



## Annual Eligibility Update

### Section I - Annual Eligibility Affidavit

The undersigned swears that they have read and understood this Annual Eligibility Update; that they have the authority to sign the Affidavit; that the update responses, the foregoing statements and accompanying documents are true, complete, and correct; and that all materials requested or required are provided.

**Note: If the Firm's Legal Structure or Ownership has changed since it was last certified, you must submit a new application.**

Return the completed Annual Eligibility Update and all supporting documents to:

Montana Department of Transportation  
ATTN: Wendy L. Stewart  
DBE Program Manager  
Civil Rights Bureau  
PO Box 201001  
Helena, MT 59620-1001

Please call DBE Supportive Service at 406.444.7287 for clarification or if you have any questions.

**Name of Firm:**

The above-named firm and its owners affirm that the MDT DBE Program Manager may deny continued eligibility, suspend or rescind certification and initiate action under Federal or state laws concerning false statements if, during or after the certification process, it finds that the undersigned have submitted false, inaccurate, incomplete or misleading information.

**List dba, if any:**

**Street Address:**

**Mailing Address, if different:**

**Business Telephone:**

**Fax Number:**

**E-mail Address:**

**Web Address:**

**Owner Signature:**

**Date:**



## Section II – Qualification Evaluation

- |                      |  |                       |                       |                   |                 |                  |                       |                |       |  |  |  |
|----------------------|--|-----------------------|-----------------------|-------------------|-----------------|------------------|-----------------------|----------------|-------|--|--|--|
| 1.                   | Have there been any changes in the owners and/or stockholders of the firm since the last certification or notification to the Civil Rights Bureau? If yes, attach documentation.   | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 2.                   | Have there been any changes in the firm’s Board of Directors/Officers since the last certification? If yes, attach documentation.  | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 3.                   | Have there been any changes or amendments to the firm’s Articles of Incorporation, Bylaws, partner agreements or other ownership documents? If yes, attach documentation.  | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 4.                   | Did any owner or key person of the company establish a new business relationship with, or purchase ownership interest in any other highway construction company? If yes, attach documentation.   | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 5.                   | Have there been any changes in the day-to-day responsibilities of the owner/owners? If yes, attach documentation.  | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 6.                   | Did any stockholder, director, officer, partner and/or manager establish a new business relationship with, or purchase ownership interest in, any other firm? (A business relationship may include, but is not limited to, ownership, shared space or employees, utilities, equipment or financing, etc.) If yes, attach documentation.                                  | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 7.                   | Identify the current number of employees (including owners):   | FT                    | PT                    |                   |                 |                  |                       |                |       |  |  |  |
| 8.                   | Have there been any changes in the firms’ financial status? For example, a new line of credit, increased bonding, new financial institution, authorized signatures, etc. If yes, attach documentation.   | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 9.                   | Have there been any changes in the firms work capabilities? If yes, please list all current work capabilities of the firm and provide supporting evidence.   | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
| 10.                  | Has the firm entered into any of the following since the last certification or notification to the Civil Rights Bureau? Check all that apply. For items checked, attach documentation.   | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |
|                      | <table border="0" style="width: 100%;"> <tr> <td style="width: 33%;">Employment Contracts</td> <td style="width: 33%;">Consultant Agreements</td> <td style="width: 33%;">Rental Agreements</td> </tr> <tr> <td>Equip Purchases</td> <td>Lease Agreements</td> <td>Management Agreements</td> </tr> <tr> <td>Profit Sharing</td> <td>Loans</td> <td></td> </tr> </table> | Employment Contracts  | Consultant Agreements | Rental Agreements | Equip Purchases | Lease Agreements | Management Agreements | Profit Sharing | Loans |  |  |  |
| Employment Contracts | Consultant Agreements  | Rental Agreements     |                       |                   |                 |                  |                       |                |       |  |  |  |
| Equip Purchases      | Lease Agreements   | Management Agreements |                       |                   |                 |                  |                       |                |       |  |  |  |
| Profit Sharing       | Loans  |                       |                       |                   |                 |                  |                       |                |       |  |  |  |
| 11.                  | At the current time, what are your performance bond limitations?<br>Aggregate Limit: _____ Project Limit: _____  |                       |                       |                   |                 |                  |                       |                |       |  |  |  |
| 12.                  | What are your gross receipts for the last complete year?<br>Indicate from: _____ and to: _____ dates for gross receipts.   |                       |                       |                   |                 |                  |                       |                |       |  |  |  |
| 13.                  | Are you actively bidding on MDT (Montana Department of Transportation) projects?   | Yes                   | No                    |                   |                 |                  |                       |                |       |  |  |  |



14. List the top three contracts you have completed in the last year:

	1	2	3
Prime Contractor's Name			
Project Number			
Project Location			
Type of Work			
Project Start Date			
Anticipated Completion Date			
Dollar Value of Contract			

**Provide copies of the following documents.**

- a) Complete current personal federal income tax for all owners, shareholders, partners/members.
- b) Signed and notarized Affidavit of Social and Economic Disadvantage from each eligible individual.
- c) Personal Net Worth Statements for each eligible individual.
- d) Complete current federal income tax for the firm.
- e) Complete current federal income tax for all affiliate firms.
- f) Resumes for new owners, shareholders, managers, and key person(s).
- g) If Montana is not your "home state," the most recent copy of your "home state's" certification.

**Note: All of these items are required.**