SECOND TIER DBE UTILIZATION-FORM AA

Pro	ject Name:	

NJT Contract No: _____

DBE Sub-Prime (First Tier) Subcontractor Contract Value (\$):

I plan to subcontract _____% of my subcontract to Second Tier DBE subcontractor(s)/subconsultant(s) listed on the chart below to perform/supply the following:

Name, Address and Telephone # of Second Tier DBE Subcontractor/Subconsultant	Provide <u>Detailed</u> Scope of Work to be Performed	Dollar Value of Subcontractor/Sub- consultant Work (\$) Awarded	Percentage of Subcontractor Work (%)
			%
			%
			%
Any First-Tier DBE firm listed on the Form A must identify any DBE firm it will use to perform its scope of work.	TOTALS	\$	%

Second Tier DBE subs must perform 100% of their scope of work.

The undersigned understands its approval to perform on the above contract is based upon its identified DBE team listed above and its Non-DBE team listed on the Form AA2. The DBE Sub-Prime must receive written approval from the Office of Business Development for any changes to its DBE and/or Non-DBE subcontractors, their dollar values or scope of work identified on the Form AA and/or AA2 <u>before making any changes</u>. It attests that the identified firms will perform all work. Failure to adhere to, or falsification of any information contained herein shall result in breach of contract and subject to corrective action to be determined by NJ TRANSIT.

DBE Sub-Prime Firm:	Authorized Signature:
Company Address:	Print Name:
	Title:
Federal Tax ID #:	Sub-Prime's DBE Liaison Officer:
Company Tel #:	Date Signed: