

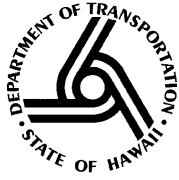
STATE OF HAWAII  
DEPARTMENT OF TRANSPORTATION  
OFFICE OF CIVIL RIGHTS  
869 Punchbowl Street, Room 112  
Honolulu, Hawaii 96813  
Telephone: 808 587-2023  
Fax: 808 587-2025  
TTY: 808 587-2210



### **Instructions for Completing the Change Affidavit**

The **Change Affidavit** is necessary to determine the firm's continued program eligibility. If a DBE firm fails to provide this information in a timely manner, it will be deemed to have failed to cooperate with the requirements of 49 CFR §26.109(c).

1. The annual **Change Affidavit** must be completed and submitted 30 days prior to the firm's anniversary date, (indicated on your certification letter) except in the year, when the *DBE Renewal* is due (once every three years). Additionally submit the **Change Affidavit** whenever there are changes to the firm in the following areas:
  - a. Ownership or control of the firm,
  - b. Firm's addresses, email and/or telephone contact numbers,
  - c. Personal net worth of the individual owner(s) (**exceed \$1.32 million**)
  - d. Business size that would cause the firm's to exceed the maximum size standards.
  - e. Primary NAICS code and if applicable additional NAICS codes.
2. The 51% owner must sign and notarize the **Change Affidavit**.
3. Include the **first page** of the firm's most recent completed U.S. Income Tax Returns, or Schedule C of the owner's federal tax returns.
4. Return the notarized Change Affidavit, and tax document to the above address.



**STATE OF HAWAII**  
**DEPARTMENT OF TRANSPORTATION**  
**OFFICE OF CIVIL RIGHTS**  
 869 Punchbowl Street, Room 112  
 Honolulu, Hawaii 96813  
 Telephone: 808 587-2023  
 Fax: 808 587-2025 ♦ TTY: 808 587-2210



**DISADVANTAGED BUSINESS ENTERPRISE (DBE) CHANGE AFFIDAVIT**

<b>Name of firm</b>		<b>dba</b>	
<b>Address:</b>		<b>Mailing address (if different)</b>	
<b>Telephone No.</b>	<b>FAX No.</b>	<b>E-mail: / web address</b>	
<b>Primary NAICS code</b>	<b>Additional NAICS code</b>		
<b>Nature of Business</b>			

Please check one:

<input type="radio"/>	There are <b>no</b> changes in the firm's disadvantaged status, ownership, control and/or management or any material changes in the information provided previously in the application form.
<input type="radio"/>	There are changes in the firm's disadvantaged status, ownership, control and/or management or any material changes in the information provided previously in the application form. (Please submit a letter on the firm's letterhead and describe any changes in disadvantaged status, personal net worth, ownership, control and/or management of the firm, along with supporting documents.)

My personal net worth is \$ \_\_\_\_\_, and excludes my primary residence and ownership interest in the DBE firm.

I authorize the Hawaii Department of Transportation to make inquiries as necessary to verify the accuracy of the statements made and to determine my continued eligibility as a DBE. I certify that each disadvantaged owner is socially and economically disadvantaged. Attached is the first page of the firm's U.S. Corporate or Partnership or Schedule C that substantiates the firm's business size and gross receipts.

The undersigned swears that the foregoing statements are true and correct and include all material information necessary to identify and establish the applicant's continued eligibility to participate in the DBE program. Further, the undersigned agrees to permit an onsite review of the company's operation as well as the audit and examination of books, records and files of the named firm. **Any material misrepresentation will be grounds for terminating the firm's eligibility as well as any contract that may be awarded and for initiating action under Federal and/or State laws concerning false statements.**

<b>Name / Title</b>	<b>Signature</b>	<b>Date</b>

**Notary Public**

County of _____	State of _____	{Seal}
The foregoing affidavit was subscribed and sworn to me before me on this _____ day of _____, 20____ by _____ _____ (name)		
<b>Notary Public</b>  Commission expires _____		