Oregon Department of Transportation

CONTRACTOR'S REQUEST FOR SUBCONTRACT CONSENT

PROJECT NAME (SECTION)	CONTRACT NO.
PRIME CONTRACTOR'S NAME	F. A. PROJECT NO.

ESTIMATED STARTING DATE OF THIS SUBCONTRACT WORK	ESTIMATED COMPLETION DATE OF THIS SUBCONTRACT WORK
SUBCONTRACTOR NAME AND ADDRESS	SUB-SUBCONTRACTOR NAME AND ADDRESS
☐ DBE ☐ NON-DBE	☐ DBE ☐ NON-DBE
TELEPHONE / FEDERAL TAX ID NUMBER	TELEPHONE / FEDERAL TAX ID NUMBER

BID ITEM NO	DESCRIPTION OF WORK TO BE SUBLET	QUANTITY	UNIT	UNIT PRICE	SUBCONTRACT AMOUNT

☐ SEE ATTACHMENT FOR ADDITIONAL DESCRIPTIONS OR REMARKS

TOTAL AMOUNT OF THIS SUBCONTRACT

THE APPLICABLE DOCUMENTS CHECKED BELOW ARE A PART OF THIS SUBCONTRACT:

(ALL PROJECTS)

☐ CONTRACT MINIMUM WAGE SCHEDULE

(ALL FEDERAL AID PROJECTS)

☐ REQUIRED CONTRACT PROVISIONS - F.A. CONSTRUCTION CONTRACTS (FORM FHWA - 1273 INCLUDED IN SPECIAL PROVISIONS)

☐ DISADVANTAGED BUSINESS ENTERPRISE, DBE POLICY STATEMENT

(FEDERAL - AID PROJECTS WHEN SUBCONTRACTOR WILL RECEIVE OVER $10,000)

☐ ON-SITE WORK FORCE AFFIRMATIVE ACTION REQUIREMENTS FOR WOMEN AND MINORITIES SPECIAL PROVISIONS (PROJECTS WITH ON-THE-JOB TRAINING IF SUBCONTRACT INCLUDES ON-THE-JOB TRAINING)

☐ ON-THE-JOB TRAINING SPECIAL PROVISIONS

I REQUEST CONSENT TO THIS SUBCONTRACT, I CERTIFY THAT THE ORGANIZATION THAT WILL PERFORM THIS WORK IS EXPERIENCED AND THAT THE WORK WILL BE PERFORMED ACCORDING TO THE TERMS OF THE MAIN CONTRACT .

PRIME CONTRACTOR REPRESENTATIVE | TITLE | DATE

INFORMATION BELOW WILL BE COMPLETED BY THE DEPARTMENT OF TRANSPORTATION

DISTRIBUTION AFTER CONSENT

☐ PRIME CONTRACTOR _____

☐ FHWA (FED AID PROJECTS ONLY) _____

☐ REGION _____

☐ PROJECT MANAGER _____

☐ LIAISON _____

☐ OCR FIELD COORD. (FED AID PROJECTS ONLY)

CONSENT TO THIS SUBCONTRACT IS HEREBY GIVEN.

WITH THIS SUBCONTRACT NO._____ , THE TOTAL AMOUNT OF SUBCONTRACTED WORK IS

$ _____ OR _____ %

PROJECT MANAGER	DATE

SUBMIT ORIGINAL TO THE PROJECT MANAGER WITH A TRUE COPY OF THE SUBCONTRACT