitious name, or other registration certificate from appropriate governmental agency, if applicable.

#### CORPORATION OR LLC:

- Official Articles of Incorporation (signed by state official).
- Both sides of all Corporate Stock Certificates and Stock.
- Transfer Ledger.
- Stakeholders Agreement.
- Minutes of all stockholder and Board of Directors meetings.
- Corporate by-laws and any amendments.

Thank you in advance for your prompt attention to the matter. If you have any questions, please contact the office at (phone number).

Sincerely,

# **Disadvantaged Business Enterprise Program**

Unified Certification Program

---

## C1. Acknowledgment Letter

Date

Dear (Sir/Madam):

\_\_\_\_\_ has received and reviewed your application for certification in the \_\_\_\_\_ Program.

The information which you/your company submitted is complete. A representative from the office will contact you within fifteen (15) days to schedule a site visit.

If you have any questions, please contact \_\_\_\_\_ name \_\_\_\_\_ at \_\_\_\_\_ phone number \_\_\_\_\_.

Sincerely,

## C2. SBA Acknowledgment Letter

Date

Dear (Sir/Madam):

The correspondence is to acknowledge receipt of your application for \_\_\_\_\_ certification. Based upon information provided on your application, you are currently certified through the Small Business Administration (SBA). We requested a copy of your documentation from the SBA on [insert date]. Within 45 days, we will review the information to determine your status with our agency. You will be contacted following the review and a site visit will be scheduled if needed.

Your interest in the [DBE] program is appreciated. If you have questions, please feel free to contact [name, address, and phone number].

*Sincerely,*

## D1. Denial Letter

Date

CERTIFIED MAIL

Dear \_\_\_\_\_ (insert appropriate name) :

Thank you for your application for \_\_\_\_\_ certification. Based upon our review of your application, we are denying your request for certification at this time.

(Text will detail reason(s) for denial and will be generated on a case-by-case basis)

If you disagree with the determination, you may appeal to this office in writing within thirty (30) days. You will then be allowed to present your appeal to our Department's DBE Appeal Committee. Please also note that Federal regulations (49 CFR 26.89) allow for an appeal to the United States Department of Transportation.

If you have any questions, please contact our office at \_\_\_\_\_ (phone number) .

Sincerely,



## **Disadvantaged Business Enterprise Program**

---

### Unified Certification Program

#### D2. Denial Letter: Failure to maintain certification

Dear [Sir/Madam]:

The letter serves notice that your firm has been removed from our active data bank as a certified DBE for failure to maintain current certification. If you feel that your firm has been wrongfully decertified, you may appeal the decision with a written request within thirty (30) days of the date of the correspondence to [name and address]. If you do not appeal the decision, you may reapply for certification twelve (12) months from the date of the correspondence.

We appreciate the time and interest you have shown in being certified with our program. Should you have questions, please do not hesitate to contact our office.

Sincerely,

#### D3: Notification that application has been withdrawn

Dear Sir/Madam:

The correspondence is to inform you that your application for DBE certification is no longer being considered. Our records indicate that you have failed to respond to requests for further information on [insert date] and [insert date]. For the reason your application packet remains incomplete and cannot be processed further.

If you choose to reapply at a later date, updated information will be required on a new application.

Your interest in the [DBE] program is appreciated. If you have questions, please contact [name, address, and phone number].

Sincerely,

#### E1. Postcard Confirmation

Date:

Dear (Sir/Madam):

The is to confirm that an on-site visit has been scheduled for your company on day, date at time as part of the \_\_\_\_\_ Program application process. We look forward to visiting with you.

Sincerely,

#### E2: Postcard Confirmation (Appeal)

Appeal Process – Confirmation of Appointment Date

Dear [Sir/Madam]:

Per our recent phone conversation, the letter is to confirm that your hearing is scheduled for [time, date and place of hearing]. If you have questions or need special accommodations, please contact [name and phone number].

