

## **DBE GOOD FAITH EFFORTS CERTIFICATION**

This is to certify that in all purchase and contract selections (*Legal Name of Applicant*) **Wake County** is committed to and shall make good faith efforts to purchase from and award contracts to Disadvantaged Business Enterprises (DBEs).

**DBE good faith efforts will include the following items that are indicated by check mark(s) or narrative:**

| Required by<br>PTD | Check all<br>that apply  | Description  |
|--------------------|--------------------------|--|
| ▷                  | X                        | Write a letter to Certified DBEs in the service area to inform them of purchase or contract opportunities;   |
| ▷                  | X                        | Document telephone calls, emails and correspondence with or on behalf of DBEs;   |
|                    | <input type="checkbox"/> | Advertise purchase and contract opportunities on local TV Community Cable Network;   |
| ▷                  | X                        | Request purchase/contract price quotes/bids from DBEs;   |
|                    | <input type="checkbox"/> | Monitor newspapers for new businesses that are DBE eligible  |
| ▷                  | X                        | Encourage interested eligible firms to become NCDOT certified. Interested firms should refer to <a href="http://www.ncdot.gov/business/ocs/dbe/#FAQ10">http://www.ncdot.gov/business/ocs/dbe/#FAQ10</a> or contact the office of contractual services at (919) 733-5316 ext 330 for more information                                       |
| ▷                  | X                        | Encourage interested firms to contact the Office of Historically Underutilized Businesses at (919) 807-2330 for more information.  |
| ▷                  | X                        | Consult NCDOT Certified DBE Directory. A DBE company will be listed in the DBE Directory for each work type or area of specialization that it performs. You may obtain a copy of this directory at <a href="https://apps.dot.state.nc.us/vendor/directory/default.aspx#0">https://apps.dot.state.nc.us/vendor/directory/default.aspx#0</a> |
|                    | <input type="checkbox"/> | Other efforts: Describe: _____   |
|                    | <input type="checkbox"/> | Other efforts: Describe: _____   |

You may obtain of copy of the USDOT Disadvantaged Business Enterprise Program Title 49 Part 26 at <http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&tpl=%2Findex.tpl>

**Reminder:** Documentation of all good faith efforts shall be retained for a period of five (5) years following the end of the fiscal year.

I certify that, to the best of my knowledge, the above information describes the DBE good faith efforts.

▶  
\_\_\_\_\_  
Signature of Authorized Official  
James West, Chair, Board of Commissioners  
\_\_\_\_\_  
Type Name and Title of Authorized Official

\_\_\_\_\_  
Date