



THIS FORM MUST BE COMPLETED BY BIDDERS/PROPOSERS FOR PROJECTS WITH CSBE REQUIREMENTS

SCHEDULE OF INTENT AFFIDAVIT (SOI)

COMMUNITY SMALL BUSINESS ENTERPRISE PROGRAM (“CSBE”)

This section must be completed by the Bidder/Proposer and the CSBE Subcontractor that will be utilized for scopes of work on the project

Name of Bidder/Proposer: _____

Contact Person: _____

Address: _____

Phone No.: _____

Project Name: _____

Project Number: _____

Contract Dollar Amount: _____

15% CSBE Dollar Amount _____

Name of Prime Bidder/Proposer	Certification No. (if applicable)	Certification Expiration Date (if applicable)	Type of CSBE work to be performed by the Bidder (if applicable)	Bidder’s self performance percentage (%) of Contract Value	Total Dollar (\$) Amount of Bidder’s self performance

The undersigned intends to perform the following work in connection with the above contract:

Name of Sub-contractor	Certification No.	Certification Expiration Date	Type of CSBE work to be performed by the sub-contractor	Sub-contractor percentage (%) of Contract Value	Total Dollar (\$) Amount of sub-contractor’s CSBE requirement

I certify that the representations contained in this form are true and accurate to the best of my knowledge. I affirm that I will enter into a sub-contractual agreement(s) with the above listed CSBE sub-contractor(s) if awarded this contract. Copies of the agreement(s) will be immediately made available to the City of Miami as required.

Bidder/Proposer Signature

Bidder/Proposer Print

Name

Title

Date

The undersigned has reasonable and uncommitted capacity sufficient to provide the required goods or services, all licenses and permits necessary to provide such goods or services, ability to obtain bonding that is reasonably required to provide such goods consistent with normal industry practice, and the ability to otherwise meet the bid specifications.

Sub-contractor Signature

Subcontractor Print

Name

Title

Date