



# Appendix R

## Ohio Department of Transportation Disadvantaged Business Enterprise (DBE) Program Affidavit of Subcontractor Payment

Federal regulations require ODOT to monitor and verify that work subcontracted to a DBE firm is actually performed by the that firm, and to report the DBE attainment on each project. This affidavit is to be completed, signed and emailed to ODOT within 45 days of the substantial work complete date. The affidavit seeks to verify actual payments made to the DBE firm.

Payment Period \_\_\_\_\_ - \_\_\_\_\_ Project No. \_\_\_\_\_ PID \_\_\_\_\_  
Interim affidavits only ODOT-let projects only

- ▶ **Interim**  Interim affidavits must be submitted for each DBE firm at the end of each construction season for multi-year projects.
- ▶ **Final**  Final affidavits for each DBE firm must be submitted within 45 days of the substantial work complete date.

Enter the construction/services/trucking payment amount in column A.  
For DBE MSVs, enter the materials/supplies payment amount in column B.

All amounts indicated must be cumulative

	A	B
Prime Contractor Name _____	_____	_____
Name of DBE Subcontractor/ _____	_____	_____
Non-DBE Subcontractor (if there is a DBE Sub-subcontractor)	_____	_____
Name of DBE Sub-subcontractor _____ (If applicable)	_____	_____

By signing below, the noted firms agree that the payment amounts recorded above are true and accurate as of the payment time period noted above. Furthermore, the noted firms understand that the DBE listed above must perform a **commercially useful function** as defined in 49 CFR Part 26 in order to receive credit towards the DBE contract goal.

I, the **Prime Contractor's** authorized representative, declare under penalty of perjury of the laws of Ohio and the United States that the information entered above is accurate and true.

\_\_\_\_\_

**Prime Contractor Signature** **Date**

\_\_\_\_\_

**Print Name** **Title**

I, the **Subcontractor's** authorized representative, declare under penalty of perjury of the laws of Ohio and the United States that the information entered above is accurate and true.

\_\_\_\_\_

**DBE/Non-DBE Subcontractor Signature** **Date**

\_\_\_\_\_

**Print Name** **Title**

I, the **Sub-subcontractor's** authorized representative, declare under penalty of perjury of the laws of Ohio and the United States that the information entered above is accurate and true.

\_\_\_\_\_

**DBE Sub-subcontractor Signature** **Date**

\_\_\_\_\_

**Print Name** **Title**

Please email completed, signed form to: [PaymentAffidavits@dot.ohio.gov](mailto:PaymentAffidavits@dot.ohio.gov)