APPLICATION FOR DETERMINING JOINT VENTURE ELIGIBILITY

North Dakota Department of Transportation, Civil Rights Division

SFN 6805 (Rev. 02-2015)

NOTE: If there is any change in the following information during the performance of a joint venture project, the Civil Rights Division Director of the North Dakota Department of Transportation should be notified:

DIRECTOR, CIVIL RIGHTS DIVISION
ND DEPARTMENT OF TRANSPORTATION
608 E BOULEVARD AVE
BISMARCK ND 58505-0700
701-328-2576

Authorized Name of Joint Venture		
Mailing Address		
City	State	Zip Code
Business Phone Number	Fax Number	Cell Phone Number
Internet Address	E-Mail Address	
Name of Contact Person	Name of Person Who Prepared This Application	

SECTION I GENERAL INFORMATION

1. Identify the firms which comprise the joint venture. (The DBE partner must have completed the North Dakota Department of Transportation Initial Application For Determining DBE Certification of Eligibility):

2. Describe the role of the DBE firm in the joint venture:

3. Briefly describe the experience and business qualifications of each non-DBE joint venturer:

4. Nature of joint venture's business:

5. Provide a copy of the joint venture agreement.

6. What is the claimed percentage of DBE ownership? %

SECTION II CONTROL OF AND PARTICIPATION IN THIS CONTRACT

Identify by name, race, sex, and firm those individuals (and their titles) who are responsible for day-to-day management and policy decision-making, including but not limited to those with prime responsibilities for:

1. Financial decisions: _____

2. Management decisions, such as:

   a. Estimating _____

   b. Marketing and sales _____

   c. Hiring and firing of management personnel _____

   d. Purchasing of major items or supplies _____

3. Supervision of field operations:

SECTION III OWNERSHIP OF JOINT VENTURE

This need not be completed if described in the joint venture agreement provided in response to question 5.

1. Profit and loss sharing: _____

2. Capital contributions, including equipment: _____

3. Other applicable ownership interests:

AFFIDAVIT

The undersigned swear that the foregoing statements are correct and include all material information necessary to identify and explain the terms and operation of

_____
Name of Joint Venture

and the intended participation by each joint venturer in the undertaking. Further, the undersigned covenant and agree to provide to the grantee current, complete, and accurate information regarding actual joint venture work and the payment therefore and any proposed changes in any of the joint venture arrangements and to permit the audit and examination of the books, records, and files of the joint venture, or those of each joint venturer relevant to the joint venture, by authorized representatives of the grantee or the federal funding agency. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal or state laws concerning false statements.

Name of Firm	Name of Firm
Name of Representative (Print/Type)	Name of Representative (Print/Type)
Title	Title
Signature	Signature
Date	Date

NOTARIZATION

STATE OF _____)
:SS
COUNTY OF _____)

On this _____ day of _____ , _____, before me personally appeared (name) _____ _____ , known to me to be the person whose name is subscribed on the affidavit, and acknowledged to me that he or she executed the same and was authorized by (name of firm) _____ to execute the affidavit and did so of his or her own free act and deed

NOTARY PUBLIC _____

(SEAL)

My commission expires: _____

STATE OF _____)
:SS
COUNTY OF _____)

On this _____ day of _____ , _____, before me personally appeared (name) _____ _____ , known to me to be the person whose name is subscribed on the affidavit, and acknowledged to me that he or she executed the same and was authorized by (name of firm) _____ to execute the affidavit and did so of his or her own free act and deed

NOTARY PUBLIC _____

(SEAL)

My commission expires: _____