ARKANSAS DEPARTMENT OF TRANSPORTATION
SPECIAL PROVISION
JOB

DOCUMENTATION OF PAYMENTS MADE TO
DISADVANTAGED BUSINESS ENTERPRISES

Although this contract does not have a Disadvantaged Business Enterprise (DBE) Goal, in accordance with Subsection 103.08(a) of the Standard Specifications all payments made to DBE Contractors, suppliers, manufacturers, and/or non-construction service firms must be reported by the Prime Contractor.

As required by Subsection 103.08(h), the Prime Contractor must use the appropriate DBE Payment Log form included in this Special Provision during the progress of the Contract. Listed below are the instructions on when each form is required to be submitted.

- The Prime DBE Payment Log (page 3) must be submitted by the Prime Contractor when he/she is a certified DBE Contractor and work was performed by their own forces or money was earned by the DBE Prime Contractor for work performed by a Subcontractor during the estimate period.

- The DBE Subcontractor Payment Log (page 2) must be submitted by the Prime Contractor when a Subcontractor is a certified DBE Contractor and work was performed by a Subcontractor or money was earned by a Subcontractor for work performed by a Second-tier Subcontractor during the estimate period.

- The 2nd Tier DBE Payment Log (page 4) must be submitted by the Prime Contractor when a 2nd Tier Subcontractor is a certified DBE Contractor and work was performed by a 2nd Tier Subcontractor during the estimate period.

- The 2nd Tier DBE Payment Log (page 4) must be submitted by the Prime Contractor when payments are made to a Department Certified DBE supplier, manufacturer, and/or non-construction service firm by the Prime Contractor or any Subcontractor or 2nd Tier Subcontractor during the estimate period.

A separate DBE Payment Log form is required for each DBE firm receiving payments for work completed or services provided during each estimate period. The DBE Payment Log forms, along with instructions for their use, are available on the Department’s website at:

http://ardot.gov/Construc/DBE_Log.xls

All certifications of payments must be received by the Resident Engineer within thirty-five (35) calendar days following the end of each estimate period. Facsimile or scanned copies of the completed original payment log forms are acceptable to fulfill this requirement.

Upon completion of the contract, a final certificate of payments to all DBE firms -- page 5 of this Special Provision -- is required by Subsection 103.08 (h). The final amount paid to each DBE firm shall match the total to date reported on the last DBE payment log submitted for each firm. If necessary, an additional DBE payment log shall be submitted with the certificate of payment itemizing all payments made to DBE firms since the last estimate period. A signed, original of the Final Certificate of Payment must be furnished to the Resident Engineer.
Arkansas Department of Transportation
DBE Subcontractor Payment Log

Job Number ____________________  Prime Contractor ____________________________________________

Estimate No. ________  DBE Subcontractor ____________________________________________________

Estimate Ending Date__________  Date Payment Made to DBE _________________________

<table>
<thead>
<tr>
<th>Item Code*</th>
<th>Item Description</th>
<th>Subcontract Unit Price</th>
<th>2nd Tier Unit Price</th>
<th>Quantity</th>
<th>Value Earned By Subcontractor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Item Codes for pay items are shown on the estimate voucher

Total This Estimate
Retainage Withheld This Estimate
Net Total This Estimate
% Retainage  Previous Total
Total To Date

DBE Payment Log must be received within 35 calendar days of the ending date of the estimate.

The Prime Contractor certifies that the payment listed has been made to the DBE Subcontractor and that the documentation of this payment is available for inspection upon request.

Authorized Signature__________________________________________  Title__________________________

Typed or Printed Name__________________________________________  Date__________________________

Department
Use Only

Received    Verified
By ___________________________  By ____________________________
Date ________________  Date ________________  RE Initials

Rev. 11-20-08
Arkansas Department of Transportation  
DBE Prime Contractor Payment Log

<table>
<thead>
<tr>
<th>Item Code*</th>
<th>Item Description</th>
<th>Contract Unit Price</th>
<th>Sub Unit Price</th>
<th>Quantity</th>
<th>Value Earned By DBE Prime</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Item Codes for pay items are shown on the estimate voucher

Total This Estimate

Previous Total

Total To Date

DBE Payment Log must be received within 35 calendar days of the ending date of the estimate.

The Prime Contractor certifies that the information shown above is correct and represents the value earned by the DBE Prime Contractor during the above estimate period.

Authorized Signature_________________________________________ Title________________________
Typed or Printed Name________________________________________ Date_______________________

Department
Use Only
By ___________________________ By ___________________________ Verified __________________________
Date __________________________ Date __________________________ RE Initials ______________________

Rev. 2-19-08
Arkansas Department of Transportation

DBE 2nd Tier Payment Log

Job Number ______________________  Prime Contractor ________________________________

Estimate No. ______  Subcontractor ________________________________

Estimate Ending Date___________  DBE 2nd Tier Subcontractor ________________________________

Date Payment Made to DBE __________________________

<table>
<thead>
<tr>
<th>Item Code*</th>
<th>Item Description</th>
<th>2nd Tier Unit Price</th>
<th>Quantity</th>
<th>Value Earned by 2nd Tier</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Item Codes for pay items are shown on the estimate voucher

Total This Estimate
Retainage Withheld This Estimate
Net Total This Estimate
% Retainage
Previous Total
Total To Date

The Prime Contractor certifies that the payment listed has been made to the DBE 2nd Tier Subcontractor and that the documentation of this payment is available for inspection upon request.

Authorized Signature_____________________________________

Title______________________________________________________

Typed or Printed Name______________________________________

Date__________________________

Department

Use Only

Received

Verified

By ________________________  By ________________________  RE Initials

Date ________________________  Date ________________________

DBE Payment Log must be received within 35 calendar days of the ending date of the estimate.

Rev. 11-20-08
ARKANSAS DEPARTMENT OF TRANSPORTATION
CERTIFICATE OF PAYMENT

JOB ______________________ F.A.P. ____________________________

JOB NAME ____________________________

ORIGINAL CONTRACT AMOUNT $______________ DBE GOAL $______________ *

DBE CONTRACT GOAL ___%

FINAL PAYMENT TO DBEs

The undersigned Contractor on the above mentioned project hereby certifies that the following amount(s) were paid to:

<table>
<thead>
<tr>
<th>DBE Subcontractor(s)</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

Total Paid to DBEs $______

Only payments related to work, services, or material actually provided by DBE firms should be shown. Payments under second tier subcontracts from DBE firms to non-DBE firms should not be included. **DBE prime Contractors should include the value of work performed by its own forces.**

Contractor: 

Signature: 

Typed or Printed Name: 

Title: 

Date: 

THIS “CERTIFICATE OF PAYMENT” IS TO BE SUBMITTED TO THE RESIDENT ENGINEER PRIOR TO PROJECT ACCEPTANCE.

* If goal not met, brief explanation: ________________________________

________________________

Rev. 11-20-08