



ARIZONA DEPARTMENT OF TRANSPORTATION
PROFESSIONAL SERVICE
PROJECT SPECIFIC
Disadvantaged Business Enterprise (DBE)
DBE Goal Commitment

Solicitation No.: _____

(_____) Firm Name, (_____) Consultant Name

certifies that:

(CHECK ONE)

The established _____-% goal for DBE participation will be met and subcontract agreements have been made with certified DBEs for the above referenced contract;

OR

The CONSULTANT has been unable to meet the established _____ % goal but has made good faith efforts to do so for the above referenced contract.

Firm Name: _____

Principal Name: _____

Principal Signature: _____

Date: _____