Appendix A

Forms

Appendix A contains copies of the most common letters and forms (i.e., CDOT Forms, FHWA Forms) Local Agency personnel will use in designing, constructing and managing State and Federally funded projects.

The forms contained in this appendix were current at the time this manual was printed. The CDOT forms are maintained on the CDOT website; FHWA forms are on its website. Always use the current version of the CDOT forms. The Local agency should get the current forms from the CDOT project manager or from the CDOT website:

https://www.codot.gov/library/forms

The Local Agency may get current FHWA forms from the FHWA website. The link to each FHWA form follows it in the list below.

The Local Agency should contact the CDOT Project Manager for assistance in completing forms. Computer generated forms will be accepted if they contain the exact verbiage and statute references.

The documents in this appendix are as follows:

- CDOT Form 17 - Contractor DBE Payment Certification * Discontinued except for projects let prior to January 23, 2014
- CDOT Form 43 - Job Mix Formula
- CDOT Form 90 – Contract Modification Order
- CDOT Form 96 - Contractor Acceptance of Final Estimate *
- CDOT Form 118 - Contractor Wage Compliance Statement
- CDOT Form 128 - Categorical Exclusion Determination *
- CDOT Form 200 - OJT Training Questionnaire
- CDOT Form 205 - Sublet Permit Application *
- CDOT Form 250 - Materials Documentation Record * (CDOT-Generated Form – no general access)
- CDOT Form 262 - Weekly Time Count Report – Work Days
- CDOT Form 263 - Weekly Time County Report – Calendar Days
- CDOT Form 280 - Equal Employment Opportunity and Labor Compliance Verification
- CDOT Form 280 - Equal Employment Opportunity and Labor Compliance Verification (Spanish)

* = Copy to CDOT Central Files/Records per PD 21.1
• CDOT Form 313 - Consultant Performance Evaluation
• CDOT Form 379 - Project Independent Assurance Sampling Schedule
• CDOT Form 418 - Federal-Aid Program Data
• CDOT Form 462 - Right of Way Plan Approval
• CDOT Form 463 - Design Data *
• CDOT Form 464 - Design Exception Variance Request *
• CDOT Form 465 - Non-Discrimination in Employment Notice
• CDOT Form 605 - Contractors Performance Capability Statement *
• CDOT Form 606 - Anti-Collusion Affidavit *
• CDOT Form 621 - Assignment of Antitrust Claims *
• CDOT Form 631 - Contractor DBE Subcontract, Supply and Service Contract Statement
  * Discontinued
• CDOT Form 632 - Underutilized DBE Bid Conditions Assurance *
  * Discontinued
• CDOT Form 635 - On the Job Trainee Request
  * Discontinued
• CDOT Form 835 - OJT Trainee/Apprentice Record
• CDOT Form 863 - DBE Contract Goal Recommendation
  For internal use only
• CDOT Form 895 – Region Certification – Force Account and Finding in the Public Interest
• CDOT Form 950 - Project Closure *
• CDOT Form 951 - Voucher Request (Projects)
• CDOT Form 1048 - Project Scoping/Clearance Record
• CDOT Form 1180 - Standards Certification and Project Plans, Specifications and Estimate Approval *
• CDOT Form 1186 - Contract Funding Increase/Decrease and Approval Letter *
• CDOT Form 1199 – Finals Materials Documentation Review & Audit Checklist
• CDOT Form 1212 - Final Acceptance Report for Federal Aid Projects *
• CDOT Form 1313 - Cover Sheet for Consultant Billing/Invoice
• CDOT Form 1330 - DBE Bid Conditions Assurance for Non-Project Specific (NPS) Consultant Contract
• CDOT Form 1331 - Certificate of Proposed DBE Participation for Project Specific (PS) Consultant Contracts
• CDOT Form 1413 – Bidders List
• CDOT Form 1414 – Anticipated DBE Participation Plan
• CDOT Form 1415 – Commitment Confirmation
• CDOT Form 1416 – Good Faith Effort Report
• CDOT Form 1417 – DBE Participation Plan
  (Internal Form – No general access)
• CDOT Form 1418 – Monthly Payment Summary
• CDOT Form 1419 – DBE Participation Report

* = Copy to CDOT Central Files/Records per PD 21.1
- CDOT Form 1420 – DBE Participation Plan Modification
- CDOT Form 1425 – Supplier List
- FHWA Form 47 – Statement of Materials and Labor Used By Contractors on Highway Construction Involving Federal Funds Discontinued
- FHWA Form 1273 - Required Contract Provisions, Federal-Aid Construction Contracts
- FHWA Form 1391 - Federal-Aid Highway Contractors Annual EEO Report
  - https://www.codot.gov/library/forms/fhwa-other-forms/form1391.xls/view
- FHWA Form 1391 Instructions – Federal-Aid Highway Contractors Annual EEO Report

* = Copy to CDOT Central Files/Records per PD 21.1
**COLORADO DEPARTMENT OF TRANSPORTATION**  
**JOB MIX FORMULA**

<table>
<thead>
<tr>
<th>Project no.</th>
<th>Location</th>
<th>District</th>
<th>Field sheet no.</th>
</tr>
</thead>
</table>

**Date**  
**From project no.**

This Job Mix Formula defines the specified gradation, asphalt cement content and admixture dosage for the grading and project shown.

**Contractor**

**Pit**

<table>
<thead>
<tr>
<th>Grading</th>
<th>Item</th>
</tr>
</thead>
</table>

- [ ] Top layer  
- [ ] Bottom layer

<table>
<thead>
<tr>
<th>Gradation (% passing)</th>
<th>Remarks:</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/4</td>
<td></td>
</tr>
<tr>
<td>1/2</td>
<td></td>
</tr>
<tr>
<td>3/8</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
</tr>
<tr>
<td>50</td>
<td></td>
</tr>
<tr>
<td>200</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% AC</th>
<th>Source and grade of AC</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>% Additive</th>
<th>Source of additive</th>
</tr>
</thead>
</table>

**Distribution:**

- Signed (Project Engineer)  
- Signed (District Materials Engineer)  
- Signed (Contractors Representative)

<table>
<thead>
<tr>
<th>Signed (Project Engineer)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signed (District Materials Engineer)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Signed (Contractors Representative)</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Previous editions may be used until supplies are exhausted.

CDOT Form # 43  
1/90
COLORADO DEPARTMENT OF TRANSPORTATION
CONTRACT MODIFICATION ORDER

<table>
<thead>
<tr>
<th>Project No.:</th>
<th>Project Code (SAF):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td>Project Order No.:</td>
</tr>
<tr>
<td>Contractor:</td>
<td>Estimated cost to project:</td>
</tr>
<tr>
<td>Complete Address:</td>
<td>Total additional days allowed to complete work:</td>
</tr>
<tr>
<td>Modification Title:</td>
<td>Federal Oversight?:</td>
</tr>
</tbody>
</table>

Should Federal funds not be available to cover these additional costs, or the FHWA decides not to participate in these costs, the Local Agency agrees to provide the required funds.

The (Name of Local Agency) approves this Change Order No. by signing below.

| Authorized Signature | Title | Date |

I hereby accept this order, for work to be performed and prices on which payment is to be based.

### REQUIRED IN ACCORDANCE WITH INSTRUCTIONS IN THE CDOT CONSTRUCTION MANUAL

| Approved by FHWA Operations Engineer: | Date: |

### OPTIONAL

| Approved by Region Transportation Director: | Date: |

### REQUIRED FOR ALL CHANGE ORDERS

| Approved by Project Engineer: | Date: |
| Contractor Representative: | Date: |
| Approved by Resident Engineer: | Date: |

| Participating | Non-participating | Participation as noted |
| Approved Funding by Region Program Engineer: | Date: |
COLORADO DEPARTMENT OF TRANSPORTATION
CONTRACTOR ACCEPTANCE OF FINAL ESTIMATE

As Contractor on the above referenced project, I accept the pay quantities and final payment indicated on the final estimate as correct. The final estimate payment of $__________, results in a total cumulative payment of $__________ for this project. By accepting this final payment as full and complete, except as noted below**, or if the Contractor fails to sign and return this document within 30 days of the certified letter receipt, the Contractor releases the State of Colorado from all disputes and claims that notice has not already been submitted per the Contract provisions. I certify that I have the authority to make this statement to obligate the Contractor.

I declare under penalty of perjury in the second degree, and any other applicable State or Federal laws, that the statements made on this document are true and complete to the best of my knowledge.

Prime Contractor: ___________________________

Date: __________________________

By: __________________________
(Signature and Title)

No payment can be made by the Department of Transportation until after the final settlement date as established by Section 38-25-107, C.R.S.

**CDOT has withheld $__________ from the final payment for placement in escrow as set forth below.

1 copy of the signed original shall be returned to CDOT
# Contractor Wage Compliance Statement

**Contractor/Subcontractor**
- You must complete the “Appointment of Payroll Supervisor” box when appointing or changing a payroll supervisor.
- You may fulfill your obligation to pay fringe benefits to employees by either paying the fringe benefits to approved plans, funds, or programs or paying the employees cash in lieu of fringe benefits.
- You or your payroll supervisor must complete this form at the end of every payroll period and submit to the project engineer.

**Appointment of Payroll Supervisor**
I have appointed the person listed below to supervise the payment of employees and certify the payroll transcripts on this project.

- Designated payroll supervisor name
- Contractor/subcontractor signature

**I certify that during this payroll period the contractor has:**
- Paid all employees (laborers and mechanics) their full contracted weekly wages.
- Not received any rebates directly or indirectly from employee wages.
- Had employees perform work that conformed with their contract classifications.
- Employed only apprentices registered with the state apprenticeship agency, or with the Bureau of Apprenticeship and Training, U.S. Department of Labor.
- Employed only trainees registered with the Colorado Department of Transportation.
- Submitted a correct and complete payroll to the Colorado Department of Transportation.

**Fringe benefit payments:**
- [ ] In cash. (Note: cash in lieu of fringe benefits for overtime is paid at straight time rate not time and a half)
- [ ] Through weekly payroll deductions which shall be deposited quarterly or more frequently. There are no past due deposits. These payments are made to the approved plans, funds, or programs checked below. (List dollars per hour)

<table>
<thead>
<tr>
<th>Benefit Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life insurance</td>
<td>$......</td>
</tr>
<tr>
<td>Health insurance</td>
<td>$......</td>
</tr>
<tr>
<td>Dental insurance</td>
<td>$......</td>
</tr>
<tr>
<td>Pension</td>
<td>$......</td>
</tr>
<tr>
<td>Vacation pay</td>
<td>$......</td>
</tr>
<tr>
<td>Other</td>
<td>$......</td>
</tr>
</tbody>
</table>

**Name of fringe benefit administrator (list additional names on the back of this form):**

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Exceptions**

<table>
<thead>
<tr>
<th>Craft</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Remarks:**

---

The falsification of the “Contractor Wage Compliance Statement” may subject the contractor to civil or criminal prosecution under 18 U.S.C. 1001 and 31 U.S.C. 231.

I declare under penalty of perjury in the second degree, and any other applicable State or Federal laws, that the statements made in this document are true and complete to the best of my knowledge.

