

## MoDOT Disadvantaged Business Enterprise (DBE) Job-Site Review Commercially Useful Function (CUF) Determination

Contract ID: _____	Job No.: _____	DBE Start Date: _____
Prime Contractor: _____		DBE Subcontractor Approval Date: _____
DBE Contractor: _____		Estimated DBE Completion Date: _____
DBE Owners Name: _____		
DBE Representative: _____	DBE Representative reports to: _____	

DBE Is Performing as:	<input type="checkbox"/> Prime Contractor	<input type="checkbox"/> Subcontractor	<input type="checkbox"/> Another Tier Subcontractor	<input type="checkbox"/> Broker
	<input type="checkbox"/> Material Supplier	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Regular Dealer	

DBE Type (mark one):	<input type="radio"/> Contractor	<input type="radio"/> Trucker	<input type="radio"/> Supplier	<input type="radio"/> Broker
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Description of recent type of work observed: _____	
_____	
_____	

**Review of On-site DBE Contractor**

**PERFORMANCE**

1. Does the DBE have its own employees on the job to perform the work? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
2. Does the DBE own the equipment being utilized to perform its work? Are the DBE's markings/emblems on the equipment? _____ If NO, attach equipment list, ownership documents, and rental/lease agreements: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
3. Is the DBE self performing the subcontract defined task for a specific item of work (distinct element) on the contract? Does the DBE do 100% of their work? Does the DBE schedule work, material deliveries and other actions required for prosecution of work?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
4. Is the operator of the equipment a DBE employee?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
5. Does the DBE maintain it's own payroll?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

**HAULING FIRMS**

6. Does the DBE hauling firm own and/ or lease their trucks? (review ownership / registration and / or lease documents to verify)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
7. Does the DBE employ drivers for trucks owned by the company? (if leased trucks include operators, this should be indicated in the agreement / purchase order)	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
8. Do the haul tickets and/or bills of lading associated with the project confirm that hauling is being performed by the DBE?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

**MATERIAL SUPPLIERS OR MANUFACTURES / FABRICATORS**

9. Does the DBE's name appear on all applicable invoices, haul tickets, and/or bills of lading? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
10. Does the DBE furnish and install, if applicable, the materials? Did the DBE deliver materials to the site with their own and / or leased trucks?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
11. If the DBE has any materials drop shipped to the project site, was the invoice addressed to the DBE? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
12. Does the dealer have an established storage facility and inventory? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

**SUPERVISION**

13. Is the DBE self performing work without assistance from the prime or another subcontractor?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
14. Is the DBE providing supervision of it employees and their work? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
15. Is the supervisor a full-time employee of the DBE? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A

**COMERCIAALLY USEFUL FUNCTION DETERMINATION**

16. Does the DBE contractor appear to have control over methods of work on its contract items? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
17. Is the DBE an independent business, executing a distinct element of work, performing, managing, and supervising the work? If NO, explain: _____	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A
18. Describe what actions are taken to correct any deficiencies found during the review: _____	<input type="radio"/> N/A

DBE Contractor Representative:		Title:		Date:	
MoDOT Representative:		Title:		Date:	