



PROJECT # \_\_\_\_\_ BID # \_\_\_\_\_  
(If Applicable Please Check One)  
Amendment Change Order

## Business Equity Division LETTER OF INTENT

### A. Business Equity Sub-Contractor/Consultant Information:

#### A certified Business Equity firm is owned by a Minority or Woman Business Enterprise (M/WBE)

[Pursuant to the City of Fort Worth's Business Equity Ordinance, certified Business Equity firms participating under the Ordinance must be certified prior to recommendation of award in order to be counted towards the Business Equity contract goal. Certifying agencies acceptable by the City: North Central Texas Regional Certification Agency (NCTRCA), Dallas/Fort Worth Minority Supplier Development Council, Inc. (DFW MSDC), Women's Business Council - Southwest (WBCS), or the Texas Department of Transportation (TXDOT). **Note:** For Federally-Funded projects the firm must be certified as a Disadvantaged Business Enterprise (DBE) by the NCTRCA and/or TXDOT only.] **All Fields are Required - Do not leave blank.**

1. Name of Project: \_\_\_\_\_
2. Name of Offeror/Prime Contractor: \_\_\_\_\_
3. Name of Business Equity Firm: \_\_\_\_\_  
Address: \_\_\_\_\_ Firm Contact Name/Phone: \_\_\_\_\_
4. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply" or "install" or both):  
\_\_\_\_\_  
\_\_\_\_\_

NAICS Code: \_\_\_\_\_

In the amount of \$ \_\_\_\_\_

\_\_\_\_\_  
(Owner/ Authorized Agent) Type or Print Name

\_\_\_\_\_  
(Name of Certified **Business Equity** Firm)

\_\_\_\_\_  
(Signature of Owner /Authorized Agent of Certified **Business Equity** Firm)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Phone Number)

### B. Affidavit of Offeror/Prime

I HEREBY DECLARE AND AFFIRM that \_\_\_\_\_ am the duly authorized representative of  
(Owner/Authorized Agent)

\_\_\_\_\_ and that I have personally reviewed the material and facts  
(Name of Offeror/Prime)

set forth in this Letter of Intent. To the best of my knowledge, information and belief, the facts in this form are true, and no material facts have been omitted.

Pursuant to the City of Fort Worth's Business Equity Ordinance, any person/entity that makes a false or fraudulent statement in connection with participation of a certified firm in any City of Fort Worth contract may be referred for debarment procedures under the City of Fort Worth's Business Equity Ordinance.

I do solemnly swear or affirm that the signatures contained herein and the information provided by the Offeror/Prime are true and correct, and that I am authorized on behalf of the Offeror/Prime to make the affidavit.

\_\_\_\_\_  
(Owner/ Authorized Agent) Type or Print Name

\_\_\_\_\_  
(Name of Offeror/Prime)

\_\_\_\_\_  
(Signature of Owner/Authorized Agent)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Email Address)

\_\_\_\_\_  
(Phone Number)