

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

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| Contract ID: | Job No. | Prime Contractor: |
| DBE Contractor: | DBE Subcontract Approval Date: | |
| DBE Start Date: | Estimated DBE Completion Date: | |
| Description of recent type of work observed: | | |
| | | |
| DBE Representative: DBE Representative reports to: | | |
| DBE Name: | | |
| DBE Is performing as: | | |
| Prime Contractor | Subcontractor | Another Tier Subcontractor |
| Material Supplier | Manufacturer | Regular Dealer |
| Broker | | |
| DBE Type (circle one): CONTRACTOR - TRUCKER - SUPPLIER - BROKER | | |

For any questioned mark "No, please explain in the "Comments " section below

Section A: On site DBE Contractor

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| PERFORMANCE | |
| 1. Does the DBE have its own employees on the job to perform the work? If NO, explain: | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> 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="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> 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 performed 100% of their work? -- Does the DBE schedule work, material deliveries and other actions required for prosecution of the work? | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 4. Is the operator of the equipment a DBE employee? | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 5. Does the DBE maintain it's own payroll? | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| HAULING FIRMS | |
| 6. Does the DBE hauling firm own and/or lease their trucks? <i>(review ownership/vehicle registration and/or lease documents to verify)</i> | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 7. Does the DBE employ drivers for trucks owned by the company? <i>(if leased trucks include operators, this should be indicated in the agreement/purchase order)</i> | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> 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? If NO, explain: | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> 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="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 10. Does the DBE furnish and install, if applicable, the materials? Did the DBE deliver material to the site with their own and/or leased trucks? | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> 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="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 12. Does the dealer have an established storage facility and inventory? If NO, explain: | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| SUPERVISION | |
| 13. Is the DBE self performing work without assistance from the prime or another subcontractor? | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 14. Is the DBE providing supervision of it employees and their work? If NO, explain: | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 15. Is the supervisor a full-time employee of the DBE If NO, explain: | <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| COMMERCIALLY 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="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> 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="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A |
| 18. Describe what actions are taken to correct any deficiencies found during the review: | <input type="checkbox"/> N/A |

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| DBE Contractor Representative: | Title: |
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| MoDOT Representative: | Title: |
| Signature: | Date: |