Sincerely,

# Disadvantaged Business Enterprise Program

Unified Certification Program

## F. Site Visit Form

# UNIFIED CERTIFICATION

## ON-SITE INSPECTION AND OWNER INTERVIEW REPORT

### Purpose

The purpose of the on-site inspection is to solicit information from the owner(s) of record of the below named company to determine if the/her ownership and control is real, substantial, and continuing and is consistent with day to day control requirement contained in the governing Federal Regulations at 49 CFR, Part 26.

### General Information

Review Conducted By: \_\_\_\_\_ Date: \_\_\_\_\_

Location: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

### Participants at the Review

Name	Title	Race/Sex	Percentage of Ownership

1. Is the company operating under a license issued to a previous owner? If so, please describe the circumstances.
2. Describe all real estate owned by the firm and provide proof of ownership.
3. How are stockholders, directors and key personnel of the firm compensated?
4. Indicate how each owner received the/her share of ownership in the business.
5. How many hours per day do either owners devote to the business?

Identify the individuals responsible for the following:

6. Who negotiates financing, contracts, bonding, and insurance for the company?
7. Who is authorized to make loans for the firm and sign the loan agreement?

## Disadvantaged Business Enterprise Program

### Unified Certification Program

---

8. Who has the authority to sign payroll and creditor checks?
9. Who actually signs payroll and creditor checks?
10. Who monitors job sites and administrative functions?
11. Who sets salaries for personnel?
12. Who hires and terminates employees?
13. When was the last time an employee was hired and fired and by whom?
14. How do you learn of projects?
15. Who signs contracts to perform work and subcontracts work for the company?
16. Describe the day-to-day operations of the firm.
17. What material supplies are used by the firm? (Include names and telephone numbers of suppliers for verification.)
18. Who decides and signs notes and leases for equipment?
19. Is there a business relationship between the two firms other than the equipment leasing? If so, explain.
20. Who estimates work in preparation of submitting a bid or quotation in the firm's name?
21. Is the company being assisted financially or otherwise by anyone other than the owner?
22. Who establishes policies and procedures for the company? Explain.
23. If a major problem occurs on a project, who has responsibility for deciding whether the job is halted and how is the decision made?
24. Does any member of your firm work part time for any other company? If so, name the company, position, hours a week.
25. Is the company currently operating under a license? If so, please specify.
26. Does the company have financial line of credit? If the applicant is a new firm without a line of credit, what sources have been used to procure equipment and materials?
27. Has the firm subcontracted jobs with other subcontractors? To whom and why?
28. Did the company have any contract on which it had a joint agreement with the prime contractor to provide financial procurement of material, equipment, manpower, use of office, or warehouse space necessary to perform the job? If yes, please state circumstances and review contracts.
29. Do you work primarily as a prime or subcontractor?

#### Reviewer's Comments on Physical Environment of Company

30. Does the firm conduct business for any other office location or share any facilities with a non-disadvantaged firm?  Yes  No
31. Is the owner(s) office distinct?  Yes  No
32. Are persons working in the office during the day?  Yes  No

# Disadvantaged Business Enterprise Program

## Unified Certification Program

33. Review a sample of correspondence file?  Yes  No

Correspondence addressed to:

Signed by:

34. Review the equipment listing furnished with the application.
35. Identify any other structures or other businesses that shares the premises or facility and give address.
36. Does the company own or lease? If so, state the nature of the lease agreement and whose signature appears on the lease.
37. Do you own equipment necessary to perform work under the scope of services listed under type of business?  Yes  No If not, please state the sources used to secure adequate equipment and the type necessary.
- 37a. What is the equipment?
38. Review cancelled checks (minimum of two months on all accounts).

Accounts	Signature on Checks	Month Reviewed

- (a) List any other authorized signatures.
- (b) List the amounts paid to owners
- (c) Who approves the rate of pay for new employees?

### Job Estimates and Contracts

39. Explain and describe the negotiation process.
40. Review job estimates and list those reviewed.
41. Review contracts, list the following information.

Firm	Location	Signature and Title on Contract	Date

# Disadvantaged Business Enterprise Program

## Unified Certification Program

---

42. If the request is for certification by an out-of-state corporation, is the firm registered with the Secretary of State?  
If an out-of-state corporation, is it certified in its home state? \_\_\_\_Yes \_\_\_\_No If no, please state why.

