



STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES
Civil Rights Office – DBE Program

Competitive Sealed Proposals
CONSULTANT REGISTRATION

All firms are required to submit a Consultant Registration form before an Alaska Department of Transportation and Public Facilities (DOT&PF) contract can be awarded. The Consultant Registration form must be submitted to the Civil Rights Officer (CRO) on an annual basis beginning January 1 and is valid thru December 31. Complete this form for each consultant and subconsultant. Firms will be listed on the consultant registration online directory <https://dot.alaska.gov/cvlrts/bidreg/consultreg.cfm>

Name of Firm: _____ Date Firm was Established: _____

Street Address: _____

Mailing Address: _____

Phone #: _____ Other Phone #: _____ Fax #: _____

Contact Name: _____ Email Address: _____

Firm's Majority Owner Gender: Male Female

Firm's Majority Owner Ethnicity: *(Check all that apply)*

- Caucasian Hispanic American Subcontinent Asian American Native American
- Black American Asian-Pacific American

The firm listed above is a *(check all that apply)*

- Prime Consultant
- Subconsultant
- Certified Disadvantage Business Enterprise (DBE)
- Self-Certified Small Business Enterprise (SBE) *(Complete page 2 of this form)*

NAICS code applicable to each scope of work the firm sought to perform on its bid: (www.census.gov/NAICS)

Firm's gross annual receipts:

- < \$1 million
- \$1-3 million
- \$3-6 million
- \$6-10 million
- > \$10 million

Signature of Company Representative

Title

Date

Send this completed form to: *OR* You may fax your completed form to:
dot.cro.forms@alaska.gov **(907) 269-0847**

If you have any questions, please call **(907) 269-0851**.

SMALL BUSINESS ENTERPRISE PROGRAM (SBE) SELF-REGISTRATION

Fostering Small Business Participation (49 CFR 26.39):

To meet the requirements of 49 CFR 26.39, DOT&PF has implemented a Small Business Enterprise Program. This component is only applicable to federally funded projects.

[Complete the Section below only if you are a Self-Certified SBE Firm] All businesses wishing to be eligible as a SBE are required to submit a SBE Self-Registration form. The SBE Self-Registration form must be submitted on an annual basis beginning January 1 and is valid thru December 31.

In order to verify your firm's compliance with business size standards under 49 CFR 26.65(a)&(b) and 26.68(b), **at the time of award** you will be required to submit the following documents:

- SBE Affidavit of Certification Eligibility
- Personal Net Worth Statement (available at <https://www.Transportation.gov/DBEFORMS>)
- Past five years of your corporations and/or individual tax returns
- If not a certified DBE, please provide documentation that you are self-certified as a small business (please contact Alaska APEX Accelerator at (907) 786-7258 if you require assistance on becoming a self-certified small business)

At time of award, send required documentation to:

**DOT&PF Civil Rights Office Attn: Certification
PO Box 196900
Anchorage, Alaska 99519-6900
Phone: (907) 269-0851
Fax: (907) 269-0847**

A. SBE Directory Information

1. Can you verify at time of award that your firm's (including affiliates) last five (5) year average annual gross receipts does not exceed the Small Business Administration (SBA) small business size standards found in [13 CFR part 121](#)? To find if your firm qualifies as small, use the SBA's [Size Standards Tool](#), or by referencing the SBA's [table of small business size standards](#). Yes No
**If you marked "No" you do not qualify for the SBE Program*
2. Can you verify at time of award that your firm's (including affiliates) last three (3) year average annual gross receipts does not exceed the business size standards per [49 CFR 26.65\(b\)](#)? <https://www.transportation.gov/DBEsizestandards> Yes No
**If you marked "No" you do not qualify for the SBE Program*
3. Can you verify at time of award that each individual owner of your firm does not exceed the personal net worth cap posted online at <https://www.transportation.gov/DBEPNW> as defined by 49 CFR Parts [23](#) and [26](#)? Yes No
**If you marked "No" you do not qualify for the SBE Program*

4. Contact Info.

_____ Name of Firm	_____ Contact Name
_____ Telephone Number	_____ Fax Number
_____ Email Address	_____ Company Website