I. STATEMENT OF DVBE PARTICIPATION GOAL REQUIREMENT

State law requires that state agencies make efforts to achieve a goal of three (3) percent participation for disabled veteran business enterprises (DVBE) in state contracts.

Read this document carefully. Failure to comply with the DVBE requirement may cause your bid to be deemed nonresponsive and your firm ineligible for award of this contract.

II. DEFINITIONS

The following definitions have general applicability throughout this document.

A. Trustees as used herein, means the Board of Trustees of the California State University and includes any division or campus thereof which has been delegated the authority to enter into contracts on behalf of the Trustees, and any person acting under authority of such delegation.

B. Bidder as used herein, means any person or entity making an offer or proposal, competitively or non competitively, for the purpose of securing the awarding or letting of a contract by the Trustees.

C. Disabled Veteran as used herein, means a veteran of the military, naval or air services of the United States with at least a 10 percent service-connected disability who is a resident of the State of California.

D. Disabled Veteran Business Enterprise (DVBE) as used herein, means a business concern certified by the Office of Small & Minority Business as meeting all of the following:

1. The business is at least, 51 percent owned by one or more disabled veterans or in the case of a publicly owned business, at least 51 percent of its stock is owned by one or more disabled veterans; a subsidiary which is wholly owned by a parent corporation but only if at least 51 percent of the voting stock of the parent corporation is owned by one or more disabled veterans; or a joint venture in which at least 51 percent of the joint venture’s management and control and earnings are held by one or more disabled veterans.

2. One or more disabled veterans manage and control the daily business operations. The disabled veterans who exercise management and control are not required to be the same disabled veterans as the owners of the business concern.

3. A sole proprietorship, corporation, or partnership with its home office located in the United States, which is not a branch or subsidiary of a foreign corporation, foreign firm or other foreign-based business.

III. SATISFACTION OF THE DVBE PARTICIPATION GOAL REQUIREMENT

A. Goal Attainment and/or “Good Faith Effort”

In order to satisfy and be responsive to this requirement, the bidder must either meet the DVBE Participation Goal or document a “Good Faith Effort” to meet that goal as follows:
1. **DVBE Participation Goal Attainment**

   The three (3) percent Disabled Veteran Business Enterprise (DVBE) Participation Goal is attained when:

   (a) The bidder is not a DVBE and is committed to use DVBEs for not less than three (3) percent of the contract dollar amount; or

   (b) The bidder is a DVBE and committed to performing not less than three (3) percent of the contract dollar amount with its own forces or in combination with those of other DVBEs.

2. **Good Faith Effort**

   A “Good Faith Effort” to meet the DVBE goal is achieved by doing all of the following five items prior to the final bid due date. Each of these items must be satisfied for each contract bid. The bidder shall:

   (a) Contact the Trustees DVBE Coordinator, telephone (562) 985-9160, to identify potential DVBEs. This telephone call will initiate the provision of information to the bidder;

   (b) Contact other state and federal government agencies and local DVBE organizations to identify potential DVBEs for this contract;

   (c) Advertise in trade paper and papers focusing on DVBEs. Advertisement must have appeared in publications at least ten (10) calendar days prior to the bid due date, unless time limits imposed by the Trustees do not permit that advertising;

   (d) Send solicitation to potential DVBE subcontractors and suppliers for this contract with sufficient lead time to fully entertain and consider responding bids. Sufficient lead time is at least ten (10) calendar days prior to the bid due date, unless time limits imposed by the Trustees do not permit that lead time; and

   (e) Consider responding DVBEs for participation in this contract.

B. **Approved Utilization Plan**

   1. **General**

      In satisfaction of the DVBE participation goal requirement State law permits bidders bidding on contracts for materials, supplies, or equipment, including electronic data processing (“EDP”) goods and services to submit a DVBE Utilization Plan that has been approved, prior to the final bid due date, by the State Department of General Services Procurement Division.