43. Who negotiates disputed billing with prime contractors?

### Materials

44. Are materials stored on premises? \_\_\_\_Yes \_\_\_\_No

- (a) What materials were viewed?
- (b) Who owns office equipment used by firm?

45. Who orders and purchases materials?

46. Review and verify signatures on purchase orders and checks for material purchases.

### Supplier Information

47. If a supplier, indicate the lines of products supplied.

48. Does the firm keep the goods supplied to its customers on property owned or leased by the company?  
\_\_\_\_Yes \_\_\_\_No

49. Does the firm take ownership title to the goods supplied? \_\_\_\_Yes \_\_\_\_No

50. Indicate how each owner received the/her share of ownership in the business.

51. If the firm is a corporation, how many shares of stock do you own?

52. If the firm is a sole proprietorship, what was the amount and/or form of investment?

53. Who performs accounting functions for the firm?

54. Does the firm use a CPA? Who?

55. Comments\Additional Information

---

---

---

---

---

---

---

---

---

---

**Disadvantaged Business Enterprise Program**

Unified Certification Program

**AFFIDAVIT OF DISADVANTAGED BUSINESS ENTERPRISE**

*BY INDIVIDUAL*

I, \_\_\_\_\_ do solemnly swear that I have read

*Signature of Individual*

The original North Carolina Uniform Certification Application dated \_\_\_\_\_, and all amendments to the certification and that all matters and statements contained therein are true. I further affirm that the business known as \_\_\_\_\_ is a socially and economically Disadvantaged Business as approved by Law.

\_\_\_\_\_/\_\_\_\_\_  
*Signature Date*

*Witnessed by:* \_\_\_\_\_

*Date* \_\_\_\_\_

G.1 Approval Letter

Date

Dear (Sir/Madam):

Your application for certification or recertification in the \_\_\_\_\_ Program has been approved and is effective for a three-year period as of the date of the notice. Your certificate for participation in the \_\_\_\_\_ Program is enclosed. In accordance with the Unified Certification Program, the certification is valid throughout the state and therefore may be accepted by all government agencies using federal funds on contracts within North Carolina.

Please be aware that upon your three-year certification anniversary, (insert date) your firm must be recertified. Our office will notify your firm at the appropriate time and will provide you with guidance concerning the recertification process.

Also, please note that your firm will be required to submit an affidavit to our office on an annual basis attesting to the fact that no changes have occurred that would affect your status as a Disadvantaged Minority Enterprise, Minority Business, and/or a Woman Business or that personal net worth has not exceeded \$750,000 as required by Federal regulations for Economically Disadvantaged individuals. Should your firm experience any change in ownership, control, address, telephone number or specialty, you are required to notify our office in writing within two weeks of that change.

Thank you for your participation in the \_\_\_\_\_ Program. If you have any questions, please do not hesitate to contact our office at \_\_\_\_\_.

Sincerely,

G2: Approval Letter (Decision Reversed)

## **Disadvantaged Business Enterprise Program**

### Unified Certification Program

---

Dear Sir/Madam:

The letter is to inform you that the [agency's name] decision to deny your DBE certification has been reversed following the hearing of [date of hearing]. Based on the decision, the [agency's name] is certifying your firm as a DBE effective [date] for a three (3) year period. Your certificate for participation in the \_\_\_\_\_ Program is enclosed. In accordance with the Unified Certification Program, the certification is valid throughout the state and therefore may be accepted by all government agencies within North Carolina.

Please be aware that upon your three-year certification anniversary, (insert date) your firm must be recertified. Our office will notify your firm at the appropriate time and will provide you with guidance concerning the recertification process.

Also, please note that your firm will be required to submit an affidavit to our office on an annual basis attesting to the fact that no changes have occurred that would affect your status as a Disadvantaged Minority Enterprise, Minority Business, and/or a Woman Business or that personal net worth has not exceeded \$750,000 as required by Federal regulations for Economically Disadvantaged individuals. Should your firm experience any change in ownership, control, address, telephone number or specialty, you are required to notify our office in writing within two weeks of that change.

