**Date**

**Addressed to District Contact**

**District Mailing Address**

**City, State, Zip Code**

RE: **DBE Certification**

 **Project Description**

 **Project Number**

Dear: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Based on our examination of the attached certification from the contractor and our monitoring of the project, we believe the listing of DBE is applicable and that the contractor has complied with the requirements of the contracts.

The DBE Goal established for this project is \_\_\_\_\_\_\_\_\_\_\_%.

The Actual DBE participation is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_%.

If you have any questions or need any additional information, please feel free to contact

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Contact Name and Phone Number***

Sincerely,

**(LPA Signature Block)**