

Contract No.: Contract Name:

Page 1 of 2 – DMI Solicited/Utilized Schedules City of Tampa – Schedule of All Solicited Sub-(Contractors/Consultants/Suppliers) (DMI 10 Form)

Lompany Name					
	Phone: Fax				
	le box(es). Detailed Instructions for completing t	his form ar	e on page 2 c	of 4.	
	re contacted or solicited for this contract.				
-	re contacted because:				
	l list of additional Firms solicited and all supple	mental info	rmation (List	must com	ply with this
form)	Note: Form DMI-10 must list ALL su	bcontracto	rc colicitod		
NIGP Code Cate	egories: Buildings = 909, General = 912, Heavy =			nitects = 906	S Engineers 8
	5, Supplier = 912-77	- 515, Tradi	25 – 31 4, 711 CI	111111111111111111111111111111111111111	o, Liigiileeis e
S = SLBE	7		Trade or		
O = Neither			Services	Contact	Quote
	Company Name			Method L=Letter	or
	Address		NIGP	F=Fax	Response
Federal ID	Phone, Fax, Email		Code	E=Email	Received
			(listed	P=Phone	Y/N
			above)		
	Failure to Comple	te, Si	gn an	d Su	omit
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	this form with yo			-	
	Shall render the E	Bid N	on-Re	espon	sive
	(Da Nat Mad	· C . T	1	_	
	(Do Not Mod	lly I	nis F	orm)	
It is hereby cer	 tified that the information provided is an accura	ate and tru	e account of	<u> </u> contacts ar	d solicitation
•	cting opportunities on this contract.	ace and tru		contacts at	
	Name/Title: Name/Sign and Submit Forms 10, 20, & 50 M.			Date:	
Failure to Co				posal Non-	Responsive
	Forms must be included with	Bid / Prop	<u>oosal</u>		



Page 2 of 2 – DMI Solicited/Utilized Instructions for completing The Sub- (Contractor's/Consultants/ Suppliers) Solicited Form (DMI 10 Form)

<u>This form must be submitted with all bids or proposals</u>. <u>All</u> subcontractors (regardless of ownership or size) solicited and subcontractors from whom unsolicited quotations were received must be included in this form. The instructions that follow correspond to the headings on the form required to be completed. <u>Note:</u> Ability or desire to perform all work shall not exempt the prime from Good Faith Efforts to achieve participation.

Contract No. This is the number assigned by the City of Tampa for the proposal.

- **Contract Name.** This is the name of the contract assigned by the City of Tampa for the bid or proposal.
- **Contractor Name.** The name of your business and/or doing business as (dba), if applicable.
- Address. The physical address of your business.
- Federal ID. FIN. A number assigned to your business for tax reporting purposes.
- **Phone.** Telephone number to contact the business.
- Fax. Fax number for business.
- **Email.** Provide email address for electronic correspondence.
- No Firms were contacted or solicited for this contract. Checking the box indicates that a pre-determined Subcontract Goal or Participation Plan Requirement was not set by the city, resulting in your business not using subcontractors and will self-perform all work. If, during the performance of the contract, you employ subcontractors, the City must pre-approve subcontractors. Use of the "Sub-(Contractors/Consultants/Suppliers) Payments" form (DMI 30 Form) must be submitted with every pay application and invoice. Note: Certified SLBE firms bidding as Primes are not exempt from outreach and solicitation of subcontractors.
- No Firms were contacted because. Provide a brief explanation of why no firms were contacted or solicited.
- See attached documents. Check the box if, after you have completed the DMI Form in its entirety, you need more space to list additional firms and/or if you have supplemental information/documentation relating to the form. All DMI data not submitted on the DMI 10 Form must be in the same format and include all the requested data from the DMI 10 Form.

The following instructions are for the information of all subcontractors solicited.

- "S" = SLBE. Enter "S" for firms Certified by the City as Small Local Business Enterprises; "O" = non-certified others.
- **Federal ID.** FIN. A number assigned to a business for tax reporting purposes. This information is critical in the proper identification and payment of the contractor/subcontractor.
- Company Name, Address, Phone & Fax. Provide company information for verification of payments.
- **Trade, Services, or Materials** indicate the trade, service, or materials provided by the subcontractor. NIGP codes, aka "National Institute of Governmental Purchasing," are listed in the top section of the document.
- Contact Method L=letter, F=fax, E=Email, P=Phone. Indicate with a letter the method(s) of soliciting for bids.
- Quote or Resp. (response) Rec'd (received) Y/N. Indicate "Y" Yes if you received a quotation or if you received a response to your solicitation. Indicate "N" No if you received no response to your solicitation from the subcontractor. Must keep records: log, ledger, documentation, etc. that can validate/verify.

If additional information is required or you have questions, please contact the Equal Business Opportunity Program - Office of Equal Business Opportunity at (813) 274-5522