**Contractor/payroll supervisor signature**

---

Previous editions are obsolete and may not be used
### Categorical Exclusion Project Determination

1. This project fits Categorical Exclusion or Programmatic CE number __________.
2. All required Clearance Actions indicated in Part B below have been completed. All Permits and Additional Requirements indicated in Part C below will be obtained before project ad.
3. No significant environmental impacts will result from this project. The Region Planning and Environmental Manager (RPEM) will ensure implementation of required mitigation commitments.
4. CDOT Form #463 dated __________ (Revised __________) is attached.

### Clearance Actions

<table>
<thead>
<tr>
<th>Required</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Air Quality (hot spot analysis)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Noise</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Hazardous Waste (ISA/M-ESA)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Farmland Protection</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Threatened or Endangered Species</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Wetland Determination (survey)</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

All clearance requirements have been completed for the work indicated in the CDOT Form #463 referenced above.

RPEM Signature: __________ Date: __________

I concur in the above category designation and the scope of environmental clearances/permits indicated
FHWA Division Administrator signature (when required) (Please return form to RPEM) Date: __________

### Permits and Additional Requirements

<table>
<thead>
<tr>
<th>Required</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>404 Permit</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>402 Permits</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Stormwater Permit (NPDES)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Municipal Permit</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>De-watering Permit</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Required</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>401 Permit</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Division of Wildlife SB 40</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Wetland Finding</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Hazardous Waste (PSI/I)</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Other</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

### Comments


### Environmental Project Certification

All clearance and permit requirements for this project have been completed and mitigation included in the set of plans and specifications dated __________. The appropriate documentation is on file in the Region office.

RPEM Signature: __________ Date: __________

Note to Project Manager: Any changes to the plans and specifications after the date of the RPEM signature in Part B that affect environmental impacts or mitigation must be approved by the RPEM.
Instructions for CDOT Form #128, Categorical Exclusion Determination

1. A CDOT Form #128 is required for all categorically excluded projects. Parts A and B must be completed for right of way authorization and obligation of federal funds. Parts A, B, C, and E must be completed prior to project advertisement.

2. FHWA signature is required for all federally funded Categorical Exclusions (CE) unless programmatic approval has been granted. Following signature, the FHWA will retain a copy of the 128 and return the original to the RPEM. The RPEM will be responsible for distributing copies within CDOT and maintaining the original in the Region.

3. FHWA approval may be requested for federally funded projects that are programmatically granted CE status if a 404 permit is required. The purpose for the request shall be stated in Part D, Comments.

4. If FHWA signature is not required, the RPEM will enter "N/A" on the FHWA concurrence line of Part B.

5. The project actions which qualify a project for CE designation must be entered in Part A, #1 of the 128. The designation must be taken from 23 CFR 771.117 (a) - (d) or from the current list of additional programmatic CEs approved by the FHWA. Paragraph (a) CEs require a transmittal letter of explanation to FHWA.

6. If it is necessary for the Office of Environmental Services (OES) to prepare a 128 for Statewide projects, the OES manager will be responsible for clearances, certification, and appropriate distribution.

7. If project revisions change the clearance/permit requirements, revised CDOT Forms #128 and #463 are required.

8. In Part E the RPEM must indicate the set of plans and specifications (Final Office Review, advertisement, award, etc.) which were reviewed prior to certification. The date of these plans must be provided.
### OJT Training Questionnaire

**Contractor's Name:**

**Trainee's Name:**

**Worker Classification:**

**Trainee's Address:**

**Telephone No.:**

<table>
<thead>
<tr>
<th>Trainee's Social Security No.:</th>
<th>Male</th>
<th>Female</th>
<th>Black</th>
<th>Hispanic</th>
<th>Am. Indian</th>
<th>Asian Am.</th>
<th>Other</th>
</tr>
</thead>
</table>

**Have you ever received any apprenticeship training under any type of program before beginning this program?**

- [ ] Yes
- [ ] No

**When did you enter the current program?**

- **Month:**
- **Year:**

**In what type of training program are you enrolled?**

- [ ] Colorado Contractor's Association
- [ ] Contractors OJT Program
- [ ] Union Apprenticeship Program
- [ ] Other:

**How did you learn about the program?**

- [ ] Contractor
- [ ] Community Based Organization
- [ ] Other:

**When you entered your training, did anyone explain the program to you?**

- [ ] Yes
- [ ] No

**Did you receive a copy of your training program?**

- [ ] Yes
- [ ] No

**Which of the following aspects of the training program were explained to you?**

- [ ] Training Hours
- [ ] Type of Training
- [ ] Training Wages
- [ ] Job Choices
- [ ] Entry Wages

**Did you understand the training program discussed with you?**

- [ ] Yes
- [ ] No

**What is your current stage of training?**

- [ ] 25%
- [ ] 50%
- [ ] 80%
- [ ] 90%

**How many hours of training do you receive each week?**

- On Job-Site Training: **hours/week**
- Classroom Training: **hours/week**

**Are you keeping a record of your training hours?**

- [ ] Yes
- [ ] No

**Do you believe proper training is being given?**

- [ ] Yes
- [ ] No

**Does the job superintendent, trainer, or foreman show interest in helping you reach your goal of journeyman?**

- [ ] Yes
- [ ] No

**Do you have any problems that may interfere with your training?**

- [ ] Yes
- [ ] No

**Have you ever received any type of counseling from the apprenticeship counselor or another?**

- [ ] Yes
- [ ] No

**Do you know the name of your trainer?**

- [ ] Yes
- [ ] No

**Interviewer's Signature:**

**Date:**

**Trainee's Signature:**

**Date:**

---

**Distribution:** CDOT Business Programs Office (original)

**Previous editions may be used until supplies exhausted**
CDOT Form 205 – Sublet Permit Application, Construction  
https://www.codot.gov/library/forms/cdot0205.xlsx/view

CDOT Form 205 Instructions – Sublet Permit Application Instructions, Construction  
https://www.codot.gov/library/forms/cdot0205inst.pdf/view
The following statement shows the number of Work Days charged to your account for the week ending [date].

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Weather Conditions or Other Causes</th>
<th>Workable Days</th>
<th>Unworkable Days</th>
<th>Days Not Chargeable Other Causes</th>
</tr>
</thead>
<tbody>
<tr>
<td>-</td>
<td>Sunday</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>Monday</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>Tuesday</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>Wednesday</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>-</td>
<td>Thursday</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>-</td>
<td>Friday</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-</td>
<td>Saturday</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Days charged this week:

Days previously reported:

Total days charged to date:

Work days allowed by original Contract:

Extra days approved by Change Orders – Participating:

Nonparticipating:

Total revised Contract days:

Total days charged to date:

Total days remaining:

**ELAPSED TIME:**

Remarks:

Contractor’s Comments:

Project Engineer: [Signature]

[Date] / / Contractor: [Signature]
The following statement shows the number of Calendar Days charged to your account for the week ending ___/___/___.

<table>
<thead>
<tr>
<th>Date</th>
<th>Day</th>
<th>Weather Conditions or Other Causes</th>
<th>Calendar Days</th>
<th>Worked (W) Not worked (NW) by Contractor</th>
<th>Days Not Chargeable Other Causes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Days charged this week:

Days previously reported:

Total days charged to date:

Calendar days allowed by original contract:

Extra days approved by Change Orders – Participating:

Nonparticipating:

Total revised contract days:

Total days charged to date:

Total days remaining:

**ELAPSED TIME:**

**Remarks:**

**Contractor’s Comments:**

---

Distribution: Contractor (original)  Records Center  Resident Engineer  Project Engineer

Previous editions may be used until supplies exhausted  CDOT Form 283  07/02
### JOB SITE INTERVIEW SECTION

#### Equal Employment Opportunity

- Have you seen the EEO posters posted by the Contractor?  
  - Yes □  
  - No □
- Do you know the EEO policy of the Contractor?  
  - Yes □  
  - No □
- Do you know who the project EEO Officer is?  
  - Yes □  
  - No □
  
  If yes, what is the project EEO Officer’s name? □
- Have Contractor or Contractor personnel ever asked you to refer minorities and women to fill job openings?  
  - Yes □  
  - No □
- Has the Contractor offered you training or apprenticeship programs to upgrade your skills?  
  - Yes □  
  - No □
- How long have you been employed by this Contractor?  
  - years  □  
  - months  □  
  - days  □
- How did you get this job?  
  - union □  
  - other □
- Have you attended a meeting on this project where EEO was discussed?  
  - Yes □  
  - No □
  
  If yes, what was the date of the meeting? □
- Do you feel the Contractor has discriminated against you in any way?  
  - Yes □  
  - No □
- Comments:

#### Labor Compliance

- Have you seen the wage posters posted by the Contractor?  
  - Yes □  
  - No □
- What is your hourly wage rate?  $  □/hour
- What is your hourly fringe benefit amount?  $  □/hour
  
  How are fringe benefits being paid to you?  
  - cash □  
  - other (e.g., plan, fund, program) □
- Have you experienced any problems with fringe benefit payments?  
  - Yes □  
  - No □
  
  If yes, please describe:
- TOTAL HOURLY WAGE:  $  □/hour
- How often are you paid?  
  - weekly □  
  - other □
- Describe your current work assignment:

#### Date:

### VERIFICATION SECTION (Use the Contractor payroll to answer the questions in this Section)

- Is the employee's wage correct?  
  - Yes □  
  - No □
- What is the total hourly amount?  
  □
- What is employee's worker classification?  
  □
- What is the payroll date? □
- Comments:

### Date:

Employee Signature:  

Interviewer's Signature:  

Date:  

Distribution: Project File (original)  

Previous editions may be used until supplies exhausted  

CDOT Form 280  

07/02
**EQUAL EMPLOYMENT OPPORTUNITY AND LABOR COMPLIANCE VERIFICATION**

<table>
<thead>
<tr>
<th>Contractor name (Nombre del Contratista)</th>
<th>Job classification (Clasificación de Trabajo)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**JOB SITE INTERVIEW SECTION (SECCIÓN DE INVESTIGACIÓN DE TRABAJO)**

1. Have you seen the EEO posters posted by this contractor? (¿Ha visto los carteles de EEO pasados por el contratista?)
   - yes (sí)  - no
2. Do you know the EEO policy of your contractor? (¿Usted conoce la política de EEO del contratista?)
   - yes (sí)  - no
3. Do you know who the project EEO officer is? (¿Usted sabe, quien es el oficial de EEO del proyecto?)
   - yes (sí)  - no

**LABOR COMPLIANCE (CUMPLIMIENTO DE TRABAJO)**

1. Have you seen the wage posters posted by the contractor? (¿Ha visto los carteles de sueldo puesto por el contratista?)
   - yes (sí)  - no
2a. What is your wage rate? (¿Cuál es su salario por hora?)
    $ __________/hr.
2b. What is your fringe benefit amount? (¿Cuánto le dan por hora como pago por sus beneficios complementarios?)
    $ __________/hr.

