CapMetro

DBE Schedule C3 & Intent to Perform (Hauling)

The contractor **MUST** submit a completed **DBE Schedule C3 & Intent to Perform (Hauling/Trucking Services)** form with their bid submission when a goal has been assigned or when utilizing subcontractors for trucking/hauling services. **The form will be completed and signed by the Contractor.**

The dollar or percentage listed in the Schedule C to the subcontractor (DBE/non-DBE) is the percentage based on the overall contract value.

NOTE: This percentage may fluctuate throughout the contract if the overall contract value is changed during contract modifications. Contractors **MUST** keep up with the impact this will have on meeting the committed contract DBE goal.

The DBEs selected for subcontracting MUST be responsible for the management and supervision of the entire operation for which it is subcontracted to perform, and there cannot be a contrived arrangement for the purpose of meeting the contract DBE goal or contract goal committed to the DBE.

Reference Exhibit D, Section 3(h) (Credit Towards The Contract Goal), which addresses how the contractor may count towards the DBE goal when using a DBE for hauling or trucking services.

<u>Disclaimer: If you are completing this as a result of an active contract or procurement, ensure that the purchaser, contract administrator, and/or project manager are copied.</u>

The Schedule C3 form for hauling/trucking is used to document a DBE and non-DBE subcontractor's participation in service that are related to hauling/trucking.

The DBE must itself own and operate at least one fully licensed, insured, and operational truck used on the contract. A DBE that leases a truck must show proof or evidence that the DBE has exclusive use of and control over the truck. This does not preclude the leased truck from working for others during the term of the lease with the consent of the DBE, so long as the lease gives the DBE absolute priority for use of the leased truck. Leased trucks must display the name and identification number of the DBE.

The following addresses how the contractor may count towards the DBE goal when using a DBE for hauling or trucking services:

- 1. The DBE receives credit for the total value of the transportation services it provides on the contract using trucks it owns, insures, and operates using drivers it employs.
- 2. The DBE may lease trucks from another DBE firm, including an owner-operator who is certified as a DBE. The DBE who leases trucks from another DBE received credit for the total value of the transportation services the lessee DBE provides on the contract.
- The DBE may also lease trucks from a non-DBE firm, including from an owner-operator. The DBE that leases trucks equipped with drivers from a non-DBE is entitled to credit for the total value of transportation services provided by non-DBE leased trucks equipped with drivers not to exceed the value of transportation services on the contract provided by DBE-owned trucks or leased trucks with DBE employee drivers. Additional participation by non-DBE owned trucks equipped with drivers receives credit only for the fee or commission it receives as a result of the lease arrangement. If a contractor chooses this approach, the contractor must obtain written consent from the Authority.
- The DBE may lease trucks without drivers from a non-DBE truck leasing company. If the DBE leases trucks from a non-DBE truck leasing company and uses its own employees as drivers, it is entitled to credit for the total value of these hauling services.

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SCHEDULE C.3: Disadvantaged Business Enterprise (DBE)
Subcontractor Participation & Intent to Perform (Hauling/Trucking Services)

11/2024

DO NOT RECREATE OR CHANGE THIS DOCUMENT

Instructions: The Offeror (i.e., prime contractor) shall complete <u>all applicable information in this form</u> and the Good Faith Effort (GFE) Form to show its GFE towards meeting the contract goal assigned to the contract and include DBEs on a contract. This form will be completed for subcontractors used for Hauling/Trucking services. Those subcontractors which are listed on this form as DBEs must have current DBE certification by a member of the Texas Unified Certification Program at the time of execution of the contract to Offeror (see Exhibit D, Section 7). Additionally, the Intent to Perform must be completed by the Prime Contractor and DBE subcontractor(s) listed in this form.

Prime Contractor:	Contact Name:	Ethnic/Gender Code: A) Asian-Pacific American
Project Name:	Title:	B) Black American H) Hispanic American
IFB/RFP/SOQ#:	Phone#:	N) Native American
Firm's Age:	Email Address:	SA) Subcontinental Asian American NM) Non-Minority (Woman)
Firm's Annual Gross Receipts (\$):	Address:	M) Male F) Female

Subcontractor Section (Hauling/Trucking Services)

COMPLETE THIS FORM FOR ALL HAULERS/TRUCKERS IDENTIFIED FOR THIS PROJECT. YOU MAY USE MULTIPLE FORMS.

In accordance with 49 CFR (Code of Federal Regulations) Part 26, §26.53 & §26.55, when making good faith efforts DBE firms used for credit towards the contract goal must have a current certification status with a TUCP Certifying Agency (see Exhibit D, Section 7) at the time of execution of the contract. The DBE must be certified in the 6-digit NAIS code for the proposed scope of work to receive credit towards the DBE contract goal. CapMetro will also review the proposed DBE participation to ensure that it will perform a commercially useful function.

