## STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION

### FINAL REPORT-UTILIZATION OF DISADVANTAGED BUSINESS ENTERPRISES (DBE), FIRST-TIER SUBCONTRACTORS

**CEM-2402F (REV 02/2008)**

<table>
<thead>
<tr>
<th>CONTRACT NUMBER</th>
<th>COUNTY</th>
<th>ROUTE</th>
<th>POST MILES</th>
<th>FEDERAL AID PROJECT NO.</th>
<th>ADMINISTERING AGENCY</th>
<th>CONTRACT COMPLETION DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIME CONTRACTOR</td>
<td>BUSINESS ADDRESS</td>
<td>ESTIMATED CONTRACT AMOUNT</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ITE M NO.</th>
<th>DESCRIPTION OF WORK PERFORMED AND MATERIAL PROVIDED</th>
<th>COMPANY NAME AND BUSINESS ADDRESS</th>
<th>DBE CERT. NUMBER</th>
<th>CONTRACT PAYMENTS</th>
<th>DATE WORK COMPLETE</th>
<th>DATE OF FINAL PAYMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NON-DBE $</td>
<td>DBE $</td>
<td></td>
</tr>
</tbody>
</table>

**ORIGINAL COMMITMENT**

$ $

TOTAL $ $

DBE

List all First-Tier Subcontractors, Disadvantaged Business Enterprises (DBEs) regardless of tier, whether or not the firms were originally listed for goal credit. If actual DBE utilization (or item of work) was different than that approved at time of award, provide comments on back of form. List actual amount paid to each entity.

**I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT**

**CONTRACTOR REPRESENTATIVE'S SIGNATURE**

**BUSINESS PHONE NUMBER**

**DATE**

**TO THE BEST OF MY INFORMATION AND BELIEF, THE ABOVE INFORMATION IS COMPLETE AND CORRECT**

**RESIDENT ENGINEER'S SIGNATURE**

**BUSINESS PHONE NUMBER**

**DATE**

Copy Distribution-Caltrans contracts:

- Original - District Construction
- Copy - Business Enterprise Program
- Copy - Contractor
- Copy - Resident Engineer

Copy Distribution-Local Agency contracts:

- Original - District Local Assistance Engineer
- Copy - District Local Assistance Engineer
- Copy - Local Agency file

July 1, 2012
The form requires specific information regarding the construction project: Contract Number, County, Route, Post
Miles, Federal-aid Project No., the Administering Agency, the Contract Completion Date and the Estimated Contract
Amount. It requires the prime contractor name and business address. The focus of the form is to describe how did what
by contract item number and descriptions, asking for specific dollar values of item work completed broken down by
subcontractors who performed the work both DBE and non-DBE work forces. DBE prime contractors are required to
show the date of work performed by their own forces along with the corresponding dollar value of work.

The form has a column to enter the Contract Item No. (or Item No's) and description of work performed or materials
provided, as well as a column for the subcontractor name and business address. For those firms who are DBE, there is a
column to enter their DBE Certification Number. The DBE should provide their certification number to the contractor and
notify the contractor in writing with the date of the decertification if their status should change during the course of the
project.

The form has six columns for the dollar value to be entered for the item work performed by the subcontractor.

The Non-DBE column is used to enter the dollar value of work performed for firms who are not certified DBE.

The decision of which column to be used for entering the DBE dollar value is based on what program(s)
status the firm is certified. This program status is determined by the California Unified Certification Program
by ethnicity, gender, ownership, and control issues at time of certification. To confirm the certification status
and program status, access the Department of Transportation Civil Rights web site at:
http://www.dot.ca.gov/hq/bep or by calling (916) 324-1700 or the toll free number at (888) 810-6346.

Based on this DBE Program status, the following table depicts which column to be used:

<table>
<thead>
<tr>
<th>DBE Program Status</th>
<th>Column to be used</th>
</tr>
</thead>
<tbody>
<tr>
<td>If program status shows DBE only with no other programs listed</td>
<td>DBE</td>
</tr>
</tbody>
</table>

If a contractor performing work as a DBE on the project becomes decertified and still performs work after their
decertification date, enter the total dollar value performed by this contractor under the appropriate DBE identification column.

If a contractor performing work as a non-DBE on the project becomes certified as a DBE, enter the dollar value of all
work performed after certification as a DBE under the appropriate identification column.

Enter the total of each of the six columns in Form CEM-2402(F).

Any changes to DBE certification must also be submitted on Form-CEM 2403(F).

Enter the Date Work Completed as well as the Date of Final Payment (the date when the prime contractor made the
“final payment” to the subcontractor for the portion of work listed as being completed).

The contractor and the resident engineer sign and date the form indicating that the information provided is complete and
correct.