Metropolitan Government of Nashville and Davidson County

Equal Business Opportunity (EBO)

Subcontractor Inclusion Bid Submission Checklist

For use on Solicitations with MBE and WBE Subcontracting Goals

Please be sure the following items are completed and included in your bid response for a bid with MBE and WBE subcontracting goals. Failure to submit all the forms required below will result in a bid being deemed "Non-Responsive" by Metro Procurement and/or BAO:

Here

Form Name/Description	Required?	Completed
Statement of MWBE Utilization	Yes	☐
Statement of Interested Subcontractors/Vendors.	Yes	☐
Statement of Bid Proposals/Price Quotations	Yes	☐
Good Faith Efforts Summary Sheets (applicable if MWBE utilization doesn't meet the established goals)	Yes; if applicable	☐

It is highly recommended that you review the Minority Business Enterprise (MBE) and Woman Business Enterprise (WBE) Instructions Contained within this packet prior to completing and submitting the required forms to ensure that you are adhering to the Equal Business Opportunity (EBO) program requirements. Failure to adhere to the EBO program requirements in submitting the required forms may cause your bid to be deemed non-responsive.

INSTRUCTIONS

The requirements of Title 4 of the Metropolitan Code, BL2018-1419 are a part of this contract and are incorporated by reference. **THE FAILURE OF ANY BIDDER/PROPOSER, CONTRACTOR, OR SUBCONTRACTOR TO COMPLY WITH BL2018-1419 AND THE IMPLEMENTING REGULATIONS SHALL BE A BREACH OF CONTRACT.**

Highlights of Metro Nashville's Equal Business Opportunity (EBO) program are noted below. A complete copy of BL2018-1419 and the implementing regulations are available on the website at: https://www.nashville.gov/Metro-Clerk/Legislative/Ordinances/Details/0ac32c47-2f7f-490f-ba86-5a5edab9edf1/2015-2019/BL2018-1419.aspx or by request from the Office of Minority and Women Business Assistance.

1. **BID/PROPOSAL REQUIREMENTS**

   Bid/Proposal must include a commitment to utilize MBEs and WBEs at a percentage that equals or exceeds the contract goals indicated in the contract specifications. Bidder/ Proposer must submit the following completed documents WITH THE BID/PROPOSAL:

   Statement of MWBE Utilization Plan
   Statement of Interested Subcontractors/Vendors
   Statement of Bid Proposals/Price Quotations

   Good Faith Efforts Summary Sheets (if applicable)

   Any bid/proposal that does not include a completed Statement of MWBE Utilization, Statement of Interested Subcontractors/Vendors, or Statement of Bid Proposals/Price Quotations will be considered non-responsive to the minimum requirements of the solicitation. **(see BL2018-1419, 4.46.070 Bid Requirements**)

   Bidder/Proposer must provide a record of its Good Faith efforts to obtain MBE and WBE participation if bid/proposal doesn't commit to utilize MBEs and WBEs at a percentage that equals or exceeds the required MBE and WBE subcontractor goals **(see 4.46.080 Evaluation of Bid for Program Compliance C & D)**

2. **VERIFYING CERTIFICATION**

   Bidder/Proposer is responsible for verifying that each MBE and WBE to be used on a contract is registered with Metropolitan Government of Nashville & Davidson County and certified by one of Metro Nashville's Reciprocal Certification entities at the time of the bid opening/proposal submission. The MBEs and WBEs named must be certified to provide the services that they are listed to perform, and those services must be required as part of the work on this contract. A directory of certified MBE and WBE firms are available online at https://nashville.diversitycompliance.com/.

3. COUNTING MBE AND WBE PARTICIPATION

a) Participation of M/WBEs

A business enterprise that is certified as both an MBE and WBE (M/WBE) may not be counted toward both MBE and WBE goals for the same project. The bidder/proposer must select the goal to which the business enterprise is to be counted.

b) Credit for Self-Performance

A bidder/proposer that is an MBE or WBE may not count the work it intends to perform with its own forces toward the applicable MBE or WBE goal.

c) Commercially Useful Function

The bidder/proposer may count toward the contract goals only expenditures to MBEs and WBEs that perform a commercially useful function in the execution of the contract.

