

**WISCONSIN UNIFIED CERTIFICATION PROGRAM
DISADVANTAGED BUSINESS ENTERPRISE**

INTERSTATE DBE CERTIFICATION FORM



PROCEDURES FOR OUT-OF-STATE DBE CERTIFIED FIRMS SEEKING WISCONSIN CERTIFICATION

Required:

- (1) A completed form (*all information must be complete before an application is processed*)
- (2) Proof of current, valid DBE certification notice from firm's home state
 - * WisDOT may choose not to accept an interstate applicant's home state certification pursuant to 49 CFR 26.85(c). In this case, the interstate applicant must provide all of the information required by 49 C.F.R. §26.85(c)(1-4).
https://www.transportation.gov/sites/dot.gov/files/docs/Interstate_Certification_49_C.F.R._26.85_20140725_508.pdf

Process:

- (1) Register your firm with the Civil Rights and Compliance System (CRCS): <https://wisdot.ecomply.us/Registration/Registration.aspx>
- (2) Email your completed form and the certification letter from your home state to DBE_Alert@dot.wi.gov. You will receive an auto-reply notification confirming your email was received.
- (3) WisDOT will review the interstate applicant's form for completeness.
- (4) WisDOT will verify/confirm that the interstate applicant is certified in its home state.
- (5) WisDOT will notify the interstate applicant firm in writing upon certification in Wisconsin.
- (6) Approved firms are added to the Wisconsin UCP Directory: <https://wisconsindot.gov/Pages/doing-bus/civil-rights/dbe/certified-firms.aspx>

⊗ Do not complete this form if any of the following apply:

- You are not already DBE/ACDBE certified in your home state. (You must ask your state UCP about the certification process)
- Your home state is Wisconsin. (see the Eligibility Requirements and Application webpage)

BUSINESS PROFILE

LEGAL NAME OF FIRM		CONTACT PERSON & TITLE	
BUSINESS PHONE		EMAIL	
STREET ADDRESS OF FIRM			
CITY	STATE	ZIP CODE	
TYPE:			
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> LLC/LLP

Date Established: _____ Federal Employer Identification Number (FEIN): _____

NAICS code(s) in which your firm is DBE certified by your home agency: _____

For each NAICS code(s), clarify the specific type of work your firm performs:

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CERTIFICATIONS AND APPLICATIONS

For which U.S. DOT programs is your firm currently certified? DBE ACDBE

1. Home State/UCP Member: _____ Certification Date: _____
2. Other State/UCP Member: _____ Certification Date: _____
3. Other State/UCP Member: _____ Certification Date: _____

Indicate whether the firm or any persons listed in this application have experienced the following:

- a. Denied certification or decertified as a DBE, ACDBE, 8(a), SDB, MBE/WBE firm? Yes No
- b. Withdrawn an application for these programs, or been debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity? Yes No

If yes, explain the nature of the action. (If you appealed the decision to DOT or another agency, attach a copy of the decision)

OWNER INFORMATION

OWNER FULL NAME & TITLE		PHONE #	EMAIL
HOME ADDRESS			
GENDER	ETHNIC GROUP MEMBERSHIP	OWNERSHIP %	NUMBER OF YEARS AS OWNER

OWNER FULL NAME & TITLE		PHONE #	EMAIL
HOME ADDRESS			
GENDER	ETHNIC GROUP MEMBERSHIP	OWNERSHIP %	NUMBER OF YEARS AS OWNER

OWNER FULL NAME & TITLE		PHONE #	EMAIL
HOME ADDRESS			
GENDER	ETHNIC GROUP MEMBERSHIP	OWNERSHIP %	NUMBER OF YEARS AS OWNER

SIGNATURE OF DISADVANTAGED OWNER OF RECORD DATE