



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

**BIDDER REGISTRATION**

All firms are required to submit a Bidder's Registration form before an Alaska Department of Transportation and Public Facilities (DOT&PF) project can be awarded. The Bidder Registration form must be submitted to the Civil Rights Officer (CRO) on an annual basis by January 1 and is valid thru December 31. Complete this form for each contractor and subcontractor. Firms will be listed on the bidder registration online directory <http://www.dot.state.ak.us/cvlrts/bidreg.shtml>.

Name of Firm: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Date Firm was Established: \_\_\_\_\_

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

- Prime Contractor?
- Subcontractor?  Identify specialty: \_\_\_\_\_
- Service Provider?  Identify service: \_\_\_\_\_
- Material Supplier?  Identify material: \_\_\_\_\_
- Manufacturer?  Identify product: \_\_\_\_\_
- Certified DBE? \*  \*DBE- Disadvantaged Business Enterprise
- Self-Certified SBE? \*  \*SBE- Small Business Enterprise (*Complete page 2 of this form.*)

**Firm's gross annual receipts:**

- < \$500,000
- \$500,000- \$999,999
- \$1,000,000- \$4,999,999
- \$5,000,000- \$9,999,999
- \$10,000,000- \$16,999,999
- > \$17,000,000

**Type of contracts/proposals bid by the firm** (check all that apply):

- Highways  Airports  Transit  AMHS

Signature of Company Representative	Title	Date
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Send this completed form to:  
**ADOT&PF Civil Rights Office**  
**PO Box 196900**  
**Anchorage, Alaska 99519-6900**

*OR* You may fax your completed form to:  
**(907) 269-0847**

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

## SMALL BUSINESS ENTERPRISE PROGRAM (SBE) SELF-REGISTRATION

### Fostering Small Business Participation (SBE) (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 by January 1 and is valid thru December 31.

In order to verify your firm's compliance with business size standards under 49 CFR 26.67(2)(i) and 26.65(b), **at the time of award** you will be required to submit the following documents:

- SBE Affidavit of Certification Eligibility
- Personal Financial Statement
- Past three 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 Procurement Technical Assistance Center (PTAC) 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 99519-690**  
**Phone: (907) 269-0851**  
**Fax: (907) 269-0847**

### A. SBE Directory Information

1. Can you verify at time of award that your firm (including affiliates) does not exceed the small business size standards as described by the Small Business Administration (SBA) for the last three years of gross annual receipts per 49 CFR 26.65(a)? To find more information about the SBA size standards, visit the SBA website <https://www.sba.gov/content/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 (including affiliates) does not exceed the personal net worth standards of \$1.32 million per 49 CFR 26.67(2)(i)? [ ] 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 standards of \$1.32 million per 49 CFR 26.67(2)(i)? [ ] 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