

MBE WAIVER REQUEST

PROJECT NAME _____ **SOLICITATION NO.** _____

If, for any reason, the apparent successful bidder or offeror is unable to achieve the contract goal for each certified MBE classification specified as having a subcontract goal or the overall MBE contract goal, the bidder or offeror may request, in writing, a waiver to include the following:

1. Attach a detailed statement of the efforts made to select portions of the work proposed to be performed by certified MBEs, including the work to be performed by each MBE classification if any MBE sub goal has been specified, in order to increase the likelihood of achieving the stated goal;
2. Attach a detailed statement of the efforts made to contact and negotiate with certified MBEs, and if appropriate, by certified MBE classification, including:
 - a. The names, addresses, dates, telephone numbers, MDOT MBE Certification No., and classification of certified MBEs contacted, and
 - b. A description of the information provided to certified MBEs regarding the plans, specifications, and anticipated time schedule for portions of the work to be performed;
3. As to each certified MBE that placed a subcontract quotation or offer that the apparent successful bidder or offeror considers not to be acceptable, attach a detailed statement of the reasons for this conclusion;
4. If applicable, include an MBE Unavailability Form (Attachment F) for each unavailable MBE firm offered an opportunity to bid on the above project, include the reasons they are unavailable and, if possible, the MBE firm's signature.
5. Include Attachment C which is the record of the apparent successful bidder's or offeror's compliance with the outreach.
6. If the request for a waiver is for a certain MBE classification with an overall MBE goal, the bidder or offeror shall demonstrate reasonable efforts to meet the overall MBE goal with other MBE classification or classifications.

Overall MBE goal ____% I request a waiver in the amount of ____% and commit to achieving a ____% overall MBE goal.

If applicable, sub goal of ____% women-owned businesses. I request a waiver in the amount of ____% and commit to achieving a ____% women-owned MBE goal.

If applicable, sub goal of ____% African American-owned businesses. I request a waiver in the amount of ____% and commit to achieving a ____% African American-owned MBE goal.

Bidder/Offeror Firm Name

Signature of Authorized Representative

Date

Printed Name, Title

If Applicable, Submit this MBE Waiver Request within 10 Working Days of Notification of Apparent Awardee