Commercially Useful Function: Means performance or provision of real and actual services by a Participant under a contract with the Metropolitan Government or under a subcontract with another business enterprise under a contract with the Metropolitan Government. In determining whether a business is performing a commercially useful function, the following non-exclusive factors will be considered:

1. the nature and amount of work contracted;
2. whether the MWBE has the skill and expertise to perform work for which it has been certified;
3. whether the MWBE performs, manages and supervises the work;
4. whether the MWBE intends to purchase commodities and/or services from a non-MWBE and simply resell same to the general or prime contractor for the purpose of allowing those commodities and/or services to be counted towards assessment of a Benchmark or fulfillment of a goal (if implemented);
5. standard industry practices relating to the use of subcontractors. Consistent with standard industry practices, a MWBE subcontractor may enter into second tier subcontracts provided that no more than twenty-five percent of the work thereunder will be performed by a non-MWBE unless the subcontractor demonstrates to the satisfaction of the Metropolitan Government that the subcontracting arrangement is consistent with standard industry practice. **(4.46.020 Definitions)**

d)Supplier Participation:

Where a Participant utilizes suppliers to satisfy the goal(s) in whole or in part, the MWBE suppliers must perform a commercially useful function. Supplier participation may be approved upon review of the following factors:

i. the nature and amount of supplies to be furnished;
ii. whether the MWBE is a manufacturer, wholesaler or distributor of the supplies and has the capabilities to deliver same in accordance with its certification;
iii. whether the MWBE performs, manages and supervises the work to furnish the supplies; and

whether the MWBE intends to purchase supplies from a non-MWBE and simply resell same to the general or prime contractor for allowing those supplies to be counted towards fulfillment of the goal(s). **(4.46.060 Annual Aspirational Goal and Project-By-Project Goals, D3)**

e) Joint Ventures
A bidder/proposer may count toward the contract goal the portion of its expenditure to a joint venture that is equal to the percentage of the MBE or WBE participation in the joint venture. **(4.46.060 Annual Aspirational Goal and Project-By-Project Goals, D4)**

Joint Venture: Means an association of two or more independent persons, partnerships, corporations (or any combination of them) formed, consistent with the laws of the State of Tennessee, to perform one or more specific contracts limited in scope and duration. . **(4.46.020 Definitions)**

f) Good Faith Efforts
If a bidder/proposer is unable to comply with the contract goal, the bidder/proposer may submit Good Faith Efforts Summary Sheets with their bid. Good Faith Efforts will only be considered If the Bid submitted by the First Ranked Bidder in response to a solicitation issued by the Purchasing Agent includes the documents required by Section 4.46.070 of BL2018-1419, and if the Bidder has not met the applicable goal
Approval of Good Faith Efforts shall not be granted unless the Good Faith Efforts Summary Sheets include documentation that demonstrates good faith efforts to meet the goals **(4.46.080 Evaluation of Bid for Program Compliance)**

Statement of M/WBE Utilization

Proposer's/Firm's Name:	Proposer's Phone #:
Solicitation Title:	Proposer's Email Address:
Solicitation #:	Amount Self-performed :
Proposer's/Firm's Ownership: Select	Total Bid Amount:
Proposed EBO Goal (%): _____ **MBE%** _____**WBE%**	EBO Goal Met? (Y/N) Select

The following MWBE* subcontractor(s)/supplier(s) will be utilized for the performance of this project:

	MBE/WBE Firm Name	MBE/WBE Firm Address	Phone/E-Mail	Certificate Type (MBE or WBE)	* MBE/WBE Group Type *	Code # UNSPS/NAICS	Description of Work	MBE/WBE Dollars ($)	Percent of Total Contract
1				Select	Select				
2				Select	Select				
3				Select	Select				
4				Select	Select				
5				Select	Select				
6				Select	Select				
7				Select	Select				

I am the duly authorized representative and certify the facts and representations contained in this form and supporting documents are true and correct.

Authorized Representative (Printed Name/Title/Signature)	Date

Note: MWBE is defined as business enterprise maintaining a significant business prescience in the Program Area & performing a commercial useful function that is owned by one or more of the following: (1) African Americans (2) Native Americans, (3) Hispanic Americans, (4) Asian Americans, and (5) Women.

For Internal Office Use ONLY

Has Prime Complied with EBO Goal? BAO Only

If No, Good Faith Efforts Met? BAO Only

BAO Representative:

Date:

Total MBE Subcontracting	_____%	$_____
Total WBE Subcontracting	_____%	$_____
Total MBE/WBE Participation:	_____%	$_____

EQUAL BUSINESS OPPORTUNITY PROGRAM FORM

Please complete this form to provide Metro with information regarding each individual or entity requesting information about the project or solicited for participation on the project. The list of subcontractors shall include those persons who did not actually submit a price quotation or bid, rather just requested information. Please contact the Business Assistance Office with any questions at 615-880-2814.

