



NOTICE TO CONSTRUCTION CONTRACTORS

Bidder's List of Quoters Collection Form

APPENDIX B

FORM BLCC / DBE B
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In accordance with 49 CFR Part 26, the Department of Public Works (DPW) will establish its Annual DBE goal using a Bidders List. The Bidders List will be a compilation of all quotes received by the Contractor during the advertising period. The Bidders List will be used to determine the relative availability of DBEs.

At the time the bid is submitted to the Contracting Officer/DPW, the Contractor shall list, on Form BLCC, the quotes received for the project, using additional sheets as necessary. The listing shall include **EACH quoter's name, address, telephone number, age of firm, annual gross receipts of the firm and whether the quoter is a Virgin Islands certified DBE.** FAILURE TO COMPLY WITH THIS REQUIREMENT SHALL RENDER A BID NON-RESPONSIVE AND THE BID SHALL BE REJECTED.

The term "Quoter" shall include subcontractors and suppliers of materials with whom the Contractor contracts directly.

Project Name: _____ Project No.: _____

Bidder/Contractor Name: _____ Address: _____ Telephone#: _____ Email: _____

LISTING OF QUOTERS

| FIRM NAME, ADDRESS PHONE NUMBER | DESCRIPTION OF WORK | Dollar Amt. of Bid Proposal | Will Firm Be Used | DBE OR NON- DBE STATUS | AGE OF FRIM | ANNUAL GROSS RECEIPTS |
|--|---------------------|--------------------------------|-----------------------|--|--|--|
| Name: _____ Address: _____ _____ Phone No.: _____ Email: _____ | | | ___ Yes ___ No | <input type="checkbox"/> DBE <input type="checkbox"/> NON-DBE | ___ Less than 1 year ___ 1 - 3 years ___ 4 - 7 years ___ 8 - 10 years ___ more than 10 years | ___ Less than \$500K ___ \$500K - \$1M ___ \$1-2M ___ \$2-5M ___ Greater than \$5M |
| Name: _____ Address: _____ _____ Phone No.: _____ Email: _____ | | | ___ Yes ___ No | <input type="checkbox"/> DBE <input type="checkbox"/> NON-DBE | ___ Less than 1 year ___ 1 - 3 years ___ 4 - 7 years ___ 8 - 10 years ___ more than 10 years | ___ Less than \$500K ___ \$500K - \$1M ___ \$1-2M ___ \$2-5M ___ Greater than \$5M |

LISTING OF QUOTERS (attach additional sheets if necessary)

| FIRM NAME, ADDRESS PHONE NUMBER | DESCRIPTION OF WORK | Dollar Amt. of Bid Proposal | Will Firm Be Used | DBE OR NON- DBE STATUS | AGE OF FRIM | ANNUAL GROSS RECEIPTS |
|---|---------------------|--------------------------------|-----------------------|--|--|--|
| Name: _____ Address: _____ _____ Phone No.: _____ Email _____ | | | ___ Yes ___ No | <input type="checkbox"/> DBE <input type="checkbox"/> NON-DBE | ___ Less than 1 year ___ 1 – 3 years ___ 4 – 7 years ___ 8 – 10 years ___ more than 10 years | ___ Less than \$500K ___ \$500K - \$1M ___ \$1-2M ___ \$2-5M ___ Greater than \$5M |
| Name: _____ Address: _____ _____ Phone No.: _____ Email _____ | | | ___ Yes ___ No | <input type="checkbox"/> DBE <input type="checkbox"/> NON-DBE | ___ Less than 1 year ___ 1 – 3 years ___ 4 – 7 years ___ 8 – 10 years ___ more than 10 years | ___ Less than \$500K ___ \$500K - \$1M ___ \$1-2M ___ \$2-5M ___ Greater than \$5M |
| Name: _____ Address: _____ _____ Phone No.: _____ Email _____ | | | ___ Yes ___ No | <input type="checkbox"/> DBE <input type="checkbox"/> NON-DBE | ___ Less than 1 year ___ 1 – 3 years ___ 4 – 7 years ___ 8 – 10 years ___ more than 10 years | ___ Less than \$500K ___ \$500K - \$1M ___ \$1-2M ___ \$2-5M ___ Greater than \$5M |

The undersigned hereby declares that the information set forth on this form is current, complete and accurate.

Authorized Signature: _____

Date: _____

Printed Name: _____

Title: _____