



**DISADVANTAGED BUSINESS ENTERPRISE (DBE)  
Joint Check Request**

TRACS No(s): \_\_\_\_\_ Project/Contract No.: \_\_\_\_\_  
Prime Name: \_\_\_\_\_ AZ UTRACS Registration No.: \_\_\_\_\_  
DBE Firm: \_\_\_\_\_ AZ UTRACS Registration No.: \_\_\_\_\_  
Material Supplier: \_\_\_\_\_ AZ UTRACS Registration No.: \_\_\_\_\_  
Requestor: \_\_\_\_\_ Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

The Agency will closely monitor the use of joint checks. To receive DBE credit for performing a commercially useful function with respect to obtaining materials and supplies, a DBE must "be responsible for negotiating price, determining quality and quantity, ordering the material and installing (where applicable) and paying for the material itself." Only when a DBE meets all of these requirements should credit be counted for the procurement of the items by the DBE. Please refer to the DBE Special Provisions Section 23 Joint Checks for qualifying conditions. If proper procedures are not followed or ADOT determines that the arrangement results in lack of independence for the DBE involved, no credit for the DBE's participation as it relates to the material cost will be counted toward the contract goal requirement.

I have read and understand the above information and have attached a copy of the Joint Check Agreement relating to this request. I hereby acknowledge that the information provided on this form is true and accurate.

_____	_____	_____
Authorized DBE Representative (print name)	Signature	Date
_____	_____	_____
Authorized Prime Representative (print name)	Signature	Date
_____	_____	_____
Authorized Material Supplier Representative (print name)	Signature	Date

FOR AGENCY/BECO USE ONLY Request is:	
Approved	Not Approved
Agency Representative:	_____
Signature:	_____
Date:	_____
BECO Representative:	_____
Signature:	_____
Date:	_____