



## Disadvantaged Business Enterprise (DBE) Program Trucking Commitment Agreement Form

This commitment is subject to the award and receipt of a signed contract from the Texas Department of Transportation for the subject project. DBE's must be certified at time of submittal.

<b>Project #:</b>		<b>County:</b>		<b>Contract-CSJ:</b>	
*All Trucking quantities and units of measure should match the bid tab item whenever possible. If listing items by hours, or by lump sum amounts, please provide calculations to substantiate the quantities listed.					
<b>Bid Item</b>	<b>Item Description</b>	<b>Unit of Measure</b>	<b>Unit Price</b>	<b>Quantity</b>	<b>Total Per Item</b>
			\$		\$
<b>Total Commitment Amount (including attachments): \$</b>					

### TO BE COMPLETED BY THE DBE TRUCKING FIRM

1. Number of hours contracted or quantities to be hauled? \_\_\_\_\_
2. Number of fully operational trucks to be used? \_\_\_\_\_ Tractor/trailers: \_\_\_\_\_ Dump trucks: \_\_\_\_\_  
2a. Specify vehicle identification information on page 2.
3. Number of fully operational trucks owned by DBE? \_\_\_\_\_ Dump trucks: \_\_\_\_\_ Tractors/trailers: \_\_\_\_\_
4. If Owner Operators or additional trucking companies are to be used, answer the following and provide a copy of lease agreement(s) including specific information asked on page 2.

Name of Trucking Company	Dollar Amount of Contract/Agreement	Number of Dump Trucks, Tractors/Trailers (specify)
	\$	
	\$	
<b>The Contractor shall inform the District the dates when the subcontractor starts and completes all work under the subcontract.</b>		
<b>Estimated Beginning Date</b> (Mo & Yr) /	<b>Estimated Completion Date</b> (Mo & Yr) /	
<b>IMPORTANT! The signatures of the prime contractor and the DBE, and the total commitment amount must always be on the same page.</b>		
<b>Prime Contractor:</b>	Name/Title (please print):	
Address:	Signature:	
Phone:                      Fax:		
E-mail:		
<b>DBE:</b>	Name/Title (please print):	
Vendor No.:	Signature:	
Address:		
Phone:                      Fax:		
E-mail:	Date:	
<b>Subcontractor (if the DBE will be a second tier sub)</b>	Name/Title (please print):	
Address:	Signature:	
Phone:                      Fax:		
E-mail:		

The Texas Department of Transportation maintains the information collected through this form. With few exceptions, you are entitled on request to be informed about the information that we collect about you. Under §§552.021 and 552.023 of the Texas Government Code, you also are entitled to receive and review the information. Under §559.004 of the Government Code, you are also entitled to have us correct information about you that is incorrect.

To ensure prompt and efficient handling of your project file we are requesting that all commitments to be presented to the Business Opportunity Programs Office, using this basic format.

# DBE Truck Unit Listing

Company Name:			
CCSJ #			
Unit #	Year/Make	VIN #	Plate #

I hereby certify that the information presented above is correct. I agree to inform the District Area Engineer in writing of any changes within 10 days of the change(s).

DBE Company:

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DBE Principal: \_\_\_\_\_