

**NEW HAMPSHIRE DEPARTMENT OF TRANSPORTATION  
DISADVANTAGED BUSINESS ENTERPRISE PROGRAM**

**COMMITMENT FORM**

Hereby (THE CONTRACTOR) \_\_\_\_\_ certifies, in accordance with the terms of [Section 103.06, Standard Specifications for Road and Bridge Construction](#) that has contacted the below listed appropriate disadvantaged business enterprises (DBE) taken from the current [DBE Directory](#); with negotiations leading to compliance of the established goal. The Contractor proposes to utilize the following DBEs as subcontractors, suppliers, manufacturers, or regular dealers on this project. Each item involved should be identified.

**IMPORTANT:** Low Bidder must submit Commitment Form to NHDOT Office of Access, Opportunity and Compliance (OAOC) within **3 days** of bid opening. **IMPORTANT:** In computing time, the day from which the period begins to run is not counted, and when the last day of the period is a Saturday, Sunday, or Federal holiday, the period extends to the next day that is not a Saturday, Sunday, or Federal holiday. Similarly, in circumstances where the NHDOT offices are closed for all or part of the last day, the period extends to the next day on which the agency is open.

**Bid opening date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Dollar amount of apparent low bid \$** \_\_\_\_\_

Name and Address of DBE	Item number(s)	Description of work to be completed by DBE's	Estimated dollar value of DBE participation
<b>TOTAL DBE \$</b>			

**Percentage of DBE Participation** \_\_\_\_\_

The undersigned hereby certifies that he or she has read the terms of this commitment and is authorized to bind the bidder to the commitment herein after set forth. The signing of the commitment form and letter(s) of intent by the Contractor and approval by NHDOT OAOC does not constitute formal subcontractor approval. Such subcontractor approval must be attained prior to commencing the work on project site.

\_\_\_\_\_ **Project Name**

\_\_\_\_\_ **Name of Authorized Officer**

\_\_\_\_\_ **Federal Project Number**      \_\_\_\_\_ **State Project Number**

\_\_\_\_\_ **Signature of Authorized Officer/Date**

**Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Office of Access, Opportunity and Compliance**

SEND FORM to: [oaoc@dot.nh.gov](mailto:oaoc@dot.nh.gov) AND [Merideth.A.Wilson@dot.nh.gov](mailto:Merideth.A.Wilson@dot.nh.gov)