**VERIFICATION SECTION (SECCIÓN DE VERIFICACIÓN)**

1. Are the employee’s wages correct? (¿Son correctos los salarios del empleado?)
   - yes (sí)  - no
2. What is the total hourly amount? (¿Cuánto es el pago por hora?)
   $ __________/hr.
3. What is the employee's worker classification? (¿Cuál es la clasificación del trabajador?)
4. What is the payroll date? (¿Cuál es la fecha del pago?)
   __/__/____

**COMMENTS**

Employee signature (Firma del Empleado)  Date (Fecha)

Invoicer signature (Firma del Invoicer)  Date
# Consultant Performance Evaluation

**To:** [Appropriate Division Head]

**Subject:** Consultant Performance Evaluation Report

<table>
<thead>
<tr>
<th>Name of Consultant:</th>
<th>Type of work:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Rating dates:</th>
<th>Rating key (see instructions):</th>
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<tbody>
<tr>
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<td>Excellent (E)</td>
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<tr>
<td>Item II</td>
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<td>Item III</td>
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<td>Item IV</td>
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<td></td>
<td>Poor (P)</td>
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<tr>
<th>FACTOR</th>
<th>CONTRACT PHASE</th>
<th>PRECONSTRUCTION PHASE</th>
<th>CONSTRUCTION PHASE</th>
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<tbody>
<tr>
<td>A.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<tr>
<td>Knowledge of department needs</td>
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</tr>
<tr>
<td>B.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<tr>
<td>Cooperation with department, public, other agencies</td>
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<tr>
<td>C.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Adequacy of personnel, supervision and management</td>
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<td>D.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Prosecution and submission of work</td>
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<tr>
<td>E.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Clarity of work</td>
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<tr>
<td>F.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Support calculations, data, reports</td>
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<td>G.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Completion of work within contract budget</td>
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<tr>
<td>H.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Accurate billing records</td>
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<tr>
<td>I.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<td>Overall quality, accuracy and competence</td>
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<td>J.</td>
<td>ITEM I</td>
<td>ITEM II</td>
<td>ITEM III</td>
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<tr>
<td>Prudent plans/creative design</td>
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</tr>
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</table>

**Rater:** Project Manager/Engineer (signature required)

**Reviewer:** Preconstruction/Construction Engineer (signature required)

**Region Engineer/Branch Manager**

**Remarks:**

---

Agreements and Consultant Management Office

CDOT Form #313 5/03

A – 16
INSTRUCTIONS FOR CONSULTANT PERFORMANCE EVALUATION REPORT

A. Purpose of evaluation:
The completed evaluation report of a consultant's performance will be used as input for selection of the consultant for future assignments.

B. Rating procedure:
The raters and the time periods in which evaluations are performed shall be as follows:

Item I - Contract Phase
The rater will be the contract administrator (Consultant Management Unit) and/or the Project Manager. The rating will be performed after the consultant’s work has been accepted or at appropriate contract stages. The rating will be reviewed by the Preconstruction Engineer, Region Transportation Director, Branch Head or other official directly responsible.

Item II - Preconstruction Phase (Preliminary Engineering)
The rater will be the Project Manager or other official directly responsible for incorporating the consultants work into Department plans, reports, etc. The rating will be performed promptly after the consultant’s work has been used (i.e., after the FIR). The rating will be reviewed by the Preconstruction Engineer, Region Transportation Director, Branch Head or other official directly responsible.

Item III - Preconstruction Phase (Final Design)
The rating will be completed and reviewed by the same individuals as indicated for Item II and as promptly as practical after the FIR.

Item IV - Construction Phase
The rater will be the Project Engineer or other official directly responsible for completing the construction project on which the consultant’s work was used. The rating will be performed promptly after construction of the project has been completed. The rating will be reviewed by the Construction Engineer, Region Transportation Director or other official directly responsible.

C. Basis of ratings:
Ratings of the consultant’s performance will be accomplished by marking poor, acceptable, good, very good, excellent or not applicable for each of the indicated factors on the evaluation report. All poor and excellent evaluations for any factor shall have an explanation in the “Remarks” section provided on the form.

The keys to the various rating levels are as follows:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent (E)</td>
<td>Consultant consistently exceeded expectations</td>
</tr>
<tr>
<td>Very Good (VG)</td>
<td>Consultant frequently exceeded expectations</td>
</tr>
<tr>
<td>Good (G)</td>
<td>Consultant consistently met expectations</td>
</tr>
<tr>
<td>Acceptable (A)</td>
<td>Consultant occasionally failed to meet expectations</td>
</tr>
<tr>
<td>Poor (P)</td>
<td>Consultant consistently failed to meet expectations</td>
</tr>
<tr>
<td>Not Applicable (NA)</td>
<td>As indicated on form or as determined by rater</td>
</tr>
</tbody>
</table>

RATING FACTORS

Ratings for each factor should be based on how often, how quickly and to what degree the following criteria were met by the consultant during the performance of the work.

Factor A - Knowledge of Department needs
* Consultant was knowledgeable and fulfilled his contractual obligation with the Department.
* Consultant maintained the scope of services sought by the Department.
* Consultant was familiar with the Department's policies and procedures.
* Consultant maintained the flexibility necessary for meeting the changing Departmental needs.
* Consultant served the Department, but was not subservient to it. This means that occasionally the Consultant must give the Department unpleasant news such as costs of a design concept exceed the budget.

Factor B - Cooperation with Department, Public, Other Agencies
* Consultant displayed a willingness to work as a team member in the development of a project. Liaison with the Department’s Project Manager was undertaken at the earliest possible time (prior to the signing of contract documents if possible) ensuring common understanding of the scope of the project as well as conformity with the Department’s standards, practices, accuracy requirements, format, computer data compatibility, survey practices and such other items as the Project Manager considered to be critical to the project.
* Consultant mediated disagreements between disciplines and/or agencies always in the best interest of the project.
* Consultant was accessible to Department staff and responsive to their questions, needs and concerns.
* Consultant maintained working relationship with the Department and other agencies.
* Consultant participated in community workshops/public meetings and responded to citizens/groups seeking information or assistance.
RATING FACTORS (continued)

Factor C - Adequacy of Personnel, Supervision and Management
* Consultant did not over extend their human resources to where their personnel were inadequate to maintain schedules.
* The work was accomplished at the lowest possible level without sacrificing quality of the design.
* The work was checked prior to submission to the Department.
* Consultant knew when to take charge and utilized the authority granted them.

Factor D - Prosecution and Submission of Work
* Consultant obtained approvals and decisions from the Department in a timely manner, thereby permitting the project to flow smoothly and quickly.
* The Project Manager was informed of any change in scope, lack of information, or decisions by the department or other agencies that adversely affected the project and did not permit the work to progress in a logical manner.
* Consultant developed project schedules and communicated with the Project Manager with regard to the progress of work.
* Consultant participated and contributed to the decision making process.
* Consultant submitted plans, specifications and supporting documentation to the Department in a timely manner, maintaining schedules and meeting deadlines for project milestones (i.e., Financial Package, Scope of Work, Man-Hour Estimates, FIR, FOR, etc.).
* Work was checked for accuracy and content prior to submission to the Department.

Factor E - Clarity of Work
* Consultant provided the Department with plans and specifications that met Department standards for content and format. These plans and specifications were therefore readily understood by all those persons who were required to work with them.
* Reports, calculations, correspondence and other written materials exhibited completeness, clarity and conciseness and addressed Department concerns and questions.

Factor F - Support Calculations, Data, Reports, etc.
* Consultant explained, defended and justified technical decisions and actions.
* Consultant provided hard copy documentation concerning design decisions, calculations, and other supporting data so that a project history was maintained.

Factor G - Completion of Work Within Contract Budget
* Consultant prepared plans and specifications for the project that considered the project budget (preliminary engineering and construction). If the project approached a budget overrun, the consultant brought this fact to the attention of the Project Manager in a prompt and timely manner and offered alternative solutions to the budget problems.
* Consultant performed the scope of services within the anticipated man-hours, scheduled completion date and actual estimated fee.
* Supplemental contracts to the original contract were minimized through careful planning and forethought when establishing the original scope of services and contract agreement with the Department.

Factor H - Accurate Billing Records
* Consultant provided the Department with mathematically correct and itemized breakdowns of billing charges in accordance with commonly accepted accounting practices both upon completion of the project and when requested.
* Salaries, indirect costs, fixed fees and other rates submitted agreed with the contract cost proposal.
* Supporting documentation for charges were provided and questions were answered in a timely manner.

Factor I - Overall Quality, Accuracy and Competence
* Consultant provided work that was technically accurate and complete, and displayed professional competence with regard to content.
* Construction oversight was not the result of omissions or confusing details provided by the consultant in the plans or specifications.
* Consultant's work was checked prior to submission to the Department to ensure quality and accuracy of the work in meeting the scope of services under the contract.

Factor J - Prudent Plans/Creative Design
* Although new and innovative solutions are permitted, the consultant ensured that only appropriate design alternatives meeting the Department's objectives were selected.
* Innovative and/or state-of-the-art methods, procedures, designs or theories in solving problems were used.
* Although a design was unique, innovative and creative, the project remained constructible.

Factor K - DBE Participation
* Consultant participated in the Department's DBE goals within the terms of the contract.
### COLORADO DEPARTMENT OF TRANSPORTATION
### PROJECT INDEPENDENT ASSURANCE SAMPLING SCHEDULE

<table>
<thead>
<tr>
<th>Item #</th>
<th>Identification</th>
<th># of samples</th>
<th>CDOT Form #</th>
<th>Field Sheet #</th>
<th>Date</th>
<th>Field tester (QA)</th>
<th>Independent Assurance Tester (IA)</th>
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<tbody>
<tr>
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<td>Recomm.</td>
<td>Actual</td>
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</table>

**Project Field Lab inspection date:**

**Remarks:**

The above schedule is an estimate of CDOT Independent Assurance samples required on this project. The number of samples recommended is also the number of each type of test for the specific item in the Frequency Schedule for independent Assurance Evaluation unless otherwise noted.

**Distribution:**
- Region Materials Engineer
- Resident Engineer
- Project Engineer
- Project Tester
- Region Program Engineer
- Documentation Unit, Materials & Geotechnical Branch

The assurance-sampling schedule for this project has been substantially followed and the test results of the assurance samples are in reasonably close agreement with the project acceptance sample test results. (Exceptions to this statement have been previously commented on when the test results were reported or are explained on this form or on an attached sheet.)

**Final review by:** (Region Materials Engineer)  Date:  

---

CDOT Form #329  3/04
## COLORADO DEPARTMENT OF TRANSPORTATION
### FEDERAL AID PROGRAM DATA / FEDERAL - AID PROJECT AGREEMENT

<table>
<thead>
<tr>
<th>Phase</th>
<th>Status</th>
<th>Date</th>
<th>Federal Funds</th>
<th>State Funds</th>
<th>Other Funds</th>
<th>Phase Totals</th>
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</table>

### Project Totals

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<tr>
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<th>Status</th>
<th>Date</th>
<th>ProcCode</th>
<th>Amount</th>
<th>ProcCode</th>
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</tbody>
</table>

### Remarks:

The State, as a condition of payment of the Federal Funds obligated, accepts and will comply with the provisions set forth in 23 CFR 650.307, and its signature represents the making of the certification.

