

**Metropolitan Pier and Exposition Authority
 Special Conditions Regarding Minority and Women Owned Businesses
 Schedule D-1: Certification of Bidder/Proposer Regarding Unavailability
 of MBE/WBE Firms**



A. Project Information

RFP Number:

RFP Title:

B. Bidder/Proposer Information

Name of Bidder/Proposer:

Each time Bidder/Proposer contacts an MBE/WBE that is not ready willing or able to perform the work you requested of the firm, for any reason, you must complete this form. Please have the MBE/WBE complete Schedule D-2 Statement of MBE/WBE on the following page.

The undersigned certifies that he/she contacted the following MBE/WBE firms to obtain bids for goods or services to be performed for the above referenced project (attach additional sheets if necessary).

Name of Firm:

Address:

Phone:

Fax:

Contact Person:

Email:

Reason MBE/WBE was unavailable to work on this project or prepare a bid:

Name of Firm:

Address:

Phone:

Fax:

Contact Person:

Email:

C. Declaration and Affirmation

I do solemnly declare and affirm under the penalties of perjury that the statements made in this Schedule D-1, including the contents of all attachments, are true and correct, and that I am authorized on behalf of the undersigned to make this Affidavit.

Signature of Affiant:

Date:

Print Name:

Title:

State of: _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20 ____

NOTARY PUBLIC

(SEAL)

For MPEA Use

Reviewed By:

Date:

Metropolitan Pier and Exposition Authority
Special Conditions Regarding Minority and Women Owned
Businesses
Schedule D-2: Statement of MBE/WBE Regarding Unavailability to
Perform or Prepare a Bid



A. Project Information

RFP Number:	RFP Title:
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B. MBE/WBE Statement

Name of MBE/WBE Firm:

Bidder/Proposer Name:

The undersigned certifies that:

1. The above named MBE/WBE firm was _____ offered an opportunity to bid on the above – referenced project by the above named Bidder/Proposer.
2. The MBE/WBE firm is unavailable to perform the services or prepare a bid for the following reason:

D. Declaration and Affirmation

I do solemnly declare and affirm under the penalties of perjury that the statements made in this Schedule D-1, including the contents of all attachments, are true and correct, and that I am authorized on behalf of the undersigned to make this Affidavit.

Signature of Affiant:

Date:

Print Name:

Title:

State of: _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20 ____

NOTARY PUBLIC

(SEAL)

For MPEA Use

Reviewed By:

Date: