

**NORTH JERSEY DISTRICT WATER SUPPLY COMMISSION  
SMALL BUSINESS ENTERPRISE ("SBE") PROGRAM AND  
DISABLED VETERAN-OWNED BUSINESS ("DVOB") SET-ASIDE PROGRAM  
FORM B  
INTENT TO PERFORM AS A SUBCONTRACTOR**

TO: \_\_\_\_\_ BID SOLICITATION NUMBER: \_\_\_\_\_

(Name of Prime Contractor)

PROJECT TITLE: \_\_\_\_\_

The undersigned intends to perform subcontract work in connection with the above-mentioned project as (Check One):

\_\_\_ Individual \_\_\_ Corporation \_\_\_ Partnership \_\_\_ Joint Venture \_\_\_ L.L.C. \_\_\_ Other

The SBE or DVOB Category status of the undersigned is confirmed on the attached Affidavit of SBE or DVOB (SBE-DVOB Form C).

The undersigned is prepared to perform the following described work in connection with the above-referenced project:

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and at the following price: \_\_\_\_\_

**NOTE:** Eliminate Price on Professional Service Contracts Only.

The Prime Contractor has projected the following commencement date for such work, and the undersigned projects completion of such work as follows:

\_\_\_\_\_ Project Commencement Date \_\_\_\_\_ Projected Completion Date

With respect to the proposed subcontract described above, \_\_\_% of the dollar value of such subcontract will be subcontracted and/or awarded to Non-SBE Contractors and/or Non-SBE Suppliers and/or Non-DVOB Contractors and/or Non-DVOB Suppliers.

The undersigned will enter into a formal agreement for the above work with the Prime Contractor conditioned upon execution of a contract with the Commission. As a SBE or DVOB Subcontractor, I will cooperate with the certification and monitoring process set forth by the Commission for the referenced project.

\_\_\_\_\_  
Signature of SBE or DVOB      Date

\_\_\_\_\_  
Name of SBE or DVOB Firm

\_\_\_\_\_  
Type Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Type Title

\_\_\_\_\_  
Telephone Number/Email