

VENDOR VERIFICATION FORM ("VVF")

Calendar Year: <u>Select</u>

Quarter: Select

PART I. Prime Contractor/ Developer & Agency Contract/ Project Details:

Subcontract # / Name:

(✓ one) SBE/CBE Subcontractor or SBE/CBE Lower Tier Subcontractor

PART II. <u>SBE/ CBE Subcontractor & Lower Tier Subcontractor Details:</u>

Company _____ is a (\checkmark all that apply) ____ small business enterprise (SBE) ____ certified business enterprise (CBE) ("SBE/CBE Company"), subcontractor that performed services or provided products to _____, which is <u>Select</u> on the <u>Select</u> tier for the Project. The SBE/CBE Company's CBE certification is active and the number is _____.

PART III. <u>SBE/CBE Company's Subcontracts to Lower Tier SBE/CBE or Non-CBE Companies:</u> (✓ one)

a. SBE/CBE Company provided 100% of all services and/or products provided for the *Entire Project* using its own organization and resources, and did not subcontract any portion to a lower tier subcontractor. (*Skip to Part V.*)

b. SBE/CBE Company provided 100% of all services and/or products provided for the *Entire Subcontract* using its own organization and resources, and did not subcontract any portion to a lower tier subcontractor. (*Skip to Part V.*)

C. SBE/CBE Company subcontracted a portion of the Subcontract to a lower tier subcontractor. (List every CBE and non-CBE lower tier subcontractor.)

Lower Tier Subcontractor	Lower Tier Subcontractor is: SBE, CBE or Non-CBE	Total Amount of Lower Tier Subcontract	Amount Paid to Lower Tier Subcontractor This Quarter	Detailed Description of lower tier subcontractor's scope of work	CBE Certification Number	Fully Executed Lower Tier Subcontract provided with this VVF
1.	Select	\$	\$			Select
2.	Select	\$	\$			Select
3.	Select	\$	\$			Select
4.	Select	\$	\$			Select

PART IV: <u>SBE/ CBE Subcontracting CREDIT:</u>

A **Fully executed Subcontract** with the SBE/CBE Company AND <u>each SBE & CBE</u> listed in Part III c. is provided with this VVF: (✓ one)

YES or **Previously Provided on Date - Proceed**;

□ NO – ♥STOP THIS VVF WILL <u>NOT</u> BE ACCEPTED, AND <u>NO CREDIT</u> GIVEN, UNTIL THE FULLY EXECUTED SUBCONTRACTS ARE PROVIDED!

Each *VVF* for <u>each SBE & CBE</u> listed in Part III c. is provided with this VVF: (✓ one)

YES or **Previously Provided on Date - Proceed**;

□ NO – ***STOP** THIS VVF WILL <u>NOT</u> BE ACCEPTED, AND <u>NO CREDIT</u> GIVEN, UNTIL VVFs FOR ALL SBES & CBES LISTED IN PART III c. ARE PROVIDED!

SBE/ CBE Subcontracting Credit will only be assessed for the portion of services & goods provided by each SBE/ CBE Company AND each SBE/ CBE Lower Tier Subcontractor USING ITS OWN ORGANIZATION AND RESOURCES.

PART V: Provide DETAILED Description of Scope of Work Provided by SBE/CBE Company:

The SBE/CBE Company provided the following scope of work/ products **using its own organization and resources** (**specify**) :_____. The subcontract work began on ______ *date* and is scheduled to be completed on ______ date. The total amount of the subcontract = \$______ (amount should include all change orders); the total amount subcontracted to SBE & CBE lower tier subcontractors = \$______ (amount should include all change orders). SBE/CBE Company paid total of \$______ to date for portion of subcontract performed with its own organization and resources; remaining amount to be paid to the SBE/CBE Company for portion of subcontract performed with its own organization and resources is \$______.

ACKNOWLEDGEMENT

I declare, certify, verify, attest or state under penalty of perjury that the information contained in this Vendor Verification Form, and any supporting documents submitted, are true and correct to the best of my knowledge and belief. I further declare, certify, verify, attest or state under penalty of perjury that I have the authority and specific knowledge of the goods and services provided under each subcontract contained in this Vender Verification Form. I understand that pursuant to D.C. Official Code § 22-2402, any person convicted of perjury shall be fined not more than \$5,000 or imprisoned for not more than 10 years, or both. I understand that any false or fraudulent statement contained in this Vender Verification Form may be grounds for revocation of my CBE registration pursuant to D.C. Official Code § 2-218.63. I also understand that failure to complete this Vender Verification Form properly will result in <u>no credit</u> towards the SBE and CBE Subcontracting Requirements. Further, a Prime Contractor, Developer, CBE, or Certified Joint Venture, if subject to, that fails to comply with the requirements of the Small and Certified Business Enterprise Development and Assistance Amendment Act of 2014 (D.C. Law 20-108) (the "Act"), shall be subject to penalties as outlined in the Act.

NOTARIZATION

The undersigned, as a duly authorized representative of _____, CBE/SBE Company, swears or affirms that the statements made herein are true and correct.

Signature:	Title:
Print Name: District of Columbia (or State/Commonwealth of	Date:
Signed and sworn to or affirmed before me on this , by , who is well known to me or has been	day of , sufficiently verified as the person who executed the foregoing
affidavit and who acknowledged the same to be his/her Notary signature:	r free act and deed.
(Seal)	
My commission expires:	
Page 2 of 2 VVF (DSLBD Revised October 22, 2014)	