

Instructions for DBE Renewal

General

1. The Hawaii Department of Transportation (HDOT) conducts an eligibility review for all DBE firms seeking continued certification. This review is performed once every three (3) years. As part of this review, the DBE firm must submit the attached Affidavit of Continued Eligibility which must be signed and notarized, DBE Renewal Form, Personal Financial Statement and supporting documents to remain certified as a DBE.
2. The information requested is necessary to determine whether the firm continues to qualify as a *bona fide* Disadvantaged Business Enterprise (DBE) according to the guidelines established by the Code of Federal Regulations, Title 49, Part 26, Subparts D and E.
3. The review cannot be completed until all documents are received by the HDOT. Additional documents may be required at the discretion of the HDOT. Send completed forms and supporting documents to:

Hawaii Department of Transportation
Office of Civil Rights/Disadvantaged Business Enterprise
869 Punchbowl Street, Room 112
Honolulu, Hawaii 96813
Phone: (808) 587-2023 TTY: (808) 587-2210 Fax: (808) 587-2025

4. HDOT staff may schedule an on-site visit if there are substantive changes that affect your DBE eligibility. The on-site visit is not applicable to out-of-state firms. By signing the Affidavit of DBE Eligibility the DBE owner(s) agree to permit access by HDOT staff to inspect the DBE's place(s) of business.
5. HDOT reserves the right to require further information for the DBE owner(s) prior to or during the review process. Once certified, the certification is effective for at least three years. Upon completing the review, you will receive written notification of your certification status. If you are denied certification, you will be notified in writing of the reasons and the appeal procedure.

DBE Responsibilities

1. The DBE owner(s) understand and accept the conditions for participation in HDOT's DBE program:
2. The DBE owner(s) agree to permit the HDOT access to inspect the applicant's place(s) of business.
3. The DBE owner(s) agree to notify HDOT within 30 days of any changes in information supplied during this renewal period.
4. The DBE owner(s) agree to submit a DBE Change Affidavit and supply gross receipts information annually to HDOT.



State of Hawai'i
 Department of Transportation
 Disadvantaged Business Enterprise (DBE)
 869 Punchbowl Street, Room 112
 Honolulu, Hawai'i 96813
 Telephone: 808 587-2023
 Fax: 808 587-2025 ♦ TTY: 808 587-2210



DBE Affidavit of Continued Eligibility

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.

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.**

Name of Firm

Name / Title	Signature	Date

and

Name / Title	Signature	Date

Notary Public

County of _____	State of _____	{Seal}
The foregoing affidavit was subscribed and sworn to me on this the _____ day of _____, 20____ by _____		
(Notary's name)		
Notary Public: _____ (Signature of Notary)		
My commission expires: _____, 20____		

DBE Renewal Form

Name of Firm: _____ dba, if any: _____ <small>Note: if the firm's legal structure or ownership has changed since it was last certified, you must submit a new UCA.</small>		
Contact Person: _____		Title: _____
Business Address: (P.O. Box unacceptable)		
No.	Street name	Suite/Unit Number
City / State		Zip Code
Mailing Address: (If different)		
No.	Street name	Suite/Unit Number
City / State		Zip Code
E-Mail Address: _____		Web-Site: _____
Telephone Number: _____ <small>Area Code + Number</small>		Fax Number: _____ <small>Area Code + Number</small>
Other Number _____ <small>Area Code + Number</small>		
Is Business address and/or business phone number also a residence address or phone number? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Federal Identification Number: _____

Indicate the nature of the firm's business with a check mark, and list the North American Industry Classification System (NAICS) code(s) for which you are seeking certification in the space below (you may search your firm's NAICS and size standard at <http://www.census.gov/epcd/naics02>):

- | | | | |
|---|---------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Concession (ACDBE) | <input type="checkbox"/> Construction | <input type="checkbox"/> Consultant | <input type="checkbox"/> Manufacturer |
| <input type="checkbox"/> Service Provider | <input type="checkbox"/> Supplier | <input type="checkbox"/> Other (please describe): _____ | |

Type of Business: _____

NAICS (Primary) _____

(Secondary) _____
if applicable

Please place checkmarks in the appropriate blanks. If certain items are not applicable to your business, please indicate by writing N/A.

1	Has the company moved? If yes, attach lease agreement of new location.	Y <input type="checkbox"/>	N <input type="checkbox"/>
2	Has the organizational structure of the company changed since the last review of DBE eligibility or notification to the Hawaii DOT's DBE program office?	Y <input type="checkbox"/>	N <input type="checkbox"/>
3	If the firm is certified in a state other than Hawaii, has the firm been decertified or denied by any other state? If yes, attach documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
4	Have there been any changes in the owners, stockholders, members, of the firm since the last review of DBE eligibility or notification to the Hawaii DOT's DBE program office? If yes, attach documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
5	Have there been any changes in the firm's Board of Directors/Officers since the last DBE review of eligibility or notification to Hawaii DOT's DBE program office? If yes, attach supporting documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
6	Have there been any changes or amendments to the firm's Articles of Incorporation, Articles of Organization, By-Laws, Partnership Agreements, or any other ownership documents? If yes, attach supporting documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
7	Did any owner, stockholder, director, officer partner, manager and/or key person of the company establish a new business relationship with or purchase ownership interest in any other company? If yes, attach documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
8	Have there been any changes in the day-to-day responsibilities of the owner(s)? If yes, attach documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
9	Identify the number of employees including owner(s). FT ____ PT ____		
10	Have there been any changes to the company's financial situation? For example, new line of credit, increased bonding capacity, new financial institution, authorized signatures, etc. If yes, attach documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
11	Have there been any changes to the firm's work capabilities? For example, does the firm perform work under different NAICS codes not previously reported? If yes, attach documentation.	Y <input type="checkbox"/>	N <input type="checkbox"/>
12	Are you actively bidding on Hawaii DOT's projects?	Y <input type="checkbox"/>	N <input type="checkbox"/>

Provide the following documents:

1. Complete federal individual tax returns for the **past two years** for all eligible individuals.
2. *First page only* of federal corporate tax returns for **last three years**. If filing a Form 1040, provide Schedule C, Profit or Loss from Business.
3. Personal Financial Statement for majority disadvantaged owner(s) (51% ownership).
4. If Hawaii is not your primary place of business provide most recent certification letter from the home state.

Note: all of these items are required. Failure to submit all the required information will result in a delay and/or termination in the processing of your application. To avoid loss of important documents, please present a complete packet at one time.