



# Prime Contractor's Subagreement Certification



SRF Project Number \_\_\_\_\_

Project Name \_\_\_\_\_ Division \_\_\_\_\_

Contractor's Name and Address \_\_\_\_\_

Contractor's Telephone \_\_\_\_\_

## CERTIFICATION

I, as the authorized representative of the contracting firm named above, certify that we:

- Plan to subcontract a portion of this project and will submit to SCDES evidence of the positive steps taken to utilize minority and women's businesses as required by Executive Order 11246 prior to entering into any subagreement. We agree to submit MBE/WBE utilization reports (U.S. EPA Form 5700-52A or equivalent). *(Please fill out page 2 of this form with each tentative subcontractor and/or any uncommitted work.)*
- Do not elect to subcontract any portion of this project. We understand that should we elect, at a later date, to subcontract a portion of this project, we will be required to provide evidence of the positive steps taken to utilize minority and women-owned businesses as required by Executive Order 11246 prior to entering into any subagreement. Failure to do so may result in costs associated with that subagreement declared ineligible for SRF assistance.

\_\_\_\_\_  
Printed Name and Title of Contractor's Representative

\_\_\_\_\_  
Signature of Contractor's Representative

\_\_\_\_\_  
Date

Submit by email to SCDES project manager or by mail to:  
State Revolving Fund Division, SCDES, 2600 Bull Street, Columbia, SC 29201

### PURPOSE / INSTRUCTIONS / REVIEW & RETENTION:

*For SRF equivalency projects, prime contractors certify whether they plan to utilize subcontractors to complete project construction using the Prime Contractor's Subagreement Certification. The prime contractor's representative will enter the requested project information and indicate subcontracting intentions. The representative will sign the certification and fill out page 2 with requested information as needed. A revised DES 3591 must be submitted any time the information on page 1 or 2 changes.*

The SRF Division will use this form to document the subcontracting intentions of the prime contractor. The form will be kept in the DBE/EEO file for the named project and will be retained for three years following the final SRF disbursement to the project's Sponsor - per Retention Schedule 15795.

List all tentative subcontractors/vendors you plan to use for this project, identify any that are suppliers and indicate whether the subcontractor/vendor is a minority business enterprise (MBE) or a women-owned business enterprise (WBE). If more space is needed, attach additional sheets using the same format.

1. Type of Work \_\_\_\_\_  
Subcontractor's Name and Address \_\_\_\_\_  
\_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Subcontract Amount \_\_\_\_\_ Duration of Subcontract \_\_\_\_\_  
 MBE  WBE  Supplier

2. Type of Work \_\_\_\_\_  
Subcontractor's Name and Address \_\_\_\_\_  
\_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Subcontract Amount \_\_\_\_\_ Duration of Subcontract \_\_\_\_\_  
 MBE  WBE  Supplier

3. Type of Work \_\_\_\_\_  
Subcontractor's Name and Address \_\_\_\_\_  
\_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Subcontract Amount \_\_\_\_\_ Duration of Subcontract \_\_\_\_\_  
 MBE  WBE  Supplier

4. Type of Work \_\_\_\_\_  
Subcontractor's Name and Address \_\_\_\_\_  
\_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Subcontract Amount \_\_\_\_\_ Duration of Subcontract \_\_\_\_\_  
 MBE  WBE  Supplier

5. Type of Work \_\_\_\_\_  
Subcontractor's Name and Address \_\_\_\_\_  
\_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Subcontract Amount \_\_\_\_\_ Duration of Subcontract \_\_\_\_\_  
 MBE  WBE  Supplier

List of subcontract work yet to be committed with approximate price and duration of subcontract:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

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