



COUNTY OF ALLEGHENY
DEPARTMENT OF MWDDBE

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ALLEGHENY COUNTY

Minority, Women and Disadvantaged Business Enterprise

M/W/DBE Program

- County M/W/DBE Goals
- Certified M/W/DBEs
- Good Faith Efforts for Vendor Contracts for Support Services



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Contracting Goals for Certified Firms

13% MBE

and

2% WBE

participation on all contracts



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How do I know if a firm is certified?



A certified firm will be able to provide a document with current certification information, i.e., certifying agency, scope of services, etc.



Certification Databases

- Pennsylvania Unified Certification Program



(www.paucp.com)

- Others on a case-by-case basis



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Certification

Allegheny County certifies firms using 49 CFR Parts 26 and 23

- Allegheny County is a Certifying Participant under the Pennsylvania Unified Certification Program:



- Reciprocity with other Certifying Participants:
 - Pennsylvania Department of Transportation (PennDOT)
 - Port Authority of Allegheny County
 - Southeastern Pennsylvania Transportation Authority (SEPTA)
 - City of Philadelphia – Philadelphia International Airport



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Other Certifications

In addition to the PA UCP, Allegheny County may, on a case by case basis, accept M/W/DBE certifications issued by other entities such as:

- PA DGS – Small Diverse Businesses with MBE or WBE designations only
- Eastern Minority Supplier Development Council (EMSDC), formerly Western Pennsylvania Minority Supplier Development Council (WPMSSDC)
- Women Business Enterprise National Council (WBENC)

Please Note: self certifications are not accepted



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How do I show our effort to recruit?





Good Faith Effort

Example 1:

If bidding as a service provider, are there aspects of the contract that can be performed/supplied by a certified M/W/DBE:

*office/janitorial supplies

*transportation

*janitorial services

*repairs

*staffing

*accounting

*meals

*maintenance

*computer services

*etc.



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Good Faith Effort

Example 2:

If bidding as a supplier or broker, are there aspects of the contract that can be performed by a certified M/W/DBE:

- *delivery

- *staffing

- *assembly or procurement products

- *office supplies

- *etc.



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Good Faith Effort

If there are areas of the contract for which M/W/DBEs can be utilized, indicate on the M/W/DBE Participation Statement those **certified** M/W/DBEs you have solicited in an effort to meet the contract participation goals.

If you are not successful in securing M/W/DBE participation to fully meet the 13% MBE and 2% WBE goals after a "Good Faith Effort" has been made, an M/W/DBE participation waiver must be requested.



Good Faith Effort

Please document all M/W/DBE participation, even if you fall short of the 13% MBE and 2% WBE contract goals.

Note: A firm certified as both an MBE and a WBE may be used toward the MBE OR WBE goal but not both.

Should an M/W/DBE participation shortfall occur, a waiver must be requested for the participation not met.



M/W/DBE Participation Statement

Both the M/W/DBE Participation Statement and the Provider Contact Information form must be completed and submitted with EACH set of contract documents.

The Waiver Request form ONLY needs to be submitted if it is necessary to request an M/W/DBE participation waiver.



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Proposals

BIDDER/PROPOSER CONTACT INFORMATION

This form must be completed and submitted with your bid or proposal.

SPEC NUMBER:

SPEC TITLE:

NAME OF BIDDER
OR PROPOSER:

MAILING ADDRESS:

WEBSITE:

*CONTACT PERSON:

CONTACT PHONE:

CONTACT FAX:

CONTACT EMAIL:

* Please list the individual at your company who deals with M/W/DBE concerns.



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Annual Renewals

2.4 CONTRACTOR CONTACT INFORMATION

This form must be completed and submitted with your pre-contract documents

MPER CONTRACT ID: _____

START DATE: _____

END DATE: _____

NAME OF CONTRACTOR: _____

MAILING ADDRESS: _____

WEBSITE: _____

*CONTACT PERSON: _____

CONTACT PHONE: _____

CONTACT FAX: _____

CONTACT EMAIL: _____

* Please list the individual at your company who deals with M/W/DBE concerns.