      **AN APPROVED UTILIZATION PLAN MAY NOT BE USED TO SATISFY THE DVBE PARTICIPATION GOAL REQUIREMENT FOR ANY PUBLIC WORKS CONTRACT.**

   2. **Utilization Plan Criteria and Approval**

      (a) **Criteria**

         At a minimum, the Utilization Plan must include all of the following information:
(1) A statement of the vendor’s disabled veteran business enterprise utilization plan, including the primary objectives of the utilization plan.

(2) An explanation showing sufficient business reasons why the vendor did not meet disabled veteran business enterprise participation goals set forth in the vendor’s disabled veteran business utilization plan submitted to, and approved by, the Department of General Services in the previous year, if applicable. Further, if vendor did not meet the disabled veteran business participation goals in the previous year, the vendor shall also identify remedial steps it will take to meet the goals in the current utilization plan.

(3) A statement of the vendor’s disabled veteran business utilization goals for the succeeding year. At a minimum these utilization goals shall be equal to the statewide participation goals set forth in subdivision (c) of Section 10115 of the Public Contract Code.

(4) Estimated total dollars to be subcontracted by the vendor for sales within the United States for the succeeding year.

(5) Estimated total dollars to be subcontracted by the vendor for sales within the State of California for the succeeding year.

(6) Total dollars, as expressed as a percentage of the amount estimated pursuant to paragraph (5) intended to be subcontracted with disabled veteran-owned business enterprises.

(7) A representative listing of the products and services that the vendor anticipates subcontracting, including an identification of the types of subcontracting planned for disabled veteran business enterprises.

(8) The name of the individual employed by the vendor who will administer the vendor’s utilization plan, including a description of the duties of the individual.

(9) A description of the efforts that the vendor will undertake to ensure that disabled veteran business enterprises will have an equitable opportunity to compete for contracts.

(10) A listing of the records and reports that the vendor will maintain to demonstrate the practices and procedures that have been adopted to comply with the requirements and goals of the utilization plan.

(11) Affirmation that the vendor met the statewide disabled veteran business enterprise utilization goals for the previous year, if applicable.

(b) Approval

A business utilization plan shall be considered approved by the Department of General Services as of the date submitted to the Department of General Services so long as the plan meets the minimum criteria set forth in paragraphs (1) to (11), inclusive, in Subsection (a) above.
IV. DVBE PARTICIPATION GOAL DOCUMENTATION REQUIREMENTS

A. General

The bidder must document its effort to either meet the DVBE participation goal requirement or make a good faith effort to meet it.

Bidders who propose goal attainment are encouraged to submit documentation for making a “Good Faith Effort” also. This will ensure against the possibility that the Trustees will not agree that goal attainment has, in fact, been met.

The bidder’s efforts to meet the contract DVBE Participation Goal and/or make a “Good Faith Effort” to meet the goal must be sincere and the documentation must be sufficient to reasonably demonstrate that sincerity to the Trustees. Final determination of DVBE Participation Goal attainment or a “Good Faith Effort” by the bidder shall be at the Trustees’ sole discretion.

B. Required Documentation

The DVBE documentation forms that must be completed are as follows and instructions for completing the required forms correctly are included to assist the bidder.

1. DVBE Transmittal Form

Bidders must fill out and attach the DVBE transmittal form as a cover sheet to the required documents and submit it and the additional required documentation with the bid on or before the final bid due date. All requested DVBE documentation must be completed on the forms provided and submitted with the DVBE Transmittal Form.

2. Summary of Disabled Veteran Owned Business Participation (Attachment 1)

Whether DVBE Participation Goal Attainment or the “Good Faith Effort” alternative is chosen, Attachment 1, Summary of Disabled Veteran Owned Business Participation, must be completed showing the type of work and company proposed for DVBE participation, their subcontractors (if any), and other related information. If no participation is achieved, the bidder is to state “N/A” or "None” on the first line of the form. Complete the form providing the information as follows:

(a) Company Name - list the name of the company proposed for DVBE participation. If the prime contractor is a DVBE, its name must also be listed to receive participation credit.

(b) Nature of Work - identify the proposed work or service to be provided by the listed company.

(c) Contracting With - list the name of the department or company with which the company listed is contracting.