### Department of Transportation, State of Colorado

**Thomas Norton, Executive Director**

(Official name of Highway Agency)

By ____________________________

**U.S. DEPARTMENT OF TRANSPORTATION**

**FEDERAL HIGHWAY ADMINISTRATION**

By ____________________________

*Division Administrator*

(Title)

Data entered by:

Division Administrator ____________________________

(CDOT Form 418 Rev 9/1000)

FORM PR-2 (REV. 3-1997) PREVIOUS EDITIONS ARE OBSOLETE
STATE OF COLORADO

DEPARTMENT OF TRANSPORTATION
Right-of-Way Services Branch
4201 E. Arkansas Ave., 4th Floor
Denver, Colorado 80222-3400
(303) 757-5331  Fax (303) 757-9868

RIGHT OF WAY PLAN APPROVAL

Division Administrator
Federal Highway Administration
555 Zang Street, #250
Lakewood, Co 80028

Project No: OOOOOOOO
Location: OOOOOOOOOOOOO
Project Code: OOOOO
Region: 0

Dear Sir:

The quarterly obligation plan containing this project, and/or a CDOT 218/418 was approved on 00/00/00 authorizing function 3114 and obligating sufficient right of way funds. It is requested that the Right of Way Plans on the above project be approved in order that the following additional functions may be eligible for federal participation.

Function
Code
(XX) RIGHT OF WAY - Acquisition
3111
(XX) RIGHT OF WAY - Relocation Payments
3109

Comments or explanation of above:

Ownerships: OOOOO

ROWPR 00/00/00

Right of Way Services Manager

By

Authorized subject to conditions below:

________________________

for Division Administrator

Date

Conditions:

Acquisition or Relocation cannot begin until the Acquisition Stage Relocation Plan has been approved.

cc: Program Engineer
    Region ROW Supervisor
    Financial Management and Budget Office
    Center for Accounting - Projects and Grants
    ROW Services - Original plus (2)

CDOT FORM NO. 462a
Rev. December 2000

A - 21
## Traffic
(Note: use columns A, B, and/or C to identify facility described below)

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<thead>
<tr>
<th>Facility</th>
<th>Current year</th>
<th>Future year</th>
<th>Facility location</th>
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<tr>
<td></td>
<td>ADT</td>
<td>DHV</td>
<td>DHV % trucks</td>
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<tr>
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<td>C</td>
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## Relay class

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## Design standards (Identify substandard items with an * in 1st column & clarify in remarks)

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<th>Proposed</th>
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</tbody>
</table>

Project under 1R | 3R | 5R | 9R | Other | criteria

- Yes
- No

- Safety project
- Not all standards addressed

- Bridge (see Item 4)
- True remarks

- Stage construction (explain in remarks)

- Recommitting projects
- Recommendations concerning safety aspects attached

CDOT Form #463 12/03
### Major Structures

<table>
<thead>
<tr>
<th>Structure ID#</th>
<th>Length</th>
<th>Rail point</th>
<th>Feature intersected</th>
<th>Standard width</th>
<th>Structure type</th>
<th>Year built</th>
</tr>
</thead>
</table>

Proposed treatment of bridge to remain in place address bridge rail, capacity, and allowable surcharging restrictions.

### Project Characteristics (proposed)

- [ ] Project Name
- [ ] Handicap access
- [ ] Traffic control signals
- [ ] Stripping
- [ ] Guardrail type
- [ ] Luggage area
- [ ] Continuous walkway
- [ ] Sidewalk width:
- [ ] Signature size
- [ ] Sidewalk
- [ ] Parking lot width
- [ ] Curb
- [ ] Sidewalk
- [ ] Curb

- [ ] Landscaping requirements (description)
- [ ] Other (description)

### Right of Way

- Yes
- No

- [ ] Relocation required
- [ ] Temporary work required
- [ ] Changes in access
- [ ] Changes to connecting roads:

### Utilities (list names of known utility companies)

- [ ] Ditch name of known utility companies

### Railroad crossings

- Number of crossings:

### Environmental

<table>
<thead>
<tr>
<th>Type</th>
<th>Approved unit</th>
<th>Under Project Code</th>
<th>Project #</th>
</tr>
</thead>
</table>

Comments:

### Coordination

- [ ] Withheld lands (power sites, reservoirs, etc.) cleared thru SLM or forest service office
- [ ] Irrigation ditch name:
- [ ] New traffic ordinance required
- [ ] Modify schedule or existing ordinance
- [ ] Municipality:
- [ ] Other:

### Construction Method

- [ ] Road
- [ ] Design
- [ ] Local P&A
- [ ] P.O.
- [ ] Utility P&A
- [ ] Study
- [ ] Utility P&A
- [ ] Colorado DOT P&A
- [ ] Miscellaneous

Entity/Agency contact name:

Phone #:

### Remarks (include additional pages needed)

Original to Central Files - Copies to: Region Files, Region Environmental Program Manager, Staff ROW Staff Bridge or other when appropriate.
## COLORADO DEPARTMENT OF TRANSPORTATION
### DESIGN EXCEPTION VARIANCE REQUEST

<table>
<thead>
<tr>
<th>Project name</th>
<th>Date</th>
<th>Project Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Type (check all that are applicable)</th>
<th>Revised</th>
<th>Region</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ New construction □ Restoration □ Resurfacing □ Rehabilitation □ Reconstruction □ Safety □ Enhancement</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Part 1 — Complete A through H for all projects**

A. Short project description (☐ see CDOT Form 463 for more detailed description)

- □ AASHTO standards apply
- □ 3R standards apply
- □ Other: ____

B. Description of standard(s) reduced

C. Rational need for exception(s)

D. Mitigation measures proposed (include safety discussion)

E. Description of adjoining sections: (☐ see CDOT Form 463)

- Other:
  - □ same as existing project
  - □ same as proposed project

F. Accident data Source:

Most recent statewide accident rate (calendar year) for this functional class / facility: (per million vehicle-miles of travel)

- a) ______
- b) ______

Latest accident rate for this highway (usually 3 years):

- a) ______
- b) ______

G. Cost

- Estimated item cost if built to full standard $____
- Estimated item cost with exception $____
  - Difference in cost: $____

H. Other (as needed)

**Part 2 — Appropriate signatures required.**

A. Submitted by (Project Manager) Date Program Engineer Approval Date

- Resident Engineer Approval Date

Required for Federal-oversight projects only

- Approved by (FHWA Division Administrator) Date

- □ Not approved
- □ Approved with conditions

<table>
<thead>
<tr>
<th>Conditions/comments</th>
</tr>
</thead>
</table>

**Previous editions are obsolete and may not be used.**

Distribution:

- Project Manager
- Program Engineer
- Resident Engineer
- HQ Records Center
- FHWA, if applicable

CDOT Form #0464 11/04
COLORADO DEPARTMENT OF TRANSPORTATION
NON-DISCRIMINATION IN EMPLOYMENT NOTICE
(Labor Unions or other Worker's Organizations)

To: (Union or Worker's Organization name)

From: (Contractor/subcontractor name)

Federal Aid Project number:

We have a contract with the Colorado Department of Transportation for the Federal Aid Project listed above. To comply with contract provisions and Executive Order 11246, dated September 23, 1965, we must post this notice in conspicuous places for employees or applicants for employment to read. We cannot discriminate against any employee or applicant for employment because of race, religion, color, sex, creed, national origin, age, or disability. This obligation not to discriminate in employment includes, but is not limited to, the following:

- Hiring, placement, upgrading, transfer, or demotion
- Employment recruitment, advertising, or solicitation
- Employee training
- Pay rates or other forms of compensation
- Training selection, including apprenticeship
- Layoff or termination

Contractor/subcontractor signature

Date

Note: Contractor/subcontractor must post this notice in conspicuous places accessible to employees or applicants for employment.
COLORADO DEPARTMENT OF TRANSPORTATION
CONTRACTORS PERFORMANCE CAPABILITY STATEMENT

1. List names of partnerships or joint ventures  [ ] none

2. List decreases in the contractors fiscal or workmanship qualifications compared to the last prequalification statement submitted to CDOT. (Attach additional sheets if necessary.)
   a. Key personnel changes  [ ] none

   b. Key equipment changes  [ ] none

   c. Fiscal capability changes (legal actions, etc.)  [ ] none

   d. Other changes that may effect the contractors ability to perform work  [ ] none

I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OR FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

<table>
<thead>
<tr>
<th>Contractor's firm or company name</th>
<th>By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</table>

<table>
<thead>
<tr>
<th>2nd Contractor's firm or company name (if joint venture)</th>
<th>By</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

CDOT Form #65 1.02
COLORADO DEPARTMENT OF TRANSPORTATION

ANTI-COLLUSION AFFIDAVIT

I hereby affirm that I am the person responsible for the final decision as to the prices and amount of this bid or, if not, that I have written authorization, enclosed herewith, from that person to make the statements set out below on his or her behalf and on behalf of my firm.

I further affirm:

1. The prices and amount of this bid have been arrived at independently, without consultation, communication or agreement for the purpose or with the effect of restricting competition with any other firm or person who is a bidder or potential prime bidder.

2A. Neither the prices nor the amount of this bid have been disclosed to any other firm or person who is a bidder or potential prime bidder on this project, and will not be disclosed prior to bid opening.

2B. Neither the prices nor the amount of the bid of any other firm or person who is a bidder or potential prime bidder on this project have been disclosed to me or my firm.

3A. No attempt has been made to solicit, cause or induce any firm or person who is a bidder or potential prime bidder to refrain from bidding on this project, or to submit a bid higher than the bid of this firm, or any intentionally high or non-competitive bid or other form of complementary bid.

3B. No agreement has been promised or solicited for any other firm or person who is a bidder or potential prime bidder on this project to submit an intentionally high, non-competitive or other form of complementary bid on this project.

4. The bid of my firm is made in good faith and is not pursuant to any consultation, communication, agreement or discussion with, or inducement or solicitation by or from any firm or person to submit any intentionally high, non-competitive or other form of complementary bid.

5. My firm has not offered or entered into a subcontract or agreement regarding the purchase or sale of materials or services from any firm or person, or offered, promised or paid cash or anything of value to any firm or person, whether in connection with this or any other project, in consideration for an agreement or promise by any firm or person to refrain from bidding on this project.

6. My firm has not accepted or been promised any subcontract or agreement regarding the sale of materials or services to any firm or person, and has not been promised or paid cash or anything of value by any firm or person, whether in connection with this or any other project, in consideration for my firm’s submitting any intentionally high, non-competitive or other form of complementary bid, or agreeing or promising to do so on this project.

7. I have made a diligent inquiry of all members, officers, employees, and agents of my firm with responsibilities relating to the preparation, approval or submission of my firm’s bid on this project and have been advised by each of them that he or she has not participated in any communication, consultation, discussion, agreement, collusion, or other conduct inconsistent with any of the statements and representations made in this affidavit.

