



# **SBE - SCHEDULE B**

## *AFFIDAVIT OF JOINT VENTURE*

### **JOINT VENTURE INFORMATION**

- a. **NAME OF JOINT VENTURE:** \_\_\_\_\_
- b. **ADDRESS:** \_\_\_\_\_
- c. **PHONE NUMBER:** (        )        -        \_\_\_\_\_

### **JOINT VENTURE PARTNERS INFORMATION** (attach additional pages if necessary)

a. **FIRM A**

- i. **FIRM NAME:** \_\_\_\_\_
- ii. **ADDRESS:** \_\_\_\_\_
- iii. **PHONE NUMBER:** (        )        -        \_\_\_\_\_
- iv. **SBE CERTIFIED:** YES    NO

b. **FIRM B**

- i. **FIRM NAME:** \_\_\_\_\_
- ii. **ADDRESS:** \_\_\_\_\_
- iii. **PHONE NUMBER:** (        )        -        \_\_\_\_\_
- iv. **SBE CERTIFIED:** YES    NO

c. **FIRM C**

- i. **FIRM NAME:** \_\_\_\_\_
- ii. **ADDRESS:** \_\_\_\_\_
- iii. **PHONE NUMBER:** (        )        -        \_\_\_\_\_
- iv. **SBE CERTIFIED:** YES    NO

### **ROLE(S) OF SBE FIRM(S)** (attach additional pages if necessary)

**Describe the role(s) of the SBE firm(s) in the joint venture:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Authority reserves the right to request additional information or documentation for the purpose of evaluation or clarification. The additional information or clarification must be provided within **five (5)** business days of request. Failure to respond may result in the bid being deemed non-responsive and may be excluded from further consideration.

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## ***AFFIDAVIT OF JOINT VENTURE***

### **JOINT VENTURE AGREEMENT**

- ☐ **Attach a copy of the joint venture agreement.**

In order to demonstrate the SBE venture(s)'s share in the ownership, control management responsibilities, risks and profits of the joint venture, the proposed joint venture agreement must include specific details related to: (1) the contributions of capital and equipment; (2) work items to be performed by the SBE's own forces, (3) work items to be performed under the supervision of the SBE venture(s); and (4) the commitment of management, supervisory and operative personnel employed by the SBE to be dedicated to the performance of the project.

### **SBE CERTIFICATION**

- ☐ **Attach a copy of the SBE firm(s) certification letter which shows the date of their next No Change Affidavit (NCA).**

### **JOINT VENTURE OWNERSHIP**

#### **a. AGREEMENTS**

- ☐ **Attach a copy of all written agreements between the firms concerning this project.**

#### **b. PERCENTAGE OF OWNERSHIP**

i. **SBE OWNERSHIP PERCENTAGE(S):** \_\_\_\_\_ %

ii. **NON-SBE OWNERSHIP PERCENTAGE(S):** \_\_\_\_\_ %

#### **c. PROFIT & LOSS**

i. **SBE OWNERSHIP PERCENTAGE(S):** \_\_\_\_\_ %

ii. **NON-SBE OWNERSHIP PERCENTAGE(S):** \_\_\_\_\_ %

#### **d. CAPITAL CONTRIBUTIONS (attach additional pages if necessary)**

Provide a detailed description of the initial and anticipated on-going financial contributions for each firm participating in this joint venture.

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#### **e. CONTRIBUTION OF EQUIPMENT (attach additional pages if necessary)**

Provide a detailed description of equipment to be provided by each firm participating in this joint venture. Description should include the type, quality, and quantities.

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## ***AFFIDAVIT OF JOINT VENTURE***

f. **OTHER APPLICABLE OWNERSHIP INTERESTS** (attach additional pages if necessary)

Provide a detailed description of any other applicable ownership interests including, but not limited to, ownership options and agreements which restrict or limit ownership and/or control.

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g. **CURRENT CTA CONTRACTS** (attach additional pages if necessary)

Provide a detailed description of ALL current CTA contracts and completed CTA contracts during the past two (2) years by any of the firms participating in this joint venture.

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### **CONTROL OF THE JOINT VENTURE**

Identify name and firm of the individuals who are, or will be, responsible for and have the authority to engage in the following management functions and policy decisions. Indicate any limitations to their authority such as dollar limits and co-signatory requirements.

a. **CHECK SIGNING:** \_\_\_\_\_

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b. **AUTHORITY TO ENTER INTO CONTRACTS:** \_\_\_\_\_

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c. **SIGNING, CO-SIGNING, AND/OR COLLATERALIZING LOANS:** \_\_\_\_\_

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d. **ACQUISITIONS OF LINE(S) OF CREDIT:** \_\_\_\_\_

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e. **ACQUISITION AND INDEMINIFICATION OF PAYMENT AND PERFORMANCE BONDS:** \_\_\_\_\_

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f. **NEGOTIATING AND SIGNING LABOR AGREEMENTS:** \_\_\_\_\_

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## ***AFFIDAVIT OF JOINT VENTURE***

