



## SCHEDULE OF SUBCONSULTANTS

Reporting Period: \_\_\_\_\_

Consultant: \_\_\_\_\_

M/WBE

NON-M/WBE

Description of Project: \_\_\_\_\_

Contract No.: \_\_\_\_\_ Agreement No.: \_\_\_\_\_ Agreement Date: \_\_\_\_\_

As part of the procedures for the submission of Bids, all **CONSULTANTS** are required to identify **ALL** participating **SUBCONSULTANTS**.  
Please identify such areas for above project, if applicable. Use additional sheets if necessary.

Name of Business Performing Work	Certification Status (check the applicable)		Description of Commodity, Materials, or Service	Dollar Amount
	M/WBE	NON-M/WBE		
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Dollar Amount of Work to be Completed by NON-M/WBE SUBCONSULTANTS				\$
Dollar Amount of Work to be Completed by M/WBE SUBCONSULTANTS				\$
<b>Total (The Total Amount shall equal the Amount Proposed on Summary of Proposal Page)</b>				<b>\$</b>

All M/WBE SUBCONSULTANTS must be certified as such by Chatham County MIWBE. It is understood and agreed that, if awarded a Contract by the Chatham County, the Contractor will not make additions, deletions, or substitutions to this certified list without the consent of the County's MIWBE Contract Compliance Manager or designee through the submittal of *Request for Approval of Change to Original Certified List of SUBCONSULTANTS*. It is understood that the County may audit any and/or all records of the Contract/vendor and conduct interviews of owners, principals, officers, employees and applicable SUBCONSULTANTS/contractors participating on the Contract. The County Contract compliance Office reserves the right to ensure compliance with Chatham County M/WBE's program to include status reports and audit of submitted MIWBE Information as deemed necessary.

**CONSULTANT'S CERTIFICATION**

The above information is true and complete, to the best of my knowledge and belief. I further understand and agree that if awarded the Project, this certification shall be attached thereto and become a part thereof. Failure to provide accurate information or exercise positive, good faith efforts (as defined by the Chatham County's Program) in support of the Chatham County's MIWBE's intent and objective may result in being considered non-responsive to the ITA's requirements. The Contract Compliance Office reserves the right to recommend an audit on the submitted MIWBE information as deemed necessary.

Name and Title: \_\_\_\_\_

(Please print or type)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_