Tru	Trucking/Hauling – Complete this section if using a Trucking/Hauling Company (Use another form if needed)												
Company Name	Contact Person, Phone#, & Address	DBE or Non- DBE	1st, 2sd , or 3sd Tier Sub	Ethnic Code/ Gender (Leave Blank if non-DBE)	Age of Firm	Annual Gross Receipts (\$)	Description of Trucking/Hauling Services & 6-Digit NAICS Code	Estimated Rate \$	Hauling Unit	Estimated Quantity of Materials	Total \$ Commitment	Total % Commitment	
										Hour		0.00%	
										Load			
										Hour		0.00%	
										Load		5.55 %	
										Hour		0.00%	
										Load		2.0070	

Step 1: Input contract information and contact information.

The Ethnic/Gender Code is available and will be used in the table below.



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n. n		Ethnic/Gender Code:
Prime Contractor:	Contact Name:	A) Asian-Pacific American
Project Name:	Title:	B) Black American H) Hispanic American
IFB/RFP/SOQ#:	Phone#:	N) Native American SA) Subcontinental Asian American
Firm's Age:	Email Address:	NM) Non-Minority (Woman)
Firm's Annual Gross Receipts (\$):	Address:	M) Male F) Female

Subcontractor Section (Hauling/Trucking Services)

COMPLETE THIS FORM FOR ALL HAULERS/TRUCKERS IDENTIFIED FOR THIS PROJECT. YOU MAY USE MULTIPLE FORMS,

In accordance with 49 CFR (Code of Federal Regulations) Part 26, §26.53 & §26.55, when making good faith efforts DBE firms used for credit towards the contract goal must have a current certification status with a TUCP Certifying Agency (see Exhibit D, Section 7) at the time of execution of the contract. The DBE must be certified in the 6-digit NAIS code for the proposed scope of work to receive credit towards the DBE contract goal. CapMetro will also review the proposed DBE participation to ensure that it will perform a commercially useful function.

Tru	cking/Hauling –	Complet	te this s		if us	ing a Tru	cking/Hauling (Compan	y (Use a	nother fo	rm if neede	d)
Company Name	Contact Person, Phone#, & Address	DBE or Non- DBE	1 st , 2 ^{sd} , or 3 ^{sd} Tier Sub	Ethnic Code/ Gender (Leave Blank if non-DBE)	Age of Firm	Annual Gross Receipts (\$)	Description of Trucking/Hauling Services & 6-Digit NAICS Code	Estimated Rate \$	Hauling Unit	Estimated Quantity of Materials	Total \$ Commitment	Total % Commitment
										Hour		0.00%
										Load		
										Hour		0.00%
										Load		0.007
										Hour		0.00%
										Load		2.0070

Multiple forms may be used based on the number of subcontractors.

Ensure DBEs share documentation to confirm certification. You can search for DBEs using TxDOT's Certified Directory.



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Prime Contractor:	Contact Name:	Ethnic/Gender Code: A) Asian-Pacific American
Project Name:	Title:	B) Black American H) Hispanic American
IFB/RFP/SOQ#:	Phone#:	N) Native American
Firm's Age:	Email Address:	SA) Subcontinental Asian American NM) Non-Minority (Woman)
Firm's Annual Gross Receipts (\$):	Address:	M) Male F) Female

Subcontractor Section (Hauling/Trucking Services)

COMPLETE THIS FORM FOR ALL HAULERS/TRUCKERS IDENTIFIED FOR THIS PROJECT. YOU MAY USE MULTIPLE FORMS.

In accordance with 49 CFR (Code of Federal Regulations) Part 26, §26.53 & §26.55, when making good faith efforts DBE firms used for credit towards the contract goal must have a current certification status with a TUCP Certifying Agency (see Exhibit D, Section 7) at the time of execution of the contract. The DBE must be certified in the 6-digit NAIS code for the proposed scope of work to receive credit towards the DBE contract goal. CapMetro will also review the proposed DBE participation to ensure that it will perform a commercially useful function.

Tru	Trucking/Hauling – Complete this section if using a Trucking/Hauling Company (Use another form if needed)												
Company Name	Contact Person, Phone#, & Address	DBE or Non- DBE	1st, 2rd, or 3rd Tier Sub	Ethnic Code/ Gender (Leave Blank if non-DBE)	Age of Firm	Annual Gross Receipts (\$)	Description of Trucking/Hauling Services & 6-Digit NAICS Code	Estimated Rate \$	Hauling Unit	Estimated Quantity of Materials	Total \$ Commitment	Total % Commitment	
										Hour		0.00%	
										Load			
										Hour		0.00%	
										Load			
										Hour		0.00%	
										Load			

Step 2: Complete this section for each subcontractor. Please provide a contact person for the subcontractor in case additional information is needed.

You can search for NAICS codes using <u>TxDOT's</u>
Certified Directory.

*Include Annual Gross
Receipts amounts and
age of firm

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SCHEDULE C.3: Disadvantaged Business Enterprise (DBE)
Subcontractor Participation & Intent to Perform (Hauling/Trucking Services)

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Complete the Trucking Unit Listing for EACH DBE Subcontractor that will be used for Trucking/Hauling.

The CapMetro DBE Representative or Other Designee shall verify that the DBE trucking firm owns at least one truck and employs a driver of its own. If the DBE will be leasing trucks, the Design Build Contractor shall verify the DBE has the ability to lease the type of trucks needed for hauling the materials listed above.

Include DBE Trucking/Hauling firms non-DBEs will use as 1^{ct}, 2nd, or 3rd Tier Subcontractors. Attach ALL applicable supporting documentation.

DBE Trucking Unit Listing (Use another form if needed)									
Trucking Firm Name or Truck Owner/Operator	Unit #	VIN#	Truck Type	Owned	Leased				

Step 3: Complete the trucking unit list for each truck/hauler type used and indicate if owned or leased. Use additional forms, if needed.

Complete the following questions based on trucking/hauling services being provided above.

Trucking Firm Name	What location(s) will the materials be hauled to? (Include To/From Location)	How many trucks planned to be used on the project are OWNED by the DBE? (Include Count (#))	How many trucks planned to be used on the project are LEASED by the DBE? (Include Count (#))		
	To: From:	Tractor/Trailer: Dump Trucks: Othe Vehicle Type:	Tractor/Trailer: Dump Trucks: \Othe Vehicle Type:		
	To: From:	Tractor/Trailer: Dump Trucks: Othe Vehicle Type:	Tractor/Trailer: Dump Trucks: Othe Vehicle Type:		
	To: From:	Tractor/Trailer: Dump Trucks: Othe Vehicle Type:	Tractor/Trailer: Dump Trucks: Othe Vehicle Type:		

Step 4: Complete this section indicating the location of service and number of trucks/haulers by type will be used.



SCHEDULE C.3: Disadvantaged Business Enterprise (DBE)
Subcontractor Participation & Intent to Perform (Hauling/Trucking Services)

11/2024

Intent to Perform

		IFE	B/RFP/SOQ#:			
The undersigned is currently certified under the Texas with the above project number at the following price \$			s a DBE. The undersigned is p If the total contract amount (sho			
Any and all subcontractors that a DBE subcontractor us	ses must be listed in	Schedule C. (Low t	tier subcontractors must comple	ete this section only when use	ed by a DBE subc	ontractor.)
IMP	ORTANT! A sign	ature is required	by the Offeror and each D	BE listed on this form.		
By signing this commitment, you affirm that a Purchase Order must b			d correct and agree to com vided to CapMetro to be in			
Prime Contractor Name:			DBE Certified:	Yes No		
Representative Name:		Address:		City:	State:	Zip:
Title:		Phone#:	Ema	ail:		
Signature:	Date:					
1st Tier Subcontractor Name:			DBE Certified:	Yes No		
Representative Name:		Address:		City:	State:	Zip:
Title:		Phone#:	Ema	ail:		
Signature:	Date:					
If the subcontractor anticipates that% of the doll	ar value of this subc	ontract will be suble	t and/or awarded to other cont	ractors, complete the section i	below. Duplicate	as needed.
2 nd Tier Subcontractor Name:			DBE Certified:	Yes No		
Representative Name:		Address:		City:	State:	Zip:
Title:		Phone#:	Ema	ail:		
Signature:	Date:					



Step 5: Input the total dollar (\$) & percentage (%) of DBE participation.



SCHEDULE C.3: Disadvantaged Business Enterprise (DBE)
Subcontractor Participation & Intent to Perform (Hauling/Trucking Services)

11/2024

Intent to Perform

IFB/RFP/SOQ#:

The undersigned is currently certified under the Texas Unified Certification Program (TUCP) as a DBE. The undersigned is prepared to perform the following hauling/trucking services listed in connection with the above project number at the following price \$ and/or % of the total contract amount (should be the same \$ or % found on Schedule C).

Any and all subcontractors that a DBE subcontractor uses must be listed in Schedule C. (Low tier subcontractors must complete this section only when used by a DBE subcontractor.)

IMPORTANT! A signature is required by the Offeror and each DBE listed on this form.

By signing this commitment, you affirm that all information provided is true and correct and agree to comply with all parts of 49 CFR, Part 26. A subcontract agreement or Purchase Order must be executed with the DBE and provided to CapMetro to be included in the DBE file under the contract.

Prime Contractor Name:			DBE Certified:	Yes No		
Representative Name:		Address:		City:	State:	Zip:
Title:		Phone#:	Ema	il:		
Signature:	Date:					
1 st Tier Subcontractor Name:			DBE Certified:	Yes No		
Representative Name:		Address:		City:	State:	Zip:
Title:		Phone#:	Ema	iil:		
Signature:	Date:					
Signature: ************************************		ocontract will be sublet	and/or awarded to other contr	actors, complete the section	n below. Duplicate	as needed.
2 nd Tier Subcontractor Name:			DBE Certified:	Yes No		
Representative Name:		Address:		City:	State:	Zip:
Title:		Phone#:	Ema	iil:		
Signature:	Date:					

Step 6: The Prime
Contractor and DBE will
sign this section.

Checking the "Yes" under DBE certification is an indicator that the company has been confirmed as a certified DBE.

Contact & Website To Get Forms/Training

Send an email to DBE@capmetro.org for assistance.

DBE Forms, Trainings, & New User – Vendor Information Form (Vendor Reporting System –VRS)

https://www.capmetro.org/dbe

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Thank you!