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Instructions for Completing the Provider Contact Information Form

SPEC NUMBER: leave blank

SPEC TITLE: list the title of the RFP

NAME OF BIDDER OR PROPOSER: list your or your organization's name

MAILING ADDRESS: list your or your organization's complete mailing address

WEBSITE: list your or your organization's web address (if applicable)

CONTACT PERSON: list the name of the individual at your organization who deals with M/W/DBE concerns

CONTACT PHONE: list the phone number of your organization's contact person

CONTACT FAX: list the fax number of your organization (if applicable)

CONTACT EMAIL: list the email address of your organization's contact person



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Minority, Women and Disadvantaged Business Enterprise

Proposals

ALLEGHENY COUNTY M/W/DBE PARTICIPATION STATEMENT

This form must be completed and submitted with your bid or proposal.

IFB or RFP Number:	Name of Prime Bidder or Proposer:	Contact Person:
Address:	Phone Number:	Email:
Tax ID #:	Is Your Firm M/W/DBE Certified? <input type="checkbox"/> Yes <input type="checkbox"/> No Certification Type: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE Certifying Entity:	

Attach a copy of your certification if you are counting your company's participation towards the M/W/DBE goals for this contract.

List below all M/W/DBEs that were solicited whether or not commitment was obtained.

M/W/DBE Sub Vendor Firm Name:		Tax ID #:	Contact Person:
Address:		Phone Number:	Email:
Certification Type: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE Certifying Entity:		Types of Subcontract Work or Materials:	
Date Solicited:	Solicitation Method: <input type="checkbox"/> Phone <input type="checkbox"/> Email	Quote Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	Commitment Made: <input type="checkbox"/> Yes – Date: _____ <input type="checkbox"/> No
Give Reason(s) If No Commitment Made:		Amount Committed: \$ Amount: \$ _____ % Of Total Bid: _____	

M/W/DBE Sub Vendor Firm Name:		Tax ID #:	Contact Person:
Address:		Phone Number:	Email:
Certification Type: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE Certifying Entity:		Types of Subcontract Work or Materials:	
Date Solicited:	Solicitation Method: <input type="checkbox"/> Phone <input type="checkbox"/> Email	Quote Received: <input type="checkbox"/> Yes <input type="checkbox"/> No	Commitment Made: <input type="checkbox"/> Yes – Date: _____ <input type="checkbox"/> No
Give Reason(s) If No Commitment Made:		Amount Committed: \$ Amount: \$ _____ % Of Total Bid: _____	

Attach a copy of the certification of each M/W/DBE with whom a commitment has been made.

Prepared by: _____ Title: _____

Signature: _____ Date: _____



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Minority, Women and Disadvantaged Business Enterprise

M/W/DBE Participation Statement for Annual Renewals

(The form is the same as the one for RFPs with the exception of the top portion as seen below.)

2.3 ALLEGHENY COUNTY M/W/DBE PARTICIPATION STATEMENT

This form must be completed and submitted with your pre-contract documents.

MPER CONTRACT ID:	Name of Contractor:	Contact Person:
Address:	Phone Number:	Email:
Tax ID #:	Is Your Firm M/W/DBE Certified? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Certification Type: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE Certifying Entity:	
HUD PROJECT NAME AND/OR NUMBER:		



Instructions for Completing the M/W/DBE Participation Statement

Top Portion:

- IFB or RFP Number: leave blank
- Name of Prime Bidder or Proposer: list your or your organization's name
- Contact Person: list the name of the individual at your organization who deals with M/W/DBE concerns
- Address: list your or your organization's complete mailing address
- Phone Number: list the phone number of your organization's contact person
- Email: list the email address of your organization's contact person
- Tax ID#: list your or your organization's tax ID number
- Is Your Firm M/W/DBE Certified?: check Yes or No
- Certification Type: indicate whether your firm is certified as an MBE, WBE or DBE
- Certification Entity: list the entity that certified your firm



Instructions for Completing the M/W/DBE Participation Statement

For Each M/W/DBE:

- M/W/DBE Sub Vendor Firm Name: list the name of the M/W/DBE
- Tax ID#: list the tax ID number of the M/W/DBE
- Contact Person: list the contact person for the M/W/DBE
- Address: list the complete mailing address of the M/W/DBE
- Phone Number: list the phone number of the M/W/DBE's contact person
- Email: list the email address of the M/W/DBE's contact person
- Certification Type: indicate whether the M/W/DBE is certified as an MBE, WBE or DBE
- Certifying Entity: list the entity that certified the M/W/DBE
- Types of Subcontract Work or Materials: list the scope of work for which the M/W/DBE was solicited
- Date Solicited: list the date you solicited the M/W/DBE
- Solicitation Method: indicate whether you solicited the M/W/DBE by phone or email
- Quote Received: indicate whether you received a quote from the M/W/DBE
- Commitment Made: if a commitment was made, check YES and fill in the date; if not, check NO
- Amount Committed:
 - list the estimated dollar amount of the commitment with the M/W/DBE for the **DHS contract**
 - list the percentage of the commitment with the M/W/DBE (**commitment/total DHS contract x 100**)



Instructions for Completing the M/W/DBE Participation Statement

Bottom Portion:

- **Prepared By:** list the name of the individual who filled out the Participation Statement
- **Title:** list the job title of the individual who filled out the Participation Statement
- **Signature:** signature of the individual who filled out the Participation Statement
- **Date:** list the date that the Participation Statement was filled out



ALLEGHENY COUNTY

Minority, Women and Disadvantaged Business Enterprise

ALLEGHENY COUNTY M/W/DBE PARTICIPATION WAIVER REQUEST FORM



If you have not made a good faith effort you cannot request a waiver.

If a good faith effort to utilize M/W/DBE contractors and/or suppliers has been performed and you have not completely met the M/W/DBE goals of 13% MBE and 2% WBE, the following is required in order to request an M/W/DBE participation waiver:

1. **Detailed proof of your good faith effort:**
Please attach copies of your database search results and any other documentation illustrating that you have made a good faith effort to fulfill the County's goals.

2. **A brief description of what your business does:**

3. **Is there any inventory or supplies necessary for the completion of this project? Please answer yes or no. If yes, please provide a list of those items:**

4. **An active company supplier/subcontractor diversity policy:**
Please attach a copy of your company's diversity policy that addresses good faith efforts to include M/W/DBEs on company letterhead. This request is for business diversity and not an Equal Employment Opportunity (EEO) policy that addresses workforce or employment.

5. **A brief explanation as to why an M/W/DBE participation waiver is being requested:**

Prepared by: _____ Title: _____

Signature: _____ Date: _____



Instructions for Completing the Waiver Request Form

1. Detailed proof of your good faith effort: please attach copies of your database search results and any other documentation illustrating that you have made a good faith effort to fulfill the County's goals
2. A brief description of what your business does
3. Is there any inventory or supplies necessary for the completion of this project? Please answer yes or no. If yes, please provide a list of those items.
4. An active company supplier/subcontractor diversity policy: please attach a copy of your company's diversity policy that addresses good faith efforts to include M/W/DBEs on company letterhead. This request is for business diversity and not an Equal Employment Opportunity (EEO) policy that addresses workforce or employment.
5. A brief explanation as to why an M/W/DBE participation waiver is being requested

Prepared By: list the name of the individual who filled out the Waiver Request form

Title: list the job title of the individual who filled out the Waiver Request form

Signature: signature of the individual who filled out the Waiver Request form

Date: list the date that the Waiver Request Form was filled out



Sample Diversity Policy

It is the policy of XYZ Company to support the maximum practical utilization of certified M/W/DBEs by promoting diversity throughout our business practice. One way XYZ Company accomplishes this is by making a good faith effort to solicit the services of certified M/W/DBEs throughout our normal business practice, allowing maximum opportunity for M/W/DBEs to participate as subcontractors and/or suppliers.

Good faith efforts are made by searching M/W/DBE databases, contacting M/W/DBEs for relevant scopes of work and requesting quotes for services and/or supplies. Databases regularly searched are www.paucp.com and www.dgs.internet.state.pa.us/SmallDiverseBusinessSearch/. XYZ Company also partners with the following M/W/DBE organizations for assistance in locating M/W/DBEs: Agency 1, Agency 2, Agency 3.

To demonstrate XYZ Company's commitment to include certified M/W/DBEs in its business process, M/W/DBEs we have worked with or are currently working with include:

<u>M/W/DBE 1:</u>	<u>Scope of Work</u>
<u>M/W/DBE 2:</u>	<u>Scope of Work</u>
<u>M/W/DBE 3:</u>	<u>Scope of Work</u>



Things to Know

- **Providers are not required to be certified but must make a good faith effort to meet both the MBE and WBE Goal.**

- **If a provider is certified as an MBE or WBE, they may utilize themselves to fulfill a goal that corresponds with their certification but must make a good faith effort to meet the other goal.**



Things to Know Continued

- **A firm certified as both an MBE and WBE may not be used to fulfill both goals**
- **All providers are required to make a good faith effort to meet