8. I understand and my firm understands that any misstatement in this affidavit is and shall be treated as a fraudulent concealment from the Colorado Department of Transportation, of the true facts relating to submission of bids for this contract.

I DECLARE UNDER PENALTY OF PERJURY IN THE SECOND DEGREE, AND ANY OTHER APPLICABLE STATE OR FEDERAL LAWS, THAT THE STATEMENTS MADE ON THIS DOCUMENT ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

Contractor’s firm or company name

By

Date

Title

[2nd contractor’s firm or company name, if joint venture]

By

Date

Title

Sworn to before me this day of, 20

Notary Public

My commission expires

NOTE: This document must be signed in ink.
CONTRACTOR and Colorado Department of Transportation (CDOT) recognize that in actual economic practice antitrust violations ultimately impact on CDOT. Therefore, for good cause and as consideration for executing this contract and for receiving payments hereunder,

1. Contractor hereby irrevocably assigns to CDOT any and all claims it may now have or which may hereafter accrue to it under federal or state antitrust laws in connection with the particular project, goods or services purchased or acquired by CDOT pursuant to this contract.

2. Contractor hereby expressly agrees:

   a. That, upon becoming aware that a third party has commenced a civil action asserting on Contractor's behalf an antitrust claim which has been assigned to CDOT hereunder, Contractor shall immediately advise in writing:
      (1) Such third party that the antitrust claim has been assigned to CDOT, and
      (2) CDOT that such civil action is pending and of the date on which, in accordance with subparagraph a. (1) above, Contractor notified such third party that the antitrust claim had been assigned to CDOT;

   b. To take no action which will in any way diminish the value of the claims or rights assigned or dedicated to CDOT hereunder;

   c. Promptly to pay over to CDOT its proper share of any payment under an antitrust claim brought on Contractor's behalf by any third party and which claim has been assigned to CDOT hereunder.

3. Further, Contractor agrees that if in the event it hires one or more subcontractors to perform any of its duties under the contract, Contractor shall require that each such subcontractor:

   a. Irrevocably assign to CDOT (as a third party beneficiary) any and all claims that such subcontractor may have or which may thereafter accrue to the subcontractor under federal or state antitrust laws in connection with any goods or services provided by the subcontractor in carrying out the subcontractor's obligations to Contractor;

   b. Upon becoming aware that a third party has commenced a civil action on the subcontractor's behalf asserting an antitrust claim which has been assigned to CDOT hereunder, shall immediately advise in writing:
      (1) Such third party that the antitrust claim has been assigned to CDOT, and
      (2) Contractor and CDOT that such civil action is pending and of the date on which, in accordance with subparagraph b. (1) above, the subcontractor notified such third party that the antitrust claim had been assigned to CDOT;

   c. Take no action which will in any way diminish the value of the claims or rights assigned or dedicated to CDOT hereunder;

   d. Promptly pay over to CDOT its proper share of any payment under an antitrust claim brought on the subcontractor's behalf by any third party and which claim has been assigned or dedicated to CDOT pursuant hereto.

I, acting in my capacity as officer of a bidder (bidders if a joint venture) do agree to the above assignment of antitrust claims.
# Trainee Status and Evaluation

**Contractor's Name:**

**Project Number:**

**Project Code (SAP):**

**Reporting Month:**

**Trainee's Name:**

**Trainee's Classification:**

**Social Security Number:**

**Date Enrolled in Program:**

**Hourly Rate:**

**Percent of Journeyman Scale:**

**Total Hours Required in Program:**

**Sponsor (Colorado Program):**

**Status of Trainee:**

- [ ] Working
- [ ] Graduated
- [ ] Temporarily Laid Off
- [ ] Dropped Out
- [ ] Transferred to Another Project
- [ ] Terminated

<table>
<thead>
<tr>
<th>Federal Aid</th>
<th>CDOT Project No.:</th>
<th>Project Code:</th>
<th>Location:</th>
<th>Hours Worked This Month:</th>
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<tbody>
<tr>
<td>[ ] Yes</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>[ ] No</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Non-CDOT Project Descriptions and Locations:

<table>
<thead>
<tr>
<th>Hours Worked This Month:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

Total Training Hours Worked This Month:  

Previous Training Hours Worked:  

Total Training Hours Worked to Date:  

**What were the trainee's primary job duties this month:**

The trainee's overall job performance for this month is:  

- [ ] Excellent
- [ ] Good
- [ ] Fair
- [ ] Poor

**Supervisor's Comments:**

Trainee's Comments:

Trainee's Signature (if available):

Supervisor's Signature:

---

**CONTRACTOR:**  
The undersigned contractor hereby certifies that the listed employee is a bona fide trainee as required by the On-the-Job Training Special Provision, that she has worked the hours reported on this form, and the hours worked on CDOT and Federal Aid Projects reported are eligible for reimbursement. The information provided above is reasonably correct to the best of my knowledge.

Contractor Signature/Title:  

Date:

---

**PROJECT ENGINEER:**  
I hereby certify that the On-the-Job training hours reported above have been reviewed and found reasonable.

Engineer Signature/Title:

Date:

---

**Distribution:**  
REGION CIVIL RIGHTS MANAGER – 3 copies (one for BPO, one for Sponsor)
Project Engineer
Trainee
Records Center (original)
# OJT Trainee/Apprentice Record

**Contractor Instructions:**
1. Complete this form for each trainee or apprentice on the project that will be used to meet OJT requirements.
2. Submit one form for each trainee/apprentice for each project.
3. Retain a copy for your records.
4. Submit original to CDOT Project Engineer.
5. Incomplete submittals will be rejected.
6. Attach training program certificate.
7. Attach training enrollment certificate.

**Type of Program (check all that apply):**
- [ ] Union
- [ ] Colorado Program
- [ ] Standard OJT Program
- [ ] U.S. Department of Labor Bureau of Apprenticeship and Training

**Contractor’s Name:**

**Project No.:**

**Location:**

**Project Code (SA#):**

**Name of Trainee’s Supervisor:**

**Title:**

**Trainee’s Name:**

**Date this form submitted:**

**Trainee’s Job Classification and CODE from the wage decision:**

**Wage Decision number, include modifications:**

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
<th>Social Security Number</th>
<th>Veteran</th>
<th>Yes if Yes, which branch</th>
</tr>
</thead>
</table>

**Education – Check the last year of school completed:**
- [ ] High School Diploma
- [ ] GED
- [ ] College

**Technical Training or Certifications:**

**Special Licenses:**

**Training Hours Credited:**
- [ ] Accumulated:
  - [ ] On-the-Job Training _______(hours)
  - [ ] Classroom Training _______(hours)

**Ethnic or Racial Background:**
- [ ] African American
- [ ] American Indian or Alaskan
- [ ] White
- [ ] Hispanic
- [ ] Asian or Pacific Islander
- [ ] Other

**Trainee’s Previous Construction Work Experience:**

<table>
<thead>
<tr>
<th>Name of Company</th>
<th>Location City / State</th>
<th>Job Classification</th>
<th>Dates of Employment: From:</th>
<th>To:</th>
</tr>
</thead>
</table>

**Were any previous jobs at the journeyman level?**
- [ ] Yes
- [ ] No

**Trainee’s First employed by Your Company:**

**Date Enrolled in Training Program:**

**How long do you anticipate employing this trainee/apprentice?**

**Trainee’s wage (% of journeyman work) at this time?**
- [ ] 60%
- [ ] 75%
- [ ] 90%
- [ ] 100%

**Trainee’s current wage rate $ ________/hr**

**Trainee willing to travel?**
- [ ] Yes
- [ ] No

**Signature of Authorized Contractor Representative:**

<table>
<thead>
<tr>
<th>Title</th>
<th>Date</th>
</tr>
</thead>
</table>

**Region Civil Rights Manager Signature:**

<table>
<thead>
<tr>
<th>Region:</th>
<th>Approved</th>
<th>Not Approved</th>
<th>Date:</th>
</tr>
</thead>
</table>

**Comments or reason not approved:**

---

*Previous editions are obsolete and may not be used.*

*CDOT Form # 838 0495*

*Project Engineer (2) Project Engineer will provide one copy to the contractor*

*Region Civil Rights Manager (3 copies – one for DPO, one for the sponsor if applicable)*

*Records Center (Original)*

---

A – 30
# UDBE Contract Goal Recommendation

**Instructions:** Complete CDOT Form #663 (using the Engineer’s Estimates). Submit a copy of the Engineer’s Estimates to the Business Programs Office with this form.

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Project Code (SA#)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

<table>
<thead>
<tr>
<th>Local Entity Project:</th>
<th>Advertisement Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] YES</td>
<td>[ ] NO</td>
</tr>
<tr>
<td>[ ] YES</td>
<td>[ ] NO</td>
</tr>
</tbody>
</table>

For Consultant Contracts Only:

<table>
<thead>
<tr>
<th>Non-Project Specific (NPS):</th>
<th>Contract Identification (Type):</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] YES</td>
<td>[ ] NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agreement Type:</th>
<th>Location (Region):</th>
</tr>
</thead>
<tbody>
<tr>
<td>[ ] Construction Contract</td>
<td>[ ] Consultant Contract</td>
</tr>
</tbody>
</table>

**Project Manager:**

**Annual DBE Goal:**%

**Available UDBE Firm Names:**

1. 
2. 
3. 
4. 
5. 
6. 
7. 
8. 
9. 
10. 
11. 
12. 

**Identify items of work (work codes) for which two or more UDBE firms can reasonably be expected to compete:**

<table>
<thead>
<tr>
<th>DBE Item Number (Work code)</th>
<th>Description</th>
<th>Applicable Firms (List by above no.)</th>
<th>Estimated Value</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**Comments:**

<table>
<thead>
<tr>
<th>Comments</th>
<th>Total dollar value of anticipated UDBE work:</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>$</td>
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</table>

**Estimated total contract (dollars):**

<table>
<thead>
<tr>
<th>Estimated total contract (dollars):</th>
</tr>
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<tbody>
<tr>
<td>$</td>
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</tbody>
</table>

**Recommended percentage for DBE goal:**%

**Region EEO Signature:**

<table>
<thead>
<tr>
<th>Region EEO Signature</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
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<td>[ ]</td>
</tr>
</tbody>
</table>
COLORADO DEPARTMENT OF TRANSPORTATION
FORCE ACCOUNT CONSTRUCTION METHOD – FINDING IN THE PUBLIC INTEREST

Date Location

The term “force account construction method” refers to construction work a public agency performs on federal or state funded projects using its own forces. Specifically, it means the direct performance of highway construction work by the Department, local entity, county, railroad, public utility company, or other agency by use of labor, equipment, materials, and supplies furnished by the agency and used under its contract terms (23 CFR part 635.203(c)).

I hereby certify that Region _____ has accomplished all the necessary actions relating to items 1 through 6 below in support of the request by ___________________________ (Public Agency Name) to administer and/or perform the work on the above referenced project by the force account construction method.

☐ do ☐ do not recommend that the public agency named above be allowed to construct the work by the force account construction method. The work ☐ does / ☐ does not meet one of the following conditions justifying performance of the work by the force account construction method.