(d) TIER - the contracting tier should be indicated with the following level designations:
   0 = Prime contractor;
   1 = First tier subcontractor/supplier;
   2 = Second tier subcontractor/supplier of first tier subcontractor/supplier;
   3 = Third tier subcontractor/supplier of second tier subcontractor/supplier; etc.
(e) **Claimed DVBE Value** - the total dollar amount of the value claimed by a disabled veteran business enterprise.

(f) **Percentage of Contract** - compute the percentage (%) the claimed DVBE value is of the total contract dollar amount.

(g) **DVBE Certification** - The bidder must include one copy of the DVBE certification letter from the Office of Small and Minority Business (OSMB) for each DVBE firm listed on the Summary of Disabled Veteran Owned Business Participation.

3. **Bidder’s Certification (Attachment 2)**

   The bidder must sign and include the Bidder’s Certification, certifying that each firm listed on the Summary of Disabled Veteran Owned Business Participation (Attachment 1) complies with the legal definition of DVBE.

4. **Documentation of Good Faith Effort (Attachment 3 (3 pages))**

   Bidders must submit documentation to support their contacts with the Trustees, other state and federal governmental agencies, and other organizations that helped identify or provided a list of interested DVBEs for this contract. A list of dates, times, (if known), organizations contacted, and contact names and phone numbers must be provided to corroborate these contacts.

C. **Timeframe for Submitting Documentation**

   The DVBE participation documentation must be submitted on or before the final bid due date. Failure to submit full and accurate documentation on or before the final bid due date will result in your firm being deemed nonresponsive, and thus ineligible for award of the contract.

V. **USE OF PROPOSED DVBE**

   If awarded the contract, the successful bidder must use the DVBE subcontractors and/or suppliers proposed in its bid proposal unless it has requested substitution and has received approval of the Trustees in compliance with the Subletting and Subcontracting Fair Practices Act.

   Failure to adhere to at least the DVBE participation proposed by the successful bidder may be cause for contract termination and recovery of damages under the rights and remedies due the Trustees under the default section of the contract.

VI. **ADDITIONAL DVBE INFORMATION SOURCES**

   A. For more information regarding DVBE certification, copies of directories or for general DVBE information, contact:

   1. State Department of General Services
      Office of Small and Minority Business
      1531 I Street, 2nd Floor
      Sacramento, California 95814-2016
      (916) 322-5060

   2. DVBE information via the Internet at
      http://www.dgs.ca.gov/osmb/dvbe/dvbe.htm
VII. CONTRACT AUDITS

Contractor agrees that the Trustees or its delegate will have the right to obtain, review, and copy all records pertaining to performance of the contract, including but not limited to reports of payments made to subcontractors during the term of a contract. Contractor agrees to provide the Trustees or its delegate with any relevant information requested and shall permit the Trustees or its delegate access to its premises, upon reasonable notice, during normal business hours for the purpose of interviewing employees and inspecting and copying such books, records, accounts, and other material that may be relevant to a matter under investigation for the purpose of determining compliance with this requirement. Contractor further agrees to maintain such records for a period of three (3) years after final payment under this contract.
Disabled Veteran Business Enterprise (DVBE) Participation Requirement

DVBE Transmittal Form

The DVBE Transmittal Form is to be attached and used as a cover sheet for the required DVBE documentation that must be submitted on or before the final bid due date.

Campus: ____________________________________________________________

Project Name: ______________________________________________________

Project Number: ____________________________________________________

Bid Date: __________________________________________________________

Name of Contractor Submitting Bid: ____________________________________

____________________________________________________________________

Please check off the following to insure you have included them in your documentation:

___ Attachment 1: Summary of DVBE Participation

___ Attachment 2: Bidder’s Certification of DVBE Status of Subcontractors and Suppliers

___ Attachment 3 (3 Pages): Documentation of Good Faith Effort

___ Attachment of Any Additional Supporting Documentation
SUMMARY OF DISABLED VETERAN OWNED BUSINESS PARTICIPATION

<table>
<thead>
<tr>
<th>COMPANY NAME</th>
<th>NATURE OF WORK</th>
<th>CONTRACTING WITH</th>
<th>TIER</th>
<th>CLAIMED DVBE VALUE $</th>
<th>PERCENTAGE OF CONTRACT (%)</th>
<th>OSMB DVBE</th>
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I declare under penalty of perjury, under the laws of the State of California, that the information herein is true and correct to the best of my knowledge.

