



# MBE/WBE/DBE Contract Goals Request

Date: May 11, 2021  
 To: Andrea Dorch, Human Relations Department  
 From: Bon Marie Gardner, Water Department

<b>Project Number</b>	<b>Project Name</b>	
80002347	River Intake Traveling Screens Rehabilitation at the WTP	
<b>Contract ID Number</b>	<b>Estimated Cost: (cost breakdown attached)</b>	<b>Solicitation Date:</b>
9648	\$200,000	8/17/2021

**Estimated Project Duration:**

Note: Click the box to select

<b>→ FICB</b>		<b>PREVAILING WAGE:</b>		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
Contract Category:	<input type="checkbox"/> Construction	<input type="checkbox"/> Design-Build	<input type="checkbox"/> Non-Municipal Agency		
	<input type="checkbox"/> Design Professional	<input type="checkbox"/> Other Goods & Services	<input type="checkbox"/> Lease		
	<input type="checkbox"/> Professional Services	<input checked="" type="checkbox"/> Facilities Maintenance/Repair	<input type="checkbox"/> Tenant (MBE/WBE)		
	<input type="checkbox"/> Other (Enter Type):		<input type="checkbox"/> Concession		
Type:	<input checked="" type="checkbox"/> Original	<input type="checkbox"/> Amendment No.			
Funding:	<input checked="" type="checkbox"/> City(MBE/WBE)	<input type="checkbox"/> Federal (DBE)	<input checked="" type="checkbox"/> State (DBE)		
	<input type="checkbox"/> Other:	<input type="checkbox"/> Grant#			
Construction Workforce Goals: Are the estimated construction labor hours greater than 800 and the estimated cost greater than \$300,000? If yes, complete "Required Crafts" Worksheet and include total number of hours in Description of Work.					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input checked="" type="checkbox"/> Estimated Cost Breakdown attached - Page 2		<input type="checkbox"/> List of Required Crafts attached - Page 3			

**Description of work:**

This project consists of the removal, transport and re-building of the River Intake Traveling Water Screens at the Water Treatment Plant.

cc: Bon Marie Gardner

**FOR HUMAN RELATIONS DEPARTMENT USE ONLY:**

No Goals are set for this Project; OR  
 The following Goals are approved for this Project % MBE \_\_\_\_\_ % WBE OR \_\_\_\_\_ % DBE

DocuSigned by: Kimberly Daniels Date: 6/2/2021

Human Relations Department

**FOR FAIRNESS IN CONSTRUCTION BOARD USE ONLY<sup>2</sup>**

Approved  Disapproved  N/A

\_\_\_\_\_ Date \_\_\_\_\_

**FOR GRANT AGENCY USE ONLY<sup>3</sup>**

Approved  Disapproved  N/A

\_\_\_\_\_ Date \_\_\_\_\_

<sup>1</sup> DBE Programs apply to specific federal or state grant requirements.  
<sup>2</sup> For Projects subject to prevailing wage requirements only.  
<sup>3</sup> Federal and state grant agreements may require granting agency approval of contract goals.