Thank you for your participation in the \_\_\_\_\_ Program. If you have any questions, please do not hesitate to contact our office at \_\_\_\_\_.

Sincerely,

[The remainder of the letter should adhere to the wording of the revised approval letter.]

Sincerely,

### H: Denial of Appeal Procedures

Dear [Sir/Madam]:

Your request for an appeal has been received. Unfortunately, your notice arrived after the thirty days allowed under Federal regulations (49 CFR 26.89) for a response and, consequently, your opportunity for a hearing has expired.

We appreciate your interest in the DBE Program. If you have further question, please contact [name] at [telephone number].

Thank you,

### I: Confirmation of Appeal Letter

#### Appeal Process – Confirmation of Appeal Procedures

Dear [Sir/Madam]:

Your letter requesting an appeal of our decision to deny certification to the DBE Program has been received. We are presently reviewing our schedule and will be in contact with you by phone to schedule a hearing. If you have a need to contact our agency prior to that time, please call [name] at [telephone number].

## **Disadvantaged Business Enterprise Program**

### Unified Certification Program

---

Thank you,

#### J: Denial Upheld Letter

Dear [Sir/Madam]:

The letter is to inform you that the [agency's name] decision to deny your DBE certification was upheld following the hearing of [date of hearing]. You have exhausted your appeal rights within our agency, however, in accordance with 49CFR 26.89, you have a right to appeal to the U.S. Department of Transportation [address and phone number] within 90 days if you seek further redress.

If we can provide further information about the appeal process, please call [name and phone number].

Sincerely,

#### K1: Reminder "Annual Affidavit Due"

Dear \_\_\_\_\_:

The letter is to inform you that the annual renewal of your certification with \_\_\_\_\_ DBE Program will be due on \_\_\_\_\_. To remain in our active data bank, you must complete and return the enclosed annual renewal affidavit. Please indicate any changes since your last renewal, and send the form to our office by \_\_\_\_\_.

**Failure to submit the information is reasonable cause to remove your eligibility.** Should this occur, your firm will be ineligible to participate in the DBE Program.

If you have any questions, please do not hesitate to contact our office at [telephone number]. Thanks in advance for your cooperation and attention to the matter.

Sincerely,

#### K2: "2<sup>nd</sup> Notice – Annual Affidavit Due"

Dear \_\_\_\_\_:

We have not received your annual renewal of certification affidavit, which was due on \_\_\_\_\_ as requested in our previous letter dated \_\_\_\_\_. Consequently, it has been determined that there is reasonable cause to believe that your firm is ineligible for continued participation in the \_\_\_\_\_ program. As of this correspondence, we are progressing to decertify your firm as a \_\_\_\_\_.

Your prompt response is of utmost importance. If you have questions, please do not hesitate to contact our office at [telephone number]. Please disregard the letter if you have already mailed your affidavit.

Sincerely,



# **Disadvantaged Business Enterprise Program**

## Unified Certification Program

---

### K3: "Approval of Annual Renewal of Certification"

Dear \_\_\_\_\_:

The letter is to confirm that we received your Annual Renewal of Certification Affidavit on \_\_\_\_ (date) \_\_\_\_\_. Based upon the information reported on the affidavit, renewal of your DBE certification has been approved for one year effective \_\_\_\_ (date) \_\_\_\_\_.

Thank you for your attention to the matter.

Sincerely,

### M: Decertification

Dear [Sir/Madam]:

The letter serves notice that your firm has been removed from our active data bank as a certified DBE. Upon review of your recertification form, the following item(s) affected your eligibility in our program.