Executed on: _______________________, at _______________________, in the state of _______________________.

Date: _______________________, at _______________________, in the state of _______________________.

Signature of Contractor or Authorized Agent: _______________________.

Project Name: _______________________.

Project Number: _______________________.

Printed Name: _______________________.

Firm Name: _______________________.

Telephone: _______________________.

CRL:016:09/30/97
BIDDER'S CERTIFICATION
DISABLED VETERAN BUSINESS ENTERPRISE
STATUS OF SUBCONTRACTORS AND SUPPLIERS

I hereby certify that I have made a diligent effort to ascertain the facts with regard to the representations made herein and, to the best of my knowledge and belief, each firm set forth in this bid as a disabled veteran business enterprise complies with the relevant definition set forth in law. In making this certification, I am aware of Section 12650 et seq. of the Government Code providing for the imposition of treble damages for making false claims against the State, Section 10115.10 of the Public Contract Code making it a crime to intentionally make an untrue statement in this certificate, and the provisions of Section 999.9 of the Military and Veterans Code.

______________________________  ________________________________
Date                                      Signature of Authorized Agent

______________________________
Title
DOCUMENTATION OF GOOD FAITH EFFORT

A. List below the contacts made with the CSU, other state and federal agencies and Disabled Veteran Business Enterprise (DVBE) organizations in an effort to identify potential DVBEs for participation in this contract. Include dates, times, contact names and phone numbers.

<table>
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<tr>
<th>DATE/TIME</th>
<th>AGENCY/ORGANIZATION</th>
<th>CONTACT/PHONE #</th>
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<td>FEDERAL AGENCIES</td>
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<td>LOCAL AGENCIES/ORGANIZATIONS</td>
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B. Vendors are to list trade papers and other publications focusing on DVBEs in which the bidder advertised for participation in this contract. Include the date of advertisement and attach copies of such advertisements.

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<thead>
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<th>Name of Trade/Focus Publications</th>
<th>Dates of Advertisement</th>
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Contractor/Bidder Name: _____________________________________________
C. List potential DVBEs that the bidder solicited for participation in this contract along with the dates the solicitations were sent. Contractor/Bidder to attach a sample of the solicitation sent to DVBE firms. If phone contact was made, please describe the services or products for which you solicited participation.

<table>
<thead>
<tr>
<th>DVBE Firm</th>
<th>Date of Mailing</th>
<th>Telephone Contact</th>
<th>Results Selected/Reason for Non-Selection</th>
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D. DVBE Solicitations

Solicitation Sample:
Bidder must attach a sample of the solicitation sent to DVBE firms. If phone contact was made, document conversation: date, time, contact person, and business opportunities discussed.
DOCUMENTATION OF GOOD FAITH EFFORT

Identification of (1) all DVBEs who submitted bids or quotations, (2) nature of work, supplies or services offered which are not accepted, (3) dollar amounts of the DVBEs bids not accepted, (4) subcontractors and/or suppliers who will be used instead of the DVBEs, (5) dollar amounts of these subcontractors and/or suppliers’ bids, and (6) the reason for the bidder not accepting the DVBE's bid. Use additional sheets if necessary.

<table>
<thead>
<tr>
<th>Name of DVBE</th>
<th>Nature of Work</th>
<th>DVBE Bids ($)</th>
<th>Subcontractor/Supplier to be used</th>
<th>Bid Amount Accepted</th>
<th>Reason not Accepted</th>
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CSU OFFICE USE ONLY

Recommendation

Met Goals
Did exert good faith effort
Did not exert good faith effort

Approved___________ Disapproved___________

Signed: ___________________________ Date: ___________________________

DVBE Coordinator