



CITY OF SAUSALITO
MONTHLY SBE TRACKING VERIFICATION

CONTRACT NO.:			MONTH:				YEAR:
Truck Owner	SBE Cert. No.	Company Name and Address	Truck No.	California Hwy. Patrol CA No.	Commission or Amount Paid*	Date Paid	Lease Arrangement (X if applicable)
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
					\$		Lease Agreement with Non-SBE <input type="checkbox"/> with SBE <input type="checkbox"/>
TOTAL AMOUNT PAID					\$		
PRIME CONTRACTOR			BUSINESS ADDRESS				BUSINESS PHONE NO.

* Upon request, all Lease Agreements shall be made available in accordance with the Special Provisions.

I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT.		
CONTRACTOR REPRESENTATIVE'S SIGNATURE	TITLE	DATE

MONTHLY SBE TRUCKING VERIFICATION INSTRUCTIONS

The top of Form contains boxes to put in the Contract Number, the Month of the reporting period and the Year of the reporting period.

The Form has a column to enter the name of the Truck Owner, the DBE/SBE Cert. No. (if DBE/SBE certified) and the Name and Address of the trucking company. The Form also requires the Truck No. and the California Highway Patrol CA No.

The Form is to be submitted prior to the 15th of each month and must show the dollar amount paid to the DBE/SBE trucking company(s) for trucking work performed by DBE/SBE certified trucks and for any fees or commissions of non-DBE/SBE trucks utilized each month on the project. The amount paid to each trucking company is to be entered in the column called "Commission or Amount Paid," in accordance with the Special Provisions **Section S11.05 (G)**.

Payment information is derived using the following:

1. 100% for the trucking services provided by the DBE/SBE using trucks it owns, operates and insures.
2. 100% for the trucking services provided by the trucks leased from other DBE/SBE firms.
3. The fee or commission paid to non-DBEs/SBEs for the lease of trucks. The Prime does not receive 100% credit for these services because they are not provided by a DBE/SBE company.

The total dollar figure of this column is to be placed in the box labeled "Total Amount Paid." The column "Date Paid" requires a date that each trucking company is paid for services rendered. The next column contains information that must be completed if a lease arrangement is applicable. Located at the bottom of the form is a space to put the name of the "Prime Contractor," their "Business Address" and their "Business Phone No."

At the bottom of the form there is a space for the Contractor or designee "Contractor Representative's Signature, Title and Date" certifying that the information provided on the form is complete and correct.