### **MANAGEMENT OF CONTRACT PERFORMANCE (Identify name(s) and firm(s) only)**

i. **SUPERVISION OF FIELD OPERATIONS:** \_\_\_\_\_

ii. **MAJOR PURCHASES:** \_\_\_\_\_

iii. **ESTIMATING:** \_\_\_\_\_

iv. **ENGINEERING:** \_\_\_\_\_

### **FINANCIAL CONTROLS OF JOINT VENTURE**

a. **WHICH INDIVIDUAL(S) AND/OR FIRM(S) WILL BE RESPONSIBLE FOR KEEPING THE BOOKS OF ACCOUNTS?**

\_\_\_\_\_

b. **IDENTIFY THE “MANAGING PARTNER”, IF ANY, AND DESCRIBE THE MEANS AND MEASURE OF THEIR COMPENSATION:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c. **WHAT AUTHORITY DOES EACH FIRM PARTICIPATING IN THIS JOINT VENTURE HAVE TO COMMIT OR OBLIGATE THE OTHER TO INSURANCE AND BONDING COMPANIES, FINANCIAL INSTITUTIONS, SUPPLIES, SUBCONTRACTORS, AND/OR OTHER PARTIES PARTICIPATING IN THE PERFORMANCE OF THIS CONTRACT OR THE WORK OF THIS PROJECT?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### **PERSONNEL**

Identify the number of personnel (by trade and profession) from each firm needed to perform the joint venture’s work under this contract. Attach additional pages if necessary.

<b>TRADE</b>	<b>FIRM A:</b>	<b>FIRM B:</b>	<b>FIRM C:</b>
	_____	_____	_____

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## *AFFIDAVIT OF JOINT VENTURE*

PROFESSION	FIRM A: _____	FIRM B: _____	FIRM C: _____
PROFESSIONAL			
ADMINISTRATIVE			
UNSKILLED LABOR			

- a. **ARE ANY PROPOSED JOINT VENTURE EMPLOYEES CURRENTLY EMPLOYED BY ANY FIRM PARTICIPATING IN THIS JOINT VENTURE?** ☐ YES ☐ NO

**NO. EMPLOYED BY FIRM A:** \_\_\_\_\_

**NO. EMPLOYED BY FIRM B:** \_\_\_\_\_

**NO. EMPLOYED BY FIRM C:** \_\_\_\_\_

- b. **IDENTIFY NAME AND FIRM OF THE INDIVIDUAL WHO WILL BE RESPONSIBLE FOR JOINT VENTURE HIRING?**

\_\_\_\_\_

### **ADDITIONAL INFORMATION**

Please state any other material facts and additional information pertinent to the control and structure of this joint venture.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## *AFFIDAVIT OF JOINT VENTURE*

The undersigned affirm that the foregoing statements are correct and include all material information necessary to identify and explain the terms and operations of our joint venture and the intended participation of each firm in the undertaking. Further, the undersigned covenant and agree, under which work is done for CTA by the firm, to provide to CTA current, complete and accurate information regarding actual joint venture work and the payment therefor, and any proposed changes to any provision of the joint venture, or those of each firm relevant to the joint venture by authorized representatives of CTA or any of its funding agencies.

Any misrepresentation regarding the status of a person or an entity in order to qualify for SBE status may result in conviction for a Class 2 felony, including a penalty for one and a half times the value of the contract. Material misrepresentation on any matter will also be grounds for terminating any contract which may be awarded, and for initiating action under federal or state laws concerning false statements.

***NOTE: If, after filing this Schedule B and before the completion of the joint venture's work on the project, there is any change in the information submitted, the joint venture must inform the Director of Diversity Programs directly in writing or through the prime contractor if the joint venture is a subcontractor.***

The Contractor certifies to the best of its knowledge and belief that it, its principals and any subcontractors used in the performance of this contract, meet the Authority's requirements and have not violated any City or sister agency policy, codes, state, federal, or local laws, rules or regulations and have not been subject to any debarment, suspension or other disciplinary action by any government agency. Additionally, if at any time the contractor becomes aware of such information, it must immediately disclose it to the Authority.

Under penalties of perjury as provided by law, the undersigned certifies that the statements set forth in the foregoing DBE Schedule are true and correct.

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Signature of Owner, President, or Authorized Agent of Firm A

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Name of Firm A

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Printed Name of Owner, President, or Authorized Agent of Firm A

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Printed Title

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Date

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Phone

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Under penalties of perjury as provided by law, the undersigned certifies that the statements set forth in the foregoing DBE Schedule are true and correct.

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Signature of Owner, President, or Authorized Agent of Firm B

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Name of Firm B

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Printed Name of Owner, President, or Authorized Agent of Firm B

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Printed Title

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Date

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Phone

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Under penalties of perjury as provided by law, the undersigned certifies that the statements set forth in the foregoing DBE Schedule are true and correct.

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Signature of Owner, President, or Authorized Agent of Firm C

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Name of Firm C

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Printed Name of Owner, President, or Authorized Agent of Firm C

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Printed Title

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Date

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Phone

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