

**NORTH JERSEY DISTRICT WATER SUPPLY COMMISSION  
SMALL BUSINESS ENTERPRISE ("SBE") PROGRAM  
AND DISABLED VETERAN-OWNED ("DVOB") SET-ASIDE PROGRAM  
FORM D  
SBE/DVOB UNAVAILABILITY CERTIFICATION**

Contract Number: \_\_\_\_\_ Project Title: \_\_\_\_\_

I, \_\_\_\_\_ (Name), \_\_\_\_\_ (Title),  
of \_\_\_\_\_ (Prime Contractor)

located in the STATE OF \_\_\_\_\_

certify that on \_\_\_\_\_ (Date), I contacted the following SBE(s) and DVOB(s) to obtain a Bid for work items to be performed on the Project named above.

To the best of knowledge and belief, each SBE or DVOB identified in this form was unavailable for work on this project, exclusive of unavailability due to lack of agreement on price, and each SBE or DVOB was unable to prepare a bid for the following reason(s) (if known):

SBE or DVOB Firm Name	SBE Category No. or Construction Code or Commodity Code	DVOB Registration No.	Type of Work
Reason Unavailable: _____			
DVOB Firm Name	SBE Category No. or Construction Code or Commodity Code	DVOB Registration No.	Type of Work
Reason Unavailable: _____			

(additional pages are attached as necessary)

**This form MUST be completed and submitted within seven (7) days after Notice of Award.**

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

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

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me \_\_\_\_\_ (Name of Notary Public), the person described in the foregoing Affidavit acknowledged that he/she executed the same in the capacity therein stated and for the purposes therein contained.

In Witness whereof, I hereunto set my official seal.

\_\_\_\_\_  
Notary Public

(Seal)

My Commission Expires: \_\_\_\_\_