[Check at least one box] [See Section 8.02 of the Project Development Manual for further Guidance]

☐ Emergency repair work
☐ Incidental work for which the force account construction method is cost effective

☐ Railroad or Utility work
☐ Material furnished by the public agency

☐ Contract value under $50,000; lack of ☐ bids, or ☐ bids received were unreasonable
☐ Unusual circumstances unlikely to recur for which the force account construction method is cost effective

1. ☐ There exists ☐ We will obtain a suitable agreement between the State and the public agency under which this work can be included.

2. The public agency has submitted the documentation justifying use of the force account construction method. See Section 8.02 of the Project Development Manual for required documentation.

3. This public agency is paying part of the cost of the work or has other special interests as follows:

____________________________________________________________________________________

4. The public agency has satisfied the Region that it is adequately staffed and suitably equipped to perform this project work in a timely manner while satisfactorily completing the agency’s other construction and maintenance responsibilities.

5. The public agency’s price or cost proposal was subjected to technical and audit evaluations, as appropriate, and was determined to be reasonable and representative of actual costs.

6. The proposed cost, including administration, was determined to be cost effective and substantially less than the probable cost if completed by CDOT bid contract.

NOTE: Documentation supporting items 1 through 3 is available in the Region files. Documentation of items 4 through 6 is attached and should be retained as part of the project files.

Program Engineer Region

Original to: CDOT Records Center, 4201 E. Arkansas Avenue, Denver, CO 80222
Copies to: FHWA (NHS Projects), Region Project File

CDOT Form #853

A – 32

3/06
**COLORADO DEPARTMENT OF TRANSPORTATION**

**PROJECT CLOSURE**

For field use only

<table>
<thead>
<tr>
<th>Project code (SA#)</th>
<th>Project#</th>
<th>Region</th>
<th>Authorized by</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

Reason project closed
- [ ] Completed
- [ ] Withdrawn

Phase(s)
- [ ] PE
- [ ] ROW
- [ ] Const
- [ ] Util
- [ ] other

Actual units completed (for construction projects only) [\(\text{\# nearest tenth}\)]

Instructions: Submit all copies of this form to the CDOT Projects and Grants section. Any remaining project balances will be transferred to or from unallotted funds or pool accounts as appropriate.

For Accounts Payable use only

<table>
<thead>
<tr>
<th>Date received</th>
<th>Date encumbrances liquidated</th>
<th>By</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

For Projects & Grants use only

<table>
<thead>
<tr>
<th>Data Project deleted from Field Reports</th>
<th>FAR date</th>
<th>Audit required</th>
<th>Data final submitted to FHWA</th>
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<tbody>
<tr>
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</table>

Record retention expiration date
- [ ] Phases closed
- [ ] No build
- [ ] PJ proj.
- [ ] PJ final
- [ ] Logged

Final Project Costs

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<thead>
<tr>
<th>Federal Funds</th>
<th>Excess Right of Way</th>
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<tbody>
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Local

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Reimbursable

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Total

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For CFMB use only

<table>
<thead>
<tr>
<th>Date received</th>
<th>Date budget adjusted to actual costs</th>
<th>By</th>
<th>AA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

Original - Central File
Previous editions may be used until supplies are exhausted

CDOT Form #920 7/96

1 copy - Staff ROW
1 copy - Projects & Grants
1 copy - CFMB
# VOUCHER REQUEST (PROJECTS)

<table>
<thead>
<tr>
<th>LN</th>
<th>4000 FUND</th>
<th>POCONTRACT NUMBER</th>
<th>LN #</th>
<th>ORGAN (COST CENTER)</th>
<th>SUB</th>
<th>APPROP CODE</th>
<th>PROG</th>
<th>FUNCTION</th>
<th>OBJECT</th>
<th>SUB</th>
<th>N/P</th>
<th>REV</th>
<th>SOURCE</th>
<th>SUB REV</th>
<th>BS</th>
<th>GBL</th>
<th>REPT CATG (ORG UNIT)</th>
<th>PROJECT</th>
<th>SUB</th>
<th>PHAS</th>
<th>AMOUNT VOUCHERED</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

The undersigned hereby certifies that the expenditures for purchases or services described on the voucher and in the attached supporting papers were duly authorized, that the expenditures are for official state business and not for private or personal purposes, that the expenditures are reasonable and proper and correctly represented by the claims set forth on this voucher, are in accordance with the law or administrative rules, and are authorized by appropriation or other specific authority.

Prepared By: ___________________________  Date: ______/____/____

Approved By: _________________________  Date: ______/____/____

Item not used for expenditure entries
### COLORADO DEPARTMENT OF TRANSPORTATION

**PROJECT SCOPING/CLEARANCE RECORD**

<table>
<thead>
<tr>
<th>Construction project #</th>
<th>Project code</th>
<th>P.E. project #</th>
<th>P.E. Project code</th>
<th>STIP #</th>
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<tr>
<th>Project location</th>
<th>County</th>
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<tbody>
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</table>

Who requested this project? For what reason?

What is the proposed improvement/Scope of work? (note changes as project develops)

**Phase descriptions:** (see Procedural Directive 512.1 for further information/instructions)

**Phase I:**
- Implementation to State Transportation Improvement Plan (STIP) – As a project is included in the STIP, these activities should be reviewed for scoping the project, identifying concerns and determining future budget requirements.

**Phase II:**
- Design Scoping Review (DSR) – Takes place in the year before Preliminary Engineering (PE) is budgeted, or immediately when PE is budgeted, to re-evaluate original scope. May be combined with pre-survey conference.

**Phase III:**
- Field Inspection Review (FIR) – Before or during the FIR, all project development and design needs identified in the scoping process must be resolved. The scope should not be changed after the FIR.

**Comments:**
1. The form is to be used in conjunction with the Project Development Manual.
2. The Resident Engineer typically delegates project management responsibilities to other positions based on the type of project and available expertise.
3. Documentation or Activity sign-off date indicates clearance. All certification boxes require concurrence before project may be advertised. Use N/A if not applicable.
4. Blanks may be filled in a variety of ways: N/A = Not Applicable
5. Check "clear" box as each activity is cleared.
6. ??? = not yet determinable

### Activity

#### Section 1 - Scoping, budgeting and programming

<table>
<thead>
<tr>
<th>Activity</th>
<th>Phase I</th>
<th>Phase II</th>
<th>Phase III</th>
<th>Certification/clearance</th>
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<tbody>
<tr>
<td></td>
<td>Implementation to STIP</td>
<td>Design Scoping Review (DSR)</td>
<td>Field Inspection Review (FIR)</td>
<td>CLEAR</td>
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</tbody>
</table>

| 1.01 Existing typical section |
| 1.02 Proposed typical section |
| 1.03 Consistent with TIP/STIP |
| 1.04 Maintenance input |
| 1.05 Estimated total Project cost (PE, ROW, Util., Const., etc.) |
| 1.06 Funding sources/resource allocation (State, Federal, local, etc.) |
| 1.07 Project finances (ProMIS budget actions and phase obligation) |
| 1.08 Field survey required? | Yes | No | Date requested | Completed date | Region/Survey Coordinator |
| 1.09 Design Data (CDOT Form #463) | Preliminary Date | Final Date | Resident Engr. |
| 1.10 Request for Design Exception (CDOT Form #463) |
| 1.11 Project Schedule prepared | Yes | No | Date | up to date Date | Resident Engr. |

Page 1 of 6 CDOT Form #1048 3/06
<table>
<thead>
<tr>
<th>Section 2 - Environmental</th>
<th>Phase I</th>
<th>Phase II</th>
<th>Phase III</th>
<th>Certification/clearance</th>
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<td>Design Scoping Review (DSR)</td>
<td>Field Inspection Review (FIR)</td>
<td>Status:</td>
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<td>2.01 Route location approval</td>
<td>Yes / No / Check</td>
<td>Yes / No / Check</td>
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<td>2.02 Public involvement</td>
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<td>2.07 Archaeology (Effects determination)</td>
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<td>2.08 Paleontology (Effects determination)</td>
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<td>2.13 Threatened and Endangered Species</td>
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<td>2.15 Noise analysis</td>
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### Section 3 - Traffic

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<tr>
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<td>Implementation to STIP</td>
<td>Design Scoping Review (DSR)</td>
<td>Field Inspection Review (FIR)</td>
<td>Responsible party or reviewer (initial)</td>
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<td>Status:</td>
<td>Status:</td>
<td>Documentation or activity sign-off date</td>
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#### 3.01 Traffic data (CDOT Form #653 & Title Sheet)
- Request/analyze crash data
- Hazard index:
  - Yes: 1
  - No: 0
- Status:
  - Available: 0
  - Not Available: 0
- Responsible party or reviewer: Resident Engineer

#### 3.02 Request/analyze crash data
- Hazard index:
  - Yes: 1
  - No: 0
- Status:
  - Yes: 0
  - No: 0
- Responsible party or reviewer: Region Traffic

#### 3.03 Request turning movements from DTD
- Shown on plans:
  - Yes: 1
  - No: 0
- Status:
  - Yes: 0
  - No: 0
- Responsible party or reviewer: Resident Engineer

#### 3.04 Signal warrants
- On file:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Region Traffic

#### 3.05 Traffic movement diagram
- Intersection layout req’d:
  - Yes: 1
  - No: 0
- Interchange layout req’d:
  - Yes: 1
  - No: 0
- Requested:
  - Yes: 0
  - No: 0
- Responsible party or reviewer: Resident Engineer

#### 3.06 Intersection/Interchange design
- Required:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Resident Engineer

#### 3.07 Traffic signal plan
- Required:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Traffic Engineer

#### 3.08 Lighting Plan
- Required:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Resident Engineer

#### 3.09 Permanent signing and pavement marking
- Required:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Traffic Engineer

#### 3.10 Construction traffic control plans
- Clearing, signals and pavement marking:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Traffic Engineer

### Section 4 - Structures

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<th>Phase I</th>
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<th>Phase III</th>
<th>Certification/clearance</th>
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<td>Design Scoping Review (DSR)</td>
<td>Field Inspection Review (FIR)</td>
<td>Responsible party or reviewer (initial)</td>
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<td>Status:</td>
<td>Documentation or activity sign-off date</td>
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#### 4.01 Major Structure - Bridge
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.02 Major Structure - Culvert
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.03 Major Structure - Unusual
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.04 Pedestrian overpass/underpass
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.05 Architectural/esthetic treatment
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.06 Foundation investigation and recommendation
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.07 Structure selection report
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.08 Retaining walls
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.09 Noise walls
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.10 Analysis of structure to be resurfaced
- Requested:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.11 Determine existing structural adequacy
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.12 Crashworthy bridge rail
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Project Structural Engineer

#### 4.13 Vertical clearance of structure
- Available:
  - Yes: 1
  - No: 0
- Responsible party or reviewer: Resident Engineer
### Section 5 - Materials

<table>
<thead>
<tr>
<th>5.01 Pavement analysis/distress</th>
<th>Phase I: Implementation to STIP</th>
<th>Phase II: Design Scoping Review (DSR)</th>
<th>Phase III: Field Inspection Review (FIR)</th>
<th>Certification/clearance</th>
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<td>Type:</td>
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<td>5.02 Foundation investigation &amp; drilling</td>
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### Section 6 - Right of Way & Utilities

