

ARIZONA DEPARTMENT OF TRANSPORTATION
DISADVANTAGED BUSINESS ENTERPRISE (DBE)
CERTIFICATION OF FINAL DBE PAYMENTS
PROFESSIONAL SERVICES/ON-CALL

Clear Form

(Submit form for each DBE working on the Task Order contracts)

The undersigned Consultant on Contract No.: _____ Task Order No.: _____
hereby, certifies that full payment was made, to the firm indicated for material and/or work performed under this project's contract as follows:

DBE FIRM AZ UTRACS Registration # _____

Name of DBE Firm _____ was paid the amount of _____

This certificate is made under Federal and State Laws concerning false statement. Supporting documentation for this payment is subject to audit and should be retained for a minimum of three years from project acceptance date. In the event the DBE was not paid in accordance with affidavits submitted by the prime consultant, all documentation supporting the consultant's position should be submitted.

I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OR FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Consultant Company Name: _____

Check One: ☐ Prime Consultant ☐ Subconsultant

Name: _____ **Title:** _____

Signature: _____ **Date:** _____

The undersigned prime consultant/subconsultant/lower-tier subconsultant for the above named project hereby certified that payments were received and/or justification by the consultant is correct.

I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OR FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

DBE Firm Name: _____

Check One: ☐ Prime Consultant ☐ Subconsultant ☐ Lower-tier Subconsultant

Name: _____ **Title:** _____

Signature: _____ **Date:** _____