Project Name_____ **RFP/ITB Number**_____

Part I **STATEMENT OF INTERESTED M/WBE SUBCONTRACTORS AND VENDORS**

As part of our regular and customary good faith efforts to include MWBE subcontractors, suppliers and joint venturers,
_____ has contacted or was contacted by the following certified MWBEs related to our bid/proposal.
(Company Name)

Business Name & Contact	*Phone No*	*MBE/WBE Certificate Type*	*Date of Contact*	*Method of Contact*	*Who Initiated Contact?*	*UNSPS Code # for work to be performed*	*Information Requested*

Part II STATEMENT OF BID/PRICE QUOTATION
This Statement shall include only those potential subcontractors not selected that actually submitted a bid or proposal for the project.

Business Name & Contact	*Phone No*	*MBE/WBE Certificate Type*	*Dollar value*	*Estimated % of total contract value*	*UNSPS Code # for work to be performed*	*Work Requested To Be Performed*

Name_____ Title_____ Date_____

LETTER OF INTENT TO PERFORM AS A SUBCONTRACTOR/JV

This form is to be completed and submitted by the apparent successful participant by the end of the second business day following notice of intent to award from Metro.

Project Name/RFQ #:

Established Subcontractor Participation Goals: MBE%_____ WBE%_____	Total Contract Value:

PRIME CONTRACTOR INFORMATION

Prime Name:		
Project Mgr:	Phone #:	Email:
Prime Company Address:		
City: State:	Zip Code:	

SUBCONTRACTOR/JV INFORMATION

Subcontractor/JV Name:		
Project Mgr:	Phone #:	Email:
Sub/JV is a (check) MBE: ☐ WBE: ☐ Joint Venture: ☐		
Sub/JV Company Address:		
City: State:	Zip Code:	

BID, MBE AND WBE PARTICIPATION

Total value of M/WBE participation under this Subcontractor/Joint Venture Agreement is:		
MBE Participation:	Dollar Amount	Percentage
WBE Participation:	Dollar Amount	Percentage
Check One: Will Meet MBE/WBE Participation Goal ☐		Will NOT Meet MBE/WBE Participation Goal ☐

Detailed description of work items to be performed:

THIS PLAN MUST BE SIGNED BY BOTH PRIME AND SUBCONTRACTOR/JOINT VENTURER

I certify that the information included in this Letter of Intent to Perform as a Subcontractor/Joint Venture is true and complete to the best of my knowledge and belief. I further understand and agree that this is a written agreement between the Prime and Subcontractor/JV for the work described upon award and execution of a contract with Metropolitan Government of Nashville and Davidson County.

_____	_____
Print Name and Title of Prime	Print Name and Title of Subcontractor/JV
_____	_____
Signature	Signature
Date:	Date:

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

SUMMARY SHEET

THIS DOCUMENT MUST BE ACCURATELY COMPLETED, SIGNED AND SUBMITTED WITH THE BID OR PROPOSAL (Due with Bid Submission if Applicable)		
Project Name:		**Project Number:**
Company Name:	**Date Submitted:**	**Total Contract Value:**
Address:		**Federal Tax ID#**
Contact Person:	**Email:**	**Phone #:**

GOOD FAITH EFFORTS SUMMARY SHEET		
Number	**Bidder Action(s)**	**BAO Only**
1.	**Solicitation and written notice to available and certified MWBEs:** Soliciting specific individual MWBEs whose availability as potential sources of goods or services can be reasonably ascertained. This measure includes sending letters or making other personal contacts with specific certified MWBEs including those that the Bidder has contracted with in the past as well as other MWBEs with which the Bidder may be unfamiliar, but whose identities can be ascertained from a directory of certified MWBEs maintained by the BAO. The written notices contain: I. Enough information about the plans, specs, and terms & conditions of the solicitation; II. A contact person knowledgeable of the project documents available to answer questions about the condition of the contract; III. Information regarding the Bidder's bonding requirements; IV. The deadline for submission of price quotations.	Select

For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

Company Name/Address/Contact Person/Phone/Email	Type of Business	Type of Work/Service(s) Solicited	How Business was contacted (i.e. email, phone, letter, etc.?)	Response to Solicitation (i.e. will submit bid, no response, not interested	Bid/Quote Amount	Company Selected (Write Yes or NO)
	Select					Select
	Select					Select

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M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

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Contact Person:	**Email:**	**Phone #:**
GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
2.	**Meetings:** Attended or held informational meetings to update potential subcontractors or vendors of subcontracting or supply opportunities.	Select

List all information requested below related to the above project. If additional space is required, this form may be duplicated.

