**KANSAS CITY AREA TRANSPORTATION AUTHORITY**

**REQUEST FOR MODIFICATION, REPLACEMENT OR TERMINATION**

**OF DISADVANTAGED BUSINESS ENTERPRISE (DBE)**

**PROJECT PARTICIPATION**

*This form must be submitted to request substitutions for a DBE listed in the “Schedule of Participation By Contractor and Subcontractors” form submitted as part of Contractor’s Bid Documents as amended by any Change Orders or previously approved Requests for Modification/Substitution. This executed document shall be an amendment to the Contractor’s DBE utilization plan.*

CONTRACTOR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PROJECT NUMBER AND NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. As the duly authorized representative of the above Contractor, I am authorized to request this substitution or modification on behalf of the Contractor and hereby request that the Kansas City Area Transportation Authority (KCATA) recommend or approve:

 \_\_\_\_\_\_ SUBSTITUTION OF DBE FIRM

 Name of Current DBE Firm To Be Removed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Scope of Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Contracted Amount $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount of Work Completed To Date $\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Proposed DBE Firm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Scope of Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Amount of Proposed Work $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Scheduled To Begin Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_ MODIFICATION OF THE AMOUNT OF WORK BY DBE FIRM

 Name of DBE Firm \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Current % of Contract Commitment \_\_\_\_\_\_\_\_\_\_ Changed % of Contract Commitment \_\_\_\_\_\_\_\_\_\_

2. This Substitution/Modification is necessary because (check all applicable)

\_\_\_\_\_ The DBE Subcontractor failed or refuses to execute a written contract.

\_\_\_\_\_ The DBE Subcontractor failed or refuses to perform the work of its normal industry standards without good cause and that failure or refusal of the DBE is not a result of bad faith or discriminatory action of the Contractor.

\_\_\_\_\_ The DBE Subcontractor failed or refuses to comply with reasonable, non-discriminatory bonding requirements.

\_\_\_\_\_ The DBE Subcontractor has become bankrupt, insolvent, or exhibits credit unworthiness (supporting documentation is attached).

\_\_\_\_\_ The DBE Subcontractor has committed a material default or breach of its contract.

\_\_\_\_\_ The DBE Subcontractor has voluntarily withdrawn from the project (DBE’s written notice of withdrawal is attached).

\_\_\_\_\_ The DBE owner has died or has become disabled and is unable to complete its work on this Project.

\_\_\_\_\_ A Change Order and/or Amendment of the Project was issued that modifies the amount Contractor is to be compensated and correspondingly impacts the amount of compensation due to the DBE Subcontractor.

3. I affirm that written notice has been given to the DBE Subcontractor of Contractor’s intent to request a substitution or modification (copy attached) and the DBE Subcontractor has been given five (5) business days to respond to the notice (a copy of DBE firm’s response is attached).

 *EXCEPTION: If required in a particular case as a matter of public necessity (e.g., safety) the response period may be shortened.*

4. The following is a narrative summary of Contractor’s good faith efforts (as listed in Part A of the City’s Bid Documents) exhausted in attempts to substitute the DBE firm named above with other qualified, certified DBE firms for the listed scope of work or any other scope of work on the project. Supporting documentation is attached.

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5. Contractor hereby affirms that it has not intentionally attempted to evade the requirements of the Contract or the DBE Program and it is in KCATA’s best interest to approve this Request for Substitution or Modification. Additional documentation will be presented when requested by KCATA in order to make its determination.

Submitted By: Approved By:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contractor’s Authorized Representative KCATA’s Authorized Representative

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title Title

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Date Date