Division of Equity, Diversity and Inclusion
Minority Business Enterprise Compliance Office

One Capitol Hill, Providence, R.I. 02908-5850
(401) 574-8670 - mbe.compliance@doa.ri.gov - RI Relay 711

MPA PRE-AUTHORIZATION MBE PARTICIPATION ACKNOWLEDGMENT

MPA # and Title: _____

Prime Contractor: _____ Authorized Contact Person: _____

Contractor Phone Number: _____ Contractor Email: _____

Which of the following describes your business' status in terms of Minority and/or Woman, and/or Veteran-Owned Business Enterprise certification with the State of Rhode Island? MBE ____ WBE ____ VBE ____ or N/A _____

Rhode Island General Laws § 37-14.1 *et al.*, requires Minority and Women Business Enterprises be included in all state funded and state directed public construction programs and projects and in state purchases of goods and services and shall be awarded a minimum of 10% of the dollar value of an entire procurement or project. By initialing the following sections and signing the bottom of this document in my capacity as the contractor or an authorized representative of the contractor, I hereby confirm that:

- I acknowledge the State's requirements of including MBE/WBE certified businesses in all state funded and state directed public construction programs, projects and purchases.
  - Initials: _____
- I acknowledge that, if awarded the contract, the company must submit to the MBE Compliance Office (MBECO), copies of all executed agreements with the subcontractor(s) being utilized to achieve the participation goals.
  - Initials: _____
- I acknowledge that, if awarded the contract, the company must submit required reports and documents to the MBECO on a monthly basis verifying payments to the MBE subcontractors.
  - Initials: _____
- I acknowledge that, if awarded the contract, the company is required to immediately notify the MBECO of **ALL** changes in the use of vendors, subcontractors, or suppliers used under this contract including **ALL** Change Orders.
  - Initials: _____
- I acknowledge that, if awarded the contract, any failure to comply with the conditions acknowledged above may result in a determination of Non-Compliance and may result in sanctions pursuant to R.I. Gen. Laws § 37-14.1 *et al.*
  - Initials: _____

I, as an authorized signatory for the prime contractor, do solemnly declare and affirm under the penalty of perjury that the contents of the foregoing Acknowledgment are true and correct to the best of my knowledge, information and belief.

_____	_____	_____
Printed Name	Signature	Date