<table>
<thead>
<tr>
<th>6.01 Right-of-way involvement</th>
<th>Phase I: Implementation to year plan (or STIP)</th>
<th>Phase II: Design Scoping Review (DSR)</th>
<th>Phase III: Field Inspection Review (FIR)</th>
<th>Certification/clearance</th>
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<td>Illegal &amp; legal</td>
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<tr>
<td>Existing easements identification</td>
<td></td>
<td>Type:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clearance</td>
<td>Yes No</td>
<td>#</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.02 Permits req’d to work on govt. land</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Resident Engineer</td>
</tr>
<tr>
<td>Forest Service</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Bureau of Land Management</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1.</td>
<td></td>
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</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.03 Utility involvement:</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Region Utility Engineer</td>
</tr>
<tr>
<td>Existing utility easements?</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Region Utility Engineer</td>
</tr>
<tr>
<td>Visual inspection</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Region Utility Engineer</td>
</tr>
<tr>
<td>Request locates</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Region Utility Engineer</td>
</tr>
<tr>
<td>Clearance</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Region Utility Engineer</td>
</tr>
<tr>
<td>Railroad involvement:</td>
<td>Yes No</td>
<td>??</td>
<td>Status:</td>
<td>Resident Engineer</td>
</tr>
<tr>
<td>1.</td>
<td></td>
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<td>2.</td>
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<tr>
<td>Section 7 - Agreements, Justifications and Approvals</td>
<td>Phase I</td>
<td>Phase II</td>
<td>Phase III</td>
<td>Certification/clearance</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>---------</td>
<td>---------</td>
<td>-----------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>7.01 Safety rest areas</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.02 Detour design</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.03 Frontage road design</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.04 Railroad design</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>R.R. company</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R.R. flagging &amp; insurance requirements</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>R.R. facilities</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>R.R. standards reviewed</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.05 Airport/airport clearances</td>
<td>Req'd</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.06 Americans With Disabilities Act standards</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.07 Bicycle &amp; pedestrian facilities standards reviewed</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.08 Transit accommodations</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.09 Safety review (including clear zone decisions)</td>
<td>Applicable</td>
<td>Yes</td>
<td>No</td>
<td>Status:</td>
</tr>
<tr>
<td>7.10 Resurfacing project safety letter</td>
<td>Date:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.11 Guardrail/barrier design &amp; review</td>
<td>Need</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.12 Hydraulics design</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
</tr>
<tr>
<td>Erosion control</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
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<tr>
<td>Stormwater quality management</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
</tr>
<tr>
<td>7.13 Culverts other than items 617 or 624</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td></td>
</tr>
<tr>
<td>7.14 Climbing and passing lanes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.15 Stockpass and machine pass</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.16 Alternate bids</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>7.17 Consolidated projects</td>
<td>Applicable</td>
<td>Yes</td>
<td>No</td>
<td>Status:</td>
</tr>
<tr>
<td>7.18 Special provisions</td>
<td>Reviewed by:</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
</tr>
<tr>
<td>7.19 Consultant selection and contracting process</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
</tr>
<tr>
<td>7.20 Entity agreement (local agency, intergovernmental, interagency, public, private)</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
</tr>
<tr>
<td>1.</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
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<td>2.</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
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<td>7.21 Irrigation company agreement</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
</tr>
<tr>
<td>1.</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
</tr>
<tr>
<td>2.</td>
<td>Yes</td>
<td>No</td>
<td>Check</td>
<td>Status:</td>
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<td>Section 8 - General</td>
<td>Phase I</td>
<td>Phase II</td>
<td>Phase III</td>
<td>Certification/clearance</td>
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<tr>
<td>---------------------</td>
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<td>-------------------------</td>
</tr>
<tr>
<td></td>
<td>Implementation to STIP</td>
<td>Design Scoping Review (DSR)</td>
<td>Field Inspection Review (FIR)</td>
<td>responsible party or reviewer (initial)</td>
</tr>
<tr>
<td>8.01 Method of Construction</td>
<td>Yes No ???</td>
<td>Yes No Check</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
</tr>
<tr>
<td>8.02 Force account construction method</td>
<td>Yes No ???</td>
<td>Yes No Check</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
</tr>
<tr>
<td>8.03 Reserved</td>
<td>Yes No ???</td>
<td>Yes No Check</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
</tr>
<tr>
<td>8.04 Work by State forces</td>
<td>Yes No ???</td>
<td>Yes No Check</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
</tr>
<tr>
<td>8.05 Value engineering</td>
<td>Yes No Check</td>
<td>Yes No N/A</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.06 Stage construction</td>
<td>Yes No Check</td>
<td>Yes No Check</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>(future capacity considerations)</td>
<td>Yes No Check</td>
<td>Yes No Check</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.07 Experimental items</td>
<td>Yes No Check</td>
<td>Yes No Check</td>
<td>Region Program Engr.</td>
<td></td>
</tr>
<tr>
<td>8.08 Mandatory source of materials</td>
<td>Yes No Check</td>
<td>Yes No Check</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.09 Design Scoping Review</td>
<td>Date(s):</td>
<td>Date(s):</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.10 Field Inspection Review</td>
<td>Date(s):</td>
<td>Date(s):</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.11 Design Office Review</td>
<td>Date(s):</td>
<td>Date(s):</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.12 Final Office Review</td>
<td>Date(s):</td>
<td>Date(s):</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.13 Design decision letter(s) written?</td>
<td>Yes No Date:</td>
<td>Applicable? Yes No</td>
<td>Resident Engr.</td>
<td></td>
</tr>
<tr>
<td>8.14 Disposal of excess materials off project site</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.15 Use of materials furnished by a public agency</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.16 Proprietary items</td>
<td>Yes No Date:</td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.17 ** On-the-job training approval</td>
<td>Yes No Date:</td>
<td>Region Civil Rights Manager</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.18 ** Disadvantaged business enterprise goals</td>
<td>Yes No Status:</td>
<td>Region Civil Rights Manager</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.19 ** Project control data (CDOT Form #859)</td>
<td>Status:</td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.20 ** PS&amp;E approval</td>
<td>Date: Date:</td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.21 ** Federal-aid Program Data (CDOT Form #418)</td>
<td>OFMB</td>
<td>Regional Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.22 ** Bid package reviewed by:</td>
<td>Date:</td>
<td>Resident Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.23 ** Advertisement</td>
<td>Date:</td>
<td>Resident Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.24 ** PS&amp;E revisions under ad</td>
<td>Date:</td>
<td>Resident Engr.</td>
<td></td>
<td></td>
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<tr>
<td>Approved Yes No</td>
<td></td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.25 ** Re-advertisement</td>
<td>Date:</td>
<td>Region Program Engr.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8.26 ** Estimate reviewed by Engineering Estimates</td>
<td>Date:</td>
<td>Resident Engr.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

** Report status in Phase III column, activity usually falls after FIR.
COLORADO DEPARTMENT OF TRANSPORTATION
STANDARDS CERTIFICATION AND
PROJECT PLANS, SPECIFICATIONS &
ESTIMATE APPROVAL

<table>
<thead>
<tr>
<th>Project Number</th>
<th>Project Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Route Number</td>
<td>STIP Number</td>
</tr>
<tr>
<td>Location</td>
<td></td>
</tr>
</tbody>
</table>

STANDARDS CERTIFICATION

☐ CDOT Oversight – 23 USC 106 (b) (1), 3R on the Interstate

☐ CDOT Oversight – NHS, Non-Interstate; 23 USC 106 (b) (2) – Non-NHS funding

I certify that this project will meet or exceed the standards approved by the Secretary of Transportation under Section 109 (c) Title 23 of the United States Code, as listed in 23 CFR 625.4, with the exception of any approved variances.

Project Manager                              Date

BUSINESS OFFICE REVIEW

I have reviewed the appropriate project budget and by signing verify that on this date there were sufficient funds for obligation.

Business Manager                              Date

PLANS, SPECIFICATIONS & ESTIMATES APPROVAL

In accordance with 23 CFR 630.205, I approve the PS&E on the above project. Please obligate construction funds.

I have reviewed the final set of Plans, Specifications and Estimate for the above project and have determined them sufficient in detail to facilitate the construction and contract control of the project. If this project is constructed by the force account construction method, appropriate affirmative Findings-in-the-Public-Interest are on file. The conditions for authorization to advertise as set forth in 23 CFR 635.309 will be completed prior to advertising.

I find the estimate reflects the anticipated cost of the project in sufficient detail to provide a prediction of financial obligations incurred by CDOT and FHWA.

☐ The construction * cost estimate for this project is less than the project budget.
☐ The construction * cost estimate exceeds current budget, the additional source of funding to cover the estimate is:

☐ Pool                  Type of funds  $_____
☐ Project               Project code  $_____
☐ Other                 Source        $_____

*Total construction cost estimate for this project is: $_____

* Construction phase only (NOT TOTAL)

Program Engineer                              Region  Date

Previous editions are obsolete and may not be used   CDOT Form #1180  4/06

Instructions: Use this form for all projects that do not require FHWA approval or oversight of PS&E.
(See Stewardship Agreement.)

Distribution: Original to Region Business Office then to Office of Financial Management and Budget (Federal Funds Manager)
Copies to Project file and FHWA (NHS projects)
# CDOT Local Agency Manual

## September 2006

---

**Colorado Department of Transportation**

**Contract Funding Increase/Decrease and Approval Letter**

Region: Complete section 1 and submit to CDOT Controller's office.

This form is to be used for the following contracts/situations only (check the appropriate situation):
- **indefinite quantity, order more/add more**
- **utility/railroad, underestimated total cost**
- **CDOT construction, sum of CMO's**
- **LA construction, underestimated cost**
- **CDOT construction, underestimated total cost**
- **CDOT consultant, underestimated cost**

### SECTION 1 (Region use)

**Date:**

To: CDOT Controller (FAX #: (303) 757-9573 or e-mail CONTROLLER)

**Project code:**

**Office:**

**Phone #:**

**FAX #:**

**Region #:**

**Project #:**

**CDOT has executed a contract with:**

**Address:**

**FEIN #:**

**Contract routing #:**

**COFRS encumbrance #:**

(Indicate PO, SC or PG #)

**Fund:**

**Orgn.:**

**Appro.:**

**Prgrm.:**

**Func.:**

**Object/Sub-obj N/P:**

**GBL:**

**Reporting Calg.:**

**Proj/Sub/Phase:**

**Original contract amount:**

$___

**Has a Budget Request been processed to cover the contract amount increase?**

- yes
- no

**Previous Funding Letter(s) total:**

$___

**Prepare's name:**

**PHONE NO:**

**This Funding Letter total:**

$___

**Contract Administrator's/Business Manager's Approval:**

**PHONE NO:**

**Adjusted contract amount:**

$___

**CDOT Designee Approval:**

**Local Agency approval:**

---

**SECTION 2 (Controller's Office use)**

**Total allotment amount:**

$___

**Commission budget:**

$___

**CE charges:**

$___

**Indirect chgs:**

$___

**Adjusted contract amount plus total CE & indirect charges calculation:**

$___

**If construction: CE pool elig.:**

**I have reviewed the financial status of the project, organization, grant and have determined that sufficient funds are available to cover this increase, effective as of:**

**State Controller or Delegee:**

**Date:**

---

CDOT Form #1136

7/97

---

A – 42
# COLORADO DEPARTMENT OF TRANSPORTATION
## FINALS MATERIALS DOCUMENTATION REVIEW & AUDIT CHECKLIST

<table>
<thead>
<tr>
<th>Project number</th>
<th>Project code (S#)</th>
<th>Acceptance Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proj. location</td>
<td>Project Engineer</td>
<td>Region</td>
</tr>
<tr>
<td>Contractor</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resident Engineer</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- [ ] Project Basis
- [ ] System Basis
- [ ] Final Estimate or Progress Estimate number:

- [ ] Project Level Review (100%), [ ] Residency Finals Review (Major Item Checking)

<table>
<thead>
<tr>
<th>Major Item 1.)</th>
<th>Major Item 2.)</th>
<th>Major Item 3.)</th>
<th>Major Item 4.)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

1.) 2.) 3.) 4.) in order for materials documentation to be complete, the following items need to be checked:

- [ ] Final Quantities between Final Estimate and CDOT Form #250 agree. (If different, it is noted)
- [ ] Field Sheet/Serial number(s) on CDOT Form #250 match project documents, of the item(s) checked.
- [ ] Tests required and tests reported on the Form #250 agree. (If different, it is noted)

**yes** | **no** | **na**

- [ ] If IA tests are involved, Field Sheet/Serial number(s) on CDOT Form #379 match project documents and all test(s) agree with field acceptance tests, and if applicable, shortages and exceptions are explained.
- [ ] Ensure the correct number of tests on the CDOT Form #379.
- [ ] IA Witness tests did not exceed 20% of actual testing.
- [ ] Independent (IA)/Acceptance (QA)/Check Test differences are explained.
- [ ] Form #250 signed by the Project Engineer and Form #379 signed by the Region Materials Engineer.

**NOTE**: The following materials records are required to be attached to complete the finals materials documentation process, if applicable for this project:

- [ ] Letters, CMOs, MCRs, field sheets, etc. if used as the primary documentation within the Explanation of Exceptions
- [ ] Price reduction calculations.
- [ ] CC/QA Data for Item #03.
- [ ] Evaluation of Materials Testing Form #1324 (per CP 16).
- [ ] Buy America Certificate, for steel products.
- [ ] Roadway Surface Accomplishment Report (RSAR).

**Review notes:**

This is to certify that the review of the materials documentation indicates the documentation is complete and accurate.

**Sign:** ________________________________  **Title:** ________________________________  **Date:** ________________________________

**Distribution:**

- [ ] Resident Engineer (included with Project Final Documentation)
- [ ] Project Engineer
- [ ] Region Finals Engineer
- [ ] PHWA (Oversight Projects Only)
- [ ] Documentation Unit, Materials & Geotechnical Branch
## Final Acceptance Report for Federal-Aid Projects

<table>
<thead>
<tr>
<th>Project No.</th>
<th>Federal Oversight:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Yes ☐ No</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Project Code (SA#):</th>
<th>County:</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
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</tbody>
</table>

### Contractor’s Information

<table>
<thead>
<tr>
<th>Contractor’s Name:</th>
<th>Location:</th>
<th>Original Contract Amount:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

### Description of Improvement as Advertised:

### Inspection and Acceptance Details

<table>
<thead>
<tr>
<th>Inspection Date:</th>
<th>Acceptance Date:</th>
<th>Percent Time Elapsed:</th>
<th>Original Contract Time:</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ /</td>
<td>/ /</td>
<td>/</td>
<td>days</td>
</tr>
</tbody>
</table>

### Checklist

- ☐ The project has been completed in reasonably close conformity with the Contract Plans and Specifications including authorized changes.
- ☐ The Form FHWA-47 – Statement of Materials and Labor Used by Contractors on Highway Construction Involving Federal Funds has been submitted, if required.
- ☐ The Form 473 – Letter of Materials Certification has been completed.
- ☐ The project right-of-way appears to be free of unauthorized encroachments.
- ☐ The completed project has been reviewed for obvious safety deficiencies.

### Remarks:

### Signature Details

<table>
<thead>
<tr>
<th>Name:</th>
<th>Signature:</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>/ /</td>
</tr>
</tbody>
</table>

### Distribution:

- FHWA (original)
- CDOT Projects and Grants
- Records Center
- Fidals Engineer
- Resident Engineer
- Local Agency (if a Local Agency project)

---

Previous editions are obsolete and may not be used
CDOT Form 1313 – Consultant Monthly Invoice Cover Sheet
https://www.codot.gov/library/forms/word-forms/cdot1313.xls/view
COLORADO DEPARTMENT OF TRANSPORTATION
DBE BID CONDITIONS
ASSURANCE FOR NON-PROJECT SPECIFIC (NPS) CONSULTANT CONTRACTS

Instructions For Prime Consultant:
- An officer of the consultant must complete and submit an original copy of this form as part of the Commendation Section of your NPS contract Statement Of Interest (SOI).
- List the DBE firms you intend to use for your DBE participation.
- Attach a signed Letter of Acceptance and copy of DBE certificate from each DBE firm listed below.
- Retain a photocopy for your records.

(NOTE: See 49 CFR part 26.55, and the DBE Definitions and Requirements section of the contract, for further information concerning counting DBE participation toward the contract's DBE goal.)

<table>
<thead>
<tr>
<th>DBE SUBCONSULTANT</th>
<th>REQUIRED ATTACHMENTS</th>
<th>INTENDED ITEM(S) OF WORK</th>
<th>INTENDED % OF CONTRACT WORK</th>
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<tr>
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<td>Letter of Acceptance</td>
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Enter the total percentage of the NPS contract that is intended for DBE participation: Total = %

I understand that, if my company is awarded the contract, the commitments represented on this form are made terms and conditions of the NPS contract. If an item of work that is listed on this form as intended for DBE participation is included on a task order(s), I understand that the DBE firm(s) listed above must perform the stated item of work sufficient to meet the intended DBE percentage consistent with the DBE Definitions And Requirements section of the contract. In addition, if my company does not meet the intended DBE goal for this contract and is unable to document adequate good faith efforts, I understand that my company will receive a poor contract performance rating from CDOT, which will negatively impact the scoring of our Statements Of Interest (SOI) on future CDOT contracts.

I understand my obligation to abide by the policy stated above. I shall not discriminate on the basis of race, color, age, sex, national origin, or handicap in the selection process or the performance of contracts.

I declare under penalty in the second degree, and any other applicable state or federal laws, that the statements made in this document are true and complete to the best of my knowledge.

Company Name: [Company Name]

Date: [Date]

Company Officer Signature: [Signature]

Title: [Title]

CDOT Form 1330 1/05
COLORADO DEPARTMENT OF TRANSPORTATION
CERTIFICATE OF PROPOSED
DBE PARTICIPATION FOR
PROJECT SPECIFIC (PS)
CONSULTANT CONTRACTS

<table>
<thead>
<tr>
<th>CMS #:</th>
<th>Anticipated Location(s):</th>
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<th>Sheet: of</th>
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<tr>
<th>Contract DBE Goal:</th>
<th>%</th>
<th>Will Your DBE % Meet The Goal (box C)?</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>[ ] YES [ ] NO</td>
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</table>

Instructions For Prime Consultant:
- An officer of the consultant must complete and submit an original copy of this form as part of the Commencement Section of your PS contract Statement of Interest (SOI).
- Submit a separate CDOT Form #1331 for each proposed DBE.
- Attach a signed Letter of Acceptance and copy of DBE certificates from each DBE firm.
- Retain a photocopy for your records.

(NOTE: See 49 CFR part 26.55, and the DBE Definitions and Requirements section of the contract, for further information concerning counting DBE participation toward the contract’s DBE goal.)

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<tr>
<th>NAME OF DBE SUBCONSULTANT</th>
<th>ITEMS OF WORK TO BE PERFORMED BY DBE SUBCONSULTANT</th>
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REQUIRED ATTACHMENTS: [ ] Letter of Acceptance [ ] DBE certificate

A) What percentage of the overall contract is this proposed subcontract, supply/vendor contract, or service/broker contract?

NOTE: Calculate % based on actual subcontractor dollars and not prime contract prices. Only report % amounts that are eligible for counting toward the contract goal (See DBE Definitions and Requirements in contract).

A> %

B) What is the total percentage value of proposed DBE participation from prior sheets/forms?

B> %

C) What is the accumulative percentage value of the overall contract that is committed to DBEs?

C> %

I certify that:
- my company has accepted a proposal from the DBE subconsultant named above.
- my company has notified the proposed DBE subconsultant of the commitment % of work (Letter of Acceptance is attached).
- my company’s use of the proposed DBE subconsultant for the items of work listed above is a condition of the contract award.
- my company will not use a substitute DBE subconsultant for the proposed DBE subconsultant’s failure to perform under a fully executed subcontract, unless my company complies with the DBE Definitions and Requirements section of the contract.
- In addition, if my company does not meet the intended DBE goal for this contract and is unable to document adequate good faith efforts, I understand that my company will receive a poor contract performance rating from CDOT, which will negatively impact the scoring of our Statements Of Interest (SOI) on future CDOT contracts.

I declare under penalty of perjury in the second degree, and any other applicable state or federal laws, that the statements made on this document are true and complete to the best of my knowledge.

COMPANY NAME: [ ]

DATE: / /  

COMPANY OFFICER SIGNATURE: [ ]

TITLE: [ ]
CDOT Form 1413 – Bidders List
https://www.codot.gov/library/forms/cdot1413.xlsx/view

CDOT Form 1414 – Anticipated DBE Participation Plan
https://www.codot.gov/library/forms/cdot1414.xlsx/view

CDOT Form 1415 – Commitment Confirmation
https://www.codot.gov/library/forms/cdot1415.xlsx/view

CDOT Form 1416 – Good Faith Effort Report
https://www.codot.gov/library/forms/cdot1416.xlsx/view

CDOT Form 1418 – Monthly Payment Summary
https://www.codot.gov/library/forms/cdot1418.pdf/view

CDOT Form 1419 – DBE Participation Report
https://www.codot.gov/library/forms/cdot1419.xlsx/view

CDOT Form 1420 – DBE Participation Plan Modification
https://www.codot.gov/library/forms/cdot1420.xlsx/view

CDOT Form 1425 – Supplier List
https://www.codot.gov/library/forms/cdot-1425-supplier-list/view

FHWA Form 1273 - Required Contract Provisions, Federal-Aid Construction Contracts

FHWA Form 1391 – Annual EEO Report, FHWA
https://www.codot.gov/library/forms/fhwa-other-forms/form1391.xls/view

FHWA Form 1391 Instructions – Annual EEO Report, FHWA
https://www.codot.gov/library/forms/fhwa-other-forms/fhwa1391.pdf/view