TBE-14

Non-Federally Funded

Form must be filled out completely and accurately.

MILWAUKEE COUNTY

DEPARTMENT OF ADMINISTRATIVE SERVICES
Office of Economic Inclusion
oeicompliance@milwaukeecountywi.gov
(414) 278-4747

Office of Economic Inclusion (OEI)

COMMITMENT TO CONTRACT WITH TBE

TBE Information

TBE Firm Name:	**Prime/Sub Options:** (SELECT ONE)
TBE Firm Address:(Cannot be a PO Box)	**EIN Number:**

Contract Information

Contract Name:	**Contract No:**

Contract Total: $	**Contract Exclusions (Allowances & Reimbursements): $**	**Contract Total (LESS Allowances & Reimbursements): $**

Type of Contract: (SELECT ONE)	**TBE Goal:**

Scope of Work

Scope of Work Detailed Description:	

Applicable NAICS: **If additional space is needed, please attach a separate sheet.*

Work Scope Description:	NAICS:
Work Scope Description:	NAICS:
Work Scope Description:	NAICS:

1. TBE Contract Amount:	**2. % of Total Contract:**

The percentage is based on the eligible scope of services that TBE participation can reasonably be obtained, which might not be based on the total project contract amount. The commitment percentage is the key indicator of TBE participation. The Pass/Fail determination is based on the percentage stated in the RFP/BID. If the Prime is using one or multiple TBE companies the sum of the percentages MUST satisfy the minimum percentage stated in the RFP/BID. Note the percentage indicated on this document will be viewed by OEI the Prime's COMMITMENT to the TBE company.

Bidder/Proposer Commitment

(To be completed by firm committing work to TBE)

I certify that the TBE firm quoted the identified service(s) and cost(s). I further acknowledge our firm having negotiated with, and having received confirmation, on partnering, pricing and delivery from the TBE firm listed herein. (*Prime Contractor OR Consultant)*_____ (*Phone)*_____, or one of our subs, will enter into contract with the TBE firm listed, for the service(s) and amount(s) specified when awarded this contract. The information on this form is true and accurate to the best of my knowledge. I further understand that falsification, fraudulent statement, or misrepresentation will result in appropriate sanctions under applicable law.

Signature of Authorized Representative | Name & Title of Authorized Representative | Date

TBE Affirmation

(To be completed by TBE Owner/Authorized Representative)

- **I affirm that our firm is certified as** (SELECT ONLY ONE)
- **I affirm this firm is owned by a** (SELECT ONLY ONE)
- **I affirm that the majority owner's ethnicity is** (SELECT ONLY ONE)

- I acknowledge and accept this commitment to contract with my firm for the service(s) and dollar amount(s) specified herein, by
- *(Prime or sub firm name, if sub to a sub)* _____

- I understand and accept that this commitment is for service(s) to be rendered in completion of the project specified herein to be completed with my own forces.
- I affirm that approval from OEI will be obtained prior to subletting any portion of this work awarded to my firm on this project.

Signature of Authorized TBE Representative | Name & Title of Authorized TBE Representative | Phone Number | Date

OEI Use Only

Commitment number _____ of _____ **Participation:** _____% Project Total _____% CAGE Code: _____

Approved: _____ Date: _____

COMMITMENT TO CONTRACT WITH *TBE*

ADDITIONAL INFORMATION & REQUIREMENTS:

Links to Directories for firms eligible for credit:
MBE and WBE https://wisdp.wi.gov/Search.aspx
Milwaukee County SBE https://mke.diversitycompliance.com/Default.asp
SAM Directory for Federal SBE https://www.sam.gov/SAM/pages/public/index.jsf

1. **CONTRACT ADJUSTMENTS**: The successful Bidder/Proposer will maintain the approved TBE participation level during the term of the contract with the County, including any additional work on the contract, e.g., change orders, addendums, scope changes, or fee increases.

2. **WRITTEN CONTRACTS WITH TBE**: The County requires that the successful Bidder/Proposer enter into contract, directly or through subs, as stated in this form. Agreements must be submitted to the County within 7 days of receipt of the Notice-To-Proceed. By executing this commitment, you are certifying that you have had contact with the named TBE firm and that they will be hired if you are awarded the contract by the County.

3. **SUBSTITUTIONS, TBE SUBCONTRACTING WORK, TRUCKING FIRMS**: The successful Bidder/Proposer must submit written notification of desire for substitution to the TBE affected, and send a copy to the County, stating the reason(s) for the request. The TBE will have five (5) business days to provide written objection/acceptance of the substitution. The “right to correct” must be afforded any TBE objecting to substitution/termination for less than good cause as determined by the County. Approval must be obtained from the County prior to making any substitutions. TBE firms are required to notify and obtain approval from the County prior to seeking to subcontract out work on this project. In the case of TBE trucking firms, credit will be given for trucks leased from other TBE firms; however, if the TBE leases trucks from non-TBE firms, the commission or fee will be counted for crediting.

4. **REQUESTS FOR PAYMENT**: The successful Bidder/Proposer must indicate on the Continuation Sheet (AIA form G703, or equivalent) or invoice for consulting the work being performed by TBE by either a) placing the word “TBE” behind the work item or b) breaking out the work done by TBEs at the end of the report. The successful Bidder/Proposer shall notify TBE firms of the date on which they must submit their invoices for payment.

5. **TBE UTILIZATION REPORTS**: The successful Bidder/Proposer will enter payments to subs and suppliers directly into the County’s online reporting system on a monthly basis. These entries will cover payments made during the preceding month and will include zero dollar ($0) entries where no payment has occurred.

If you have any questions related to the Milwaukee County Target Enterprise Program, please contact:

414.278.4851 or oeicompliance@milwaukeecountywi.gov