

### **Purpose**

The Illinois Tollway is committed to providing DBE construction contractors and suppliers with the opportunities afforded to them by State and Federal law and Tollway policies. This form is part of a broader effort of the Tollway's Diversity Program to increase the transparency of DBE payment and to strengthen Prime Contractor accountability during the course of a contract. Recognizing the importance of these matters, the information detailed herein is requested.

### Form Completion/Submittal

This form must be completed by the Prime Contractor and Subcontractor's authorized representatives for each DBE Contractor/Subcontractor/Supplier that has worked on the Contract. This should occur after the performance of the final item of work or delivery of material by a DBE and final payment to the DBE by the Contractor, but not later than thirty (30) calendar days after payment has been made by the Illinois Tollway to the Contractor for such work or material. The signed form should then be submitted to the Construction Manager's Resident Engineer.

### Supporting Documents

This form has been developed to summarize information pertinent to the Diversity Program's management of the Prime Contractor's DBE commitments. Relevant supporting documentation (pay stubs, certified payroll, receipts, etc.) should be kept in the Construction Manager and Contractor's secure field files.

#### Affidavit

The affidavit must be read and reviewed prior to signing. Unsigned forms will not be accepted. Payments to the subcontractor withheld by the State of Illinois due to delinquent payment for which the Subcontractor is responsible will not be held against the Prime Contractor in regard to final release of retainage.

## Payment

<u>DBE 2115 forms for all DBE contractors and subcontractors on the contract must</u> be submitted prior to the final release of retainage.

#### **Questions/Concerns**

If you have any questions or concerns regarding this form, please contact:

Email: dbe@getipass.com



Line-by-Line Instructions

General (Incomplete forms will not be accepted.)

1. **Report Date:** Date report is completed.

2. **Contract No.:** Full contract number

(Example: I-05-5339)

3. **Reporting Period:** Start and end dates for the reporting period. Reporting

period should cover from the start to the completion of the Subcontractor's (7) work on the current contract

Prime Contractor Information

4. **Prime Contractor:** Company name of Prime Contractor

5. **Address**: Primary address of Prime Contractor

6. **Telephone:** Primary telephone number of Prime Contractor

Subcontractor Information

7. **Subcontractor:** Company name of Subcontractor

8. **Address**: Primary address of Subcontractor

9. **Telephone:** Primary telephone number of Subcontractor

DBE Financials

10. **Original DBE Commitment(\$):** Total DBE dollar amount from the Contract

11. **Original DBE Commitment(%):** Total DBE percent committed from Contract

12. **Overall Percent Complete=** Overall Earned-to-Date

Adjusted Contract Amount

Subcontractor Payment

13. Payment Earned during Contract: Total Payment earned by the Subcontractor for

work on the current contract.

14. **Adjustments:** A reduction due to costs incurred by prime due to action

or inaction by subcontractor. IF amount is other than zero, provide explanation in box 27. **NOTE: any and all** 

"adjustments" must be pre-approved in writing

15. **Payment Recvd to date:** The sum of all payments from the Prime Contractor to

the Subcontractor for the current contract



16. Payment withheld due to delinquent debt:

Dollar amount of payment invoiced by Subcontractor but withheld by the State of Illinois due to delinquent debt for which the Subcontractor is responsible. Provide

Explanation (27) if not zero.

17. **Balance Due=** Payment Earned(13) – Adjustments (14) – Payment

Recvd(15) – Payment Withheld(16)

Subcontractor Work during Reporting Period

18. **Pay Item No.:** Contract Pay Item Number for work performed by

Subcontractor during current reporting period

19. Pay Item Description: Contract Pay Item Description for work performed by

Subcontractor during current reporting period

20. **Quantity:** Quantity of work performed by Subcontractor during the

current reporting period

21. Unit: Contract-specified unit of measure for the given Pay Item

22. **Unit Price:** Contract-specified unit price for the given Pay Item

23. **Total Amount=** Quantity (19) x Unit Price (21)

24. Partial Pay Item Descr.: If Subcontractor was paid for only a portion of the work

resulting in the Total Amount (22), explain the work the Subcontractor performed associated with the given Pay

Item. Otherwise, leave blank

25. **Total Earned by Subcontractor:** Enter the total dollar amount earned by the

Subcontractor for work on the given Pay Item

under the current contract.

26. **Sum:** Sum of the Total Earned by Subcontractor (24) column

(Must match Payment Earned during Contract (13))

27. **Explanations:** Include additional explanations as necessary



#### **Affidavit**

Please read and review the Affidavit carefully prior to signing. Unsigned forms will not be accepted.

**Prime Contractor** 

28. **Name of Agent:** Name of Prime Contractor's authorized agent. Must

have authorization noted in the Affidavit to sign.

29. **Title of Agent:** Title/position of authorized agent (28)

30. **Signature of Agent:** Signature of authorized agent (28)

31. **Date of Signature:** Date of signature of authorized agent (28)

Subcontractor

32. Name of Agent: Name of Prime Contractor's authorized agent. Must

have authorization noted in the Affidavit to sign.

33. **Title of Agent:** Title/position of authorized agent (32)

34. **Signature of Agent:** Signature of authorized agent (32)

35. **Date of Signature:** Date of signature of authorized agent (32)