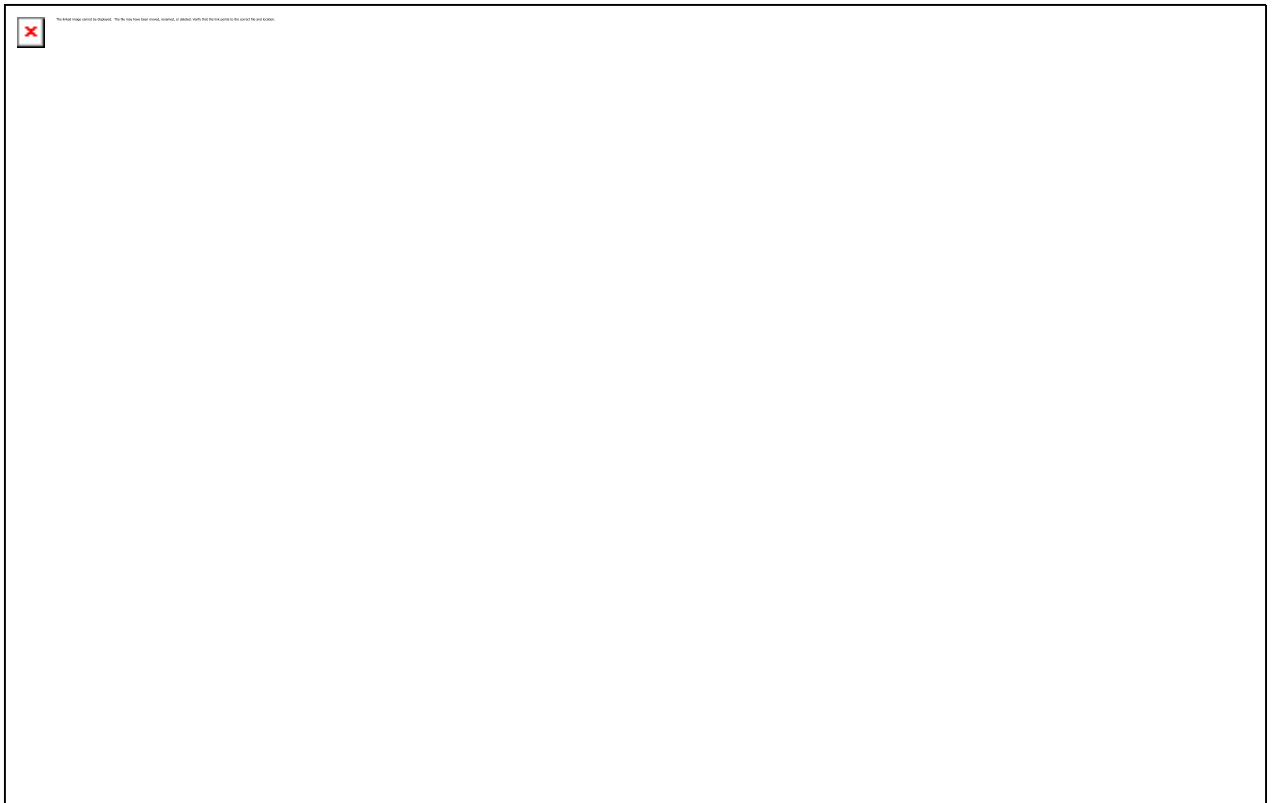
[List specific problems]

If you feel that your firm has been wrongfully decertified, you may appeal the decision upon written request within thirty (30) days of the date of the correspondence to [name and address]. If you do not appeal the decision, you may reapply for certification twelve (12) months from the date of the correspondence.

We appreciate the time and interest you have shown in being certified with our program. Should you have questions, please do not hesitate to contact our office.

Sincerely,

### P. Certificate of Achievement



## **Disadvantaged Business Enterprise Program**

Unified Certification Program

---

### Q: Customer Request for Removal from Directory

Dear [Sir/Madam]:

The letter serves notice that your firm has been removed from our active data bank as a certified DBE. If your firm decides to recertify, you may do so upon written request with 12 months from the date of the correspondence.

We appreciate the time and interest you have shown in being certified with our program. Should you have questions, please do not hesitate to contact our office.

