

CERTIFICATION OF FINAL SUBCONSULTANT PAYMENT
(This form is also required when the Prime Consultant is a DBE)

Must be provided by the Prime Consultant following Final Payment to each Subconsultant or following contract completion and receipt of final payment from MaineDOT when the Prime Consultant is a DBE

Complete one form for each Subconsultant or when the Prime Consultant is a DBE

Prime Consultant Firm: _____ Contract #: _____ CSN#: _____

Project Identification Number (PIN): _____ Project Location: _____

Total Contract Amount: \$ _____ Consultant's Project #: _____

DBE is Prime: Yes No If yes, complete the following: Describe type of work performed on this project: _____:

Total amount paid under this Contract: \$ _____ % of contract

Subconsultant Firm's Name: _____ DBE Subconsultant: Yes No

Describe work performed by Subconsultant on this project: _____

Total amount paid to this Subconsultant: \$ _____ % of contract

Consultant submit to: Sherry Tompkins, EEO Officer
CIVIL RIGHTS OFFICE
Maine Department of Transportation
#16 State House Station
Augusta, Maine 04333-0016
Phone #: (207) 624-3066
Email: Sherry.Tompkins@maine.gov

In connection with the above referenced contract we the undersigned, jointly certify and attest the information contained herein to be true and accurate.

PRIME CONSULTANT FIRM NAME

SUBCONSULTANT FIRM NAME

By: _____
Name & Title Typed

By: _____
Name & Title Typed

(Date Signed)

(Date Signed)