COMMONWEALTH OF VIRGINIA DEPARTMENT OF TRANSPORTATION DBE AND SWAM PAYMENT COMPLIANCE REPORT

Page(s)	Of	
(1a) Report No.	 •	
(1b) Period Ending		

(2b) State Funded(2c) Order No.(2e) Contractor/Subcontra		g)Project No.	(2d) Date of Exec		(2h)Contract	ld. No.		
(2i)FHWA No			o(2h)Contract Id. No(2j)District					
(3) DBE and SWAM Firm Name, Certification No.	(4) Tax I.D. (5)DBE and SWAM Category	SWAM	(6) Allowable Credit of Contract or Agreement	(7) Allowable Credit		(8) Disallowed Credit (VDOT Use Only)		(9) Type of Work (Indicate Item Numbers & Work Description)
		Category		(7a) This Quarter	(7b) To Date	(8a) This Quarter	(8b) To Date	Work Bescription)
Total Dollar Amount Paid by			DMBE					
Quarter and To Date by DBE and SWAM Category		DWBE						
			SBE					
			WBE					
			MBE					
All "amounts paid" to ce SWAM firms are to be re	ported and	my/oι	certify under pena ur Knowledge.	alty of law that the	information provid	ded herein is accura	te, current, and cor	mplete to the best of
Prir		Signat Print N	nature and Title of Company Official It Name and Phone Number of Individual Inpleting Report					Date

Form C-63 Rev. 5-22-07

VIRGINIA DEPARTMENT OF TRANSPORTATION INSTRUCTIONS FOR DBE/SWAM PAYMENT COMPLIANCE REPORT – C63

The Prime Contractor is required to submit a DBE Payment Compliance Report and requested to submit payments made to Small, Women-owned, and Minority-owned (SWAM) Business Enterprises for the designated quarterly reporting period. All amounts paid to **certified** DBE and SWAM businesses are subject to monitoring and enforcement mechanisms. It is the responsibility of the prime contractor to provide evidence of DBE and SWAM payments in response to monitoring and enforcement compliance reviews.

The instructions below correspond to each item on the report. Please follow the instructions.

1a. **Report No.**

Indicate the number of the report you are sending in sequence. For example: If this is the second report you are submitting, enter Report No. 2.

1b. Period Ending

Indicate the reporting period based on the Reporting Schedule listed in these instructions.

2a. Federally Funded

Indicate if contract is federally funded.

2b. State Funded

Indicate if contract is state funded.

2c. Order No.

Enter the "Call Order" number assigned to your project by VDOT

2d. Date of Execution

Enter the date the contract was executed by VDOT.

2e. **Contractor/Subcontractor**

Enter your company's name.

2f. Route No.

Enter the highway route number shown in your contract.

2g. Project No.

Enter the project number assigned to your project by VDOT.

2h. Contract Id. No.

Enter the contract identification number assigned to your project by VDOT.

2i. **FHWA No.**

Enter the FHWA number assigned to your project.

2j. District

Enter the District where the project under contract is located.

3. **DBE and SWAM Firm Name, Certification No.**

Enter all DBE/SWAM subcontractors utilized and their certification number.

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4. **Tax I.D. No.**

Indicate the Federal Employer Identification No.

5. **DBE and SWAM Category** (As certified by the Virginia Department of Minority Business

Enterprise)

Designate type of DBE/SWAM business:

DBE: DMBE – Disadvantaged Minority-owned Business DWBE – Disadvantaged Woman-owned Business

SWAM: SBE - Small Business

MBE – Minority-Owned Business WBE – Woman-Owned Business

6. Allowable Credit of Contract or Agreement

Dollar value of contract or agreement to be performed by the DBE and SWAM during the contract or agreement which is allowable for participation credit.

7a. Allowable Credit This Quarter

Dollar amount that can be credited for work performed in reporting quarter.

7b. Allowable Credit To Date

Dollar amount that can be credited for work performed since work commenced.

8a. **Disallowed Credit This Quarter**

Dollar amount of payment paid to DBE and SWAM that is <u>NOT</u> allowable for participation credit in reporting quarter.

8b. **Disallowed Credit To Date**

Dollar amount of payment that is NOT allowable for participation credit since work commenced.

9. **Type of Work** (Indicate Item Numbers)

State work item(s) performed and give description.

Effective July 1, 2007, All Form C-63s for a particular reporting period shall be submitted in an electronic format to the respective person in responsible charge in each District by the following dates of each calendar year.

REPORTING SCHEDULE

Quarter	Reporting Period	Date Due To Responsible VDOT Residency
1st	July 1 – September 30	Five (5) working days after the reporting period
2nd	October 1 – December 31	Five (5) working days after the reporting period
3rd	January 1 – March 31	Five (5) working days after the reporting period
4th	April 1 – June 30	Five (5) working days after the reporting period

If the submittal date falls on a weekend/holiday, the forms shall be submitted to the VDOT Responsible Charge District Office on the following business day.

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INSTRUCTIONS FOR SAVING FORM C-63 DATA IN PDF FORMAT

Please be advised that the information that you have placed on the Form C-63 (PDF format) will not save to the file when you close the file. To save your information while using the PDF format, you must use the correct procedures outlined below.

** The following steps will describe the correct procedure for saving the data that you have placed on the PDF version of the Form C-63:

Step #1 CLICK ON "File"

Step #2 CLICK ON "Save A Copy"

Step #3 CLICK ON "Save A Blank Copy"

Step #4 ENTER your "Firm Name" as the File Name

Step #5 ENTER the "Order Number" (see line 2c on Form C-63)

Step #6 ENTER Underscore (_)

Step #7 ENTER "**Report Number**" (see line 1a on Form C-63)

Step #8 ENTER "Quarter Ending" (see line 1b on Form C-63)

Step #9 ENTER the "Year" (last two digits only)

Step #10 ENTER ".pdf" as the appropriate file ending

EXAMPLE:

Firm Name: Vdot Construction Co.

Order No.: A01 Report No.: 5

Quarter Ending: 1st Quarter (Jul.1 – Sept. 30)

Year: 07

Using the information in the example, your file would be saved as:

vdotA01_050107.pdf