Sincerely,

### R1: Request for Documentation

Dear Sir/Madam:

Our agency has received a request by a third-party to evaluate your status in the DBE Program. To help us better assess your current status we will need the following documentation:

[Insert list of documentation needed]

Please forward these materials to our office within the next 30 days. Failure to provide the requested information may result in decertification of your business.

If you have questions, please contact [name, address, and phone number].

Sincerely,

### R2: Request for Documentation (Second Request)

Dear Sir/Madam:

Our agency has received a request by a third-party to evaluate your status in the DBE Program. On [date] we sent a letter requesting that you provide our office with the following documentation:

[Insert list of documentation needed]

At this point we have not received the information which is needed for our evaluation. Please forward these materials to our office as soon as possible. Failure to provide the requested information may result in decertification of your business.

If you have questions, please contact [name, address, and phone number].

Sincerely,

**Disadvantaged Business Enterprise Program**

Unified Certification Program

S: Annual renewal of Certification

Affidavit

- Annual Renewal of Certification for DBE/MB/WB Programs with the

\_\_\_\_\_

The is to certify that as an owner, I have full knowledge of the operation of my firm and that to the best of my knowledge and belief, the information previously submitted to the \_\_\_\_\_ to support my firm’s certification as a Disadvantaged Business Enterprise, Minority Business and/or Women Business, as the case may be, is unchanged. The gross income for my firm for the past fiscal year is as shown below. I also affirm that my Personal Net Worth does not exceed the threshold of \$750,000.00 as required by the Regulation for Economically Disadvantaged individuals.

Firm’s Gross Income: \_\_\_\_\_

\_\_\_\_\_  
(Name of Firm)

\_\_\_\_\_  
(E-mail Address)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(Fax Number)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone Number)

State of: \_\_\_\_\_

County of: \_\_\_\_\_

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me \_\_\_\_\_, for the above noted firm who signed the foregoing affidavit in my presence and made oath to the truth of the statement therein contained.

\_\_\_\_\_  
(Notary Signature)

My commission expires \_\_\_\_\_

*SEAL*

**Disadvantaged Business Enterprise Program**

Unified Certification Program

**T. DBE Eligibility Complaint Form**

**DBE ELIGIBILITY COMPLAINT FORM**

**Name & Address of Agency:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FROM:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attn: \_\_\_\_\_

Dear Sir or Madam:

Subject: Eligibility Complaint

I have reason (s) to believe that \_\_\_\_\_ does not meet the eligibility standards established in 49 Code of Federal Regulations 26 as a certified Disadvantaged Business Enterprise. I believe that the aforementioned firm is ineligible for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that I must have this form notarized before submitting it to your office and that my confidentiality will be maintained unless otherwise required to be disclosed by law until the end of the forthcoming investigation of the complaint.

\_\_\_\_\_  
Signature Date

(SEAL)

Notary Public \_\_\_\_\_

Commission Expires \_\_\_\_\_

cc: \_\_\_\_\_  
\_\_\_\_\_

## **Disadvantaged Business Enterprise Program**

---

Unified Certification Program

### **U1. Acknowledgement of Third-party Complaint**

Dear [Sir/Madam]:

Your complaint form of [date of complainant] concerning [name of company] has been received. Based on the information, we are reviewing the company's file and will launch an investigation as soon as feasible. Upon completion of the investigation, you will be notified of our findings.

We appreciate your interest in the Disadvantaged Business Enterprise Program and the time and effort you have given to share your concerns. If you have a further need to contact our agency prior to receiving the findings, please call [name] at [telephone number].

Thank you,

### **U2. Notice of Investigation**

Dear Sir/Madam:

The correspondence is to inform you that our agency has received a complaint from a third-party regarding your status in the Disadvantaged Business Enterprise Program. Based on our policy, we are required to investigate the complaint and present our findings. You may be asked to provide further information and/or to schedule a site visit. Following the investigation, you will be provided with a copy of our findings and notified of any change in your status.

If you have questions, please contact [name, address, and phone number].

Sincerely,

### **V1. Thank You Letter**

Dear Sir/Madam:

The investigation of [name of firm] has been completed. Findings indicate that the firm was not operating in accordance with the requirements of the Disadvantaged Business Enterprise Program. Based on these findings, the firm has been decertified.

We appreciate your interest in our program and welcome your questions and comments regarding any of our program participants.

If you have further questions, please contact [name, address, and phone number].

Sincerely,

## **Disadvantaged Business Enterprise Program**

Unified Certification Program

---

### **V2. Third-party Challenge – Thank You letter to complainant**

Dear Sir/Madam:

The investigation of [name of firm] has been completed. Findings indicate that the firm is operating in accordance with the requirements of the Disadvantaged Business Enterprise Program. Based on these findings, the status of [name of firm] with the program remains unchanged. We appreciate your interest in our program and welcome your questions and comments regarding any of our program participants.

If you have further questions, please contact [name, address, and phone number].

Sincerely,

### **W. Recommendation to Maintain Certification**

Dear Sir/Madam:

The correspondence is to inform you that the investigation regarding your status in the Disadvantaged Business Enterprise Program has been completed. Based on our findings, your status with the program remains unchanged. We appreciate your cooperation during the investigation and apologize for any inconvenience the process may have caused.

If you have further questions, please contact [name, address, and phone number].

Sincerely,

### **X. Memorandum of Agreement**

MEMORANDUM OF AGREEMENT  
BETWEEN  
THE NORTH CAROLINA DEPARTMENT OF TRANSPORTATION,  
AND  
<NAME OF RECIPIENT ORGANIZATION>  
REGARDING  
IMPLEMENTATION AND ADMINISTRATION  
OF THE UNIFIED CERTIFICATION PROGRAM (UCP)

#### *Background*

In January 1999, the US Department of Transportation issued a new final regulation to guide the administration of the DBE program. The new regulation had three major goals:

1. To create a level playing field on which DBE's can compete fairly;
2. To mend but not end the DBE program; and
3. To make the DBE program more effective and efficient for all participants.

To meet the requirements of their third goal, which is to make the DBE program more effective and efficient for all participants, the USDOT mandated, in March 1999, that all recipients in a state must participate in a Unified Certification Program (UCP). The UCP must provide "one-stop shopping" to applicants for certification, such that an applicant is required to apply only once for a Disadvantaged Business Enterprise (DBE) certification that will be honored by all recipients in the state. With NCDOT as the lead agency, stakeholders convened to develop the UCP for North Carolina.

#### *Purpose*

The purpose of this Memorandum of Agreement is to specify the responsibilities of each party to this agreement with respect to implementation and management of the UCP.

# Disadvantaged Business Enterprise Program

## Unified Certification Program

---

### *Objectives*

Consistent with the UCP requirements, the parties agree to accomplish the following objectives:

1. The NCDOT will independently perform the certification of DBE firms as described in specific sections of 49 CFR Part 26 on behalf of the recipient.
2. The NCDOT will maintain a unified DBE directory containing, for all firms certified by the UCP, the information required by 49 CFR Part 26.31, and make it available to the public electronically, on the internet, as well as in print. The UCP shall update the electronic version of the directory by including additions, deletions, and other changes as soon as they are made.
3. The NCDOT will bear the costs of program development and maintenance for the first full-year of implementation. At the end of the first full year of implementation, an audit will be conducted to determine the cost of maintaining the program. At that time, the stakeholders will reconvene to determine how maintenance costs will be distributed among recipients.

The Recipient will ensure the following measures are carried out:

1. The recipient will initiate the appropriate measures to ensure their database files accurately reflect qualified and certified DBE's prior to relinquishing said files to the NCDOT.
2. The recipient will bear the cost of this clean up and transfer of data.

### **Administrative Stipulations**

1. This agreement applies to all pre-certifications of DBE-eligible firms that intend to compete for a contract, at any tier, funded in whole or in part with USDOT financial assistance, including letters of credit or loan guarantees, except a contract solely for the purchase of land.
2. All certifications completed pursuant to this agreement will be performed by or under the direct supervision of a person or persons with the relevant experience to make determinations and recommend certification decisions.
3. The UCP Steering Committee may monitor and review any activities carried out pursuant to this agreement. The NCDOT will cooperate with Recipients in carrying out these monitoring and review activities.
4. Either party to this agreement may request that it be amended, whereupon the parties shall consult in accordance with 49 CFR Part 26 to consider such an amendment.
5. With the understanding that USDOT funds may be affected, either party to this agreement may terminate it by providing thirty days written notice to the other party, provided that the parties consult during the period prior to termination to seek agreements or other actions that would avoid termination.
6. Should either party to this agreement have an objection that is not acceptably resolved, or object within 30 days to any documents or actions submitted for review or determination pursuant to this agreement, the parties shall consult to resolve the objection. If the parties cannot reach a mutually agreeable solution, the appropriate USDOT agency will be consulted for mediation.

Execution of this Memorandum of Agreement between the NCDOT, and the <NAME OF RECIPIENT ORGANIZATION>, evidences that all parties agree to the terms, conditions and processes established by the UCP. The parties further agree that the UCP:

1. Shall make all certification decisions on behalf of all USDOT recipients in the state with respect to participation in the DBE program, and
2. Will follow all certification procedures and standards as described in 49 CFR Part 26, on the same basis as recipients, and
3. Shall cooperate fully with oversight, review, and monitoring activities of USDOT and its operating administrations, and
4. Shall implement USDOT directives and guidance concerning certification matters.

*North Carolina Department of Transportation*

\_\_\_\_\_ Date: \_\_\_\_\_  
Typed or printed name of signatory, Title

<NAME OF RECIPIENT ORGANIZATION>

\_\_\_\_\_ Date: \_\_\_\_\_  
Typed or printed name of signatory, Title

## **Disadvantaged Business Enterprise Program**

---

Unified Certification Program

### **UCP General Administration**

#### *Governance and Management*

NCDOT will establish the required positions, to include a UCP Director, within the agency to implement and manage the Unified Certified Program. The UCP Director will be responsible for clarifying issues regarding UCP policy and procedure, coordinating the periodic meetings of the UCP Steering Committee and insuring the integrity of information contained in DBE database.

The UCP Oversight Committee will remain in tact to discuss and resolve issues regarding the UCP as they arise. Committee members will be responsible for attending periodic meetings and ensuring appropriate representation from their region is active in the management of the UCP. The present UCP Steering Committee membership was chosen based on current distribution of DBE qualified firms in specific geographic areas across the state. After initial development and implementation of the Unified Certified Program, membership on the Steering Committee will be reviewed to insure membership remains consistent with DBE distribution and demographics. Membership on the steering committee is voluntary.



## Disadvantaged Business Enterprise Program

### Unified Certification Program

---

#### *Implementation Schedule*

To ensure the UCP is implemented within the timeframe specified by the US Department of Transportation, the following schedule has been developed. Since the North Carolina Department of Transportation has prepared for implementation of the UCP by allocating the appropriate technological, human, and fiscal resources, the efficient delivery of all activities is dependent upon the USDOT's ability to review and approve the final UCP document within the timeframe allotted.

1. UCP Plan Submitted to USDOT June 15, 2004
  2. UCP Plan Approved by USDOT September 30, 2004
  3. Begin transition Phase 1: July 1, 2004  
NCDOT organizational activities include:
    - Organizing and inventorying files
    - Contacting firms
    - Conducting certifications
    - Purging integrity-deficient data
    - Entering accurate data
  4. Complete transition Phase 1: September 30, 2004
  5. Start transition Phase 2: September 30, 2004  
Recipient organizational activities include:
    - Entities must purge databases
    - Submit refined data to NCDOT for entry into unified directory
- |  | <i># of firms</i> | <i>Deadline for Purge</i> |
|--|-------------------|---------------------------|
|  | < 100             | Jan 2005                  |
|  | 101 – 300         | Mar 2005                  |
|  | 301 - 500         | Apr 2005                  |
|  | >500              | May 2005                  |
6. Complete transition phase 2 September 30, 2005
  7. Full Implementation of UCP September 30, 2005