ILLINOIS STATE TOLL HIGHWAY AUTHORITY
DBE FORM 2026 - UTILIZATION PLAN

CONTRACT NUMBER: _____

PRIME CONTRACTOR: _____
CONTACT NAME: _____
CONTACT PHONE NUMBER: _____
CONTACT E-MAIL: _____

Check one:

☐ Contractor will meet or exceed the DBE Contract Goal and will provide Disadvantaged Business Participation as presented below.

☐ Contractor will meet or exceed the DBE Contract Goal because PRIME BIDDER IS A DBE.

☐ Contractor requests a waiver of the DBE Contract Goal.

The bidder is requesting the contract Goal be accordingly modified or waived. Attached is all information required by the Special Provision in support of this request, including Good Faith Efforts - Form 2023.

DOLLAR AMOUNT OF WAIVER REQUEST: _____

PERCENTAGE OF WAIVER REQUEST: _____

Instructions to Bidders:

1. Bidders are required to comply with the Special Provision.
2. Submit only one DBE Utilization Plan for each Project.
3. This Utilization Plan, Form 2026 must:

--be submitted with the bid or the bid may be deemed non-responsive

--be an accurate representation of work and pricing agreed upon between the prime and the DBE firm prior to bid submission

4. The Participation Statement(s) (DBE Form 2025), with original signatures, pay item description and pricing are to be submitted to Tollway Diversity at constructionbid@getipass.com by 5 p.m. on the fifth calendar day after notification to the prime by the Tollway of apparent low bidder status.
5. Each company listed on the Utilization Plan and subsequent Participation Statement must be listed in a certifying agency's database as stipulated in the Special Provision at the time of bid submission to be considered acceptable for DBE credit.
6. In no case should a Contractor remove, replace or reduce the commitment to a DBE listed in the initial Utilization Plan on the Participation Statement without prior written consent of ISTHA. Under no circumstances is the bidder allowed to change the amount of the core bid submitted or any other documentation unrelated to this special provision.

DBE UTILIZATION PLAN

DBE Firm Name	Scope of Work Brief description of overall work to be performed	DBE - Amount ($) If supplier, enter 60% credit amount.
	TOTAL	0

For ebid: the submission of Form 2026 constitutes signature of this form. For hardcopy: signature required.

Signature _____ Date _____

ISTHA_VOSB Form 2026 042018