Company Name/Address/Contact Person/Phone Number/Email	Description of Meeting Notices for M/W/SDVEs	Date M/W/SDVE Attended, if applicable

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M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

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Company Name:	**Date Submitted:**	**Total Contract Value:**
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Contact Person:	**Email:**	**Phone #:**

GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
3.	**Unbundling.** Divided the contract, in accordance with normal industry practice, into small, economically feasible segments that could be performed by MWBEs. Under no circumstances, however, shall a bidder segment work solely for the purpose of utilizing MWBEs as subcontractors where such segmentation is not in accordance with common and accepted industry practices relating to the utilization of other firms as subcontractors.	Select

What Scope of Project Was Divided?

1.	2.
3.	4.
5.	6.

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

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Contact Person:	**Email:**	**Phone #:**

GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
4.	**Rejection:** Provided a written explanation for rejection of any potential subcontractor or vendor to the Bidder, including the name of the firm awarded the subcontract or supply agreement.	Select

For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

M/WBE Firm Name/Address/Contact Person/Phone Number/Email	Description of Proposed Work	Reason for Rejection

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M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

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Company Name:	**Date Submitted:**	**Total Contract Value:**
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Contact Person:	**Email:**	**Phone #:**

GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
5.	**Non-discrimination:** Providing a non-discriminatory work site. Maintaining a work environment free of harassment, intimidation and coercion at all construction sites, offices and other facilities at which the Bidder's employees are assigned to work. The Bidder shall specifically ensure that all labor supervisors, superintendents, and other on-site supervisory personnel are aware of and carry out the Bidder's obligation to maintain a non-discriminatory work environment.	Select

For each training, list the type of training and date.

Type of Training	Date of Training

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

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Company Name:	**Date Submitted:**	**Total Contract Value:**
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Contact Person:	**Email:**	**Phone #:**

GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
6.	**Community and Other Organizational Services Support:** Advertising in trade publications of general circulation in the Program Area. The advertisement shall identify and describe the specific subcontracting or other opportunity in reasonable detail.	Select

For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

Publication Name	Date of Publication	Please provide copy.

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

SUMMARY SHEET

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Company Name:	**Date Submitted:**	**Total Contract Value:**
Address:	**Federal Tax ID#**	
Contact Person:	**Email:**	**Phone #:**
GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
7.	**Assistance: Bonding/Lines of Credit/Insurance:** Providing reasonable assistance to a MWBE in need of equipment, supplies, bonding, letters of credit and/or insurance.	Select

For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

Company Name/Address/Contact Person/Phone Number/Email	Type of Assistance

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

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Company Name:	**Date Submitted:**	**Total Contract Value:**
Address:		**Federal Tax ID#**
Contact Person:	**Email:**	**Phone #:**
GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
8.	**Database Utilization** Accessed all reasonable and available means to include, but not limited to the following examples: https://www.nashville.gov/Finance/Procurement/Business-Assistance-Office/SMWBE-Lists-and-Forms.aspxor https://nashville.diversitycompliance.com/	Select

For each MBE/WBE firm contacted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

Database Accessed	Date of Access	Results

METROPOLITIAN GOVERNMENT OF NASHVILLE - DAVIDSON COUNTY

M/WBE SUBCONTRACTORS GOOD FAITH EFFORTS

SUMMARY SHEET

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Project Name:	**Project Number:**	
Company Name:	**Date Submitted:**	**Total Contract Value:**
Address:	**Federal Tax ID#**	
Contact Person:	**Email:**	**Phone #:**

GOOD FAITH EFFORTS SUMMARY SHEET CHECKLIST		
Number	**Bidder Action(s)**	**BAO Only**
9.	**Mentor Protégé' Relationship/Technical Assistance:** Providing reasonable technical assistance to a MWBEs to ameliorate any deficiencies of technical knowledge or advance skill, where such assistance is undertaken by the Bidder to facilitate the MWBE's successful participation on a project or contract.	Select

For each MBE/WBE firm assisted, list the name(s) and all information requested below related to the above project. If additional space is required, this form may be duplicated.

Company Name	Type of Assistance	If Mentor Protégé' Agreement Reached, Please Provide Copy.

It is hereby certified that the above firms were contacted and offered an opportunity to respond on the above project. We further certify that the above statements are a true account of all firms' responses to our solicitation. Copies of all bids and/or quotes will be made available upon request.

Signature: _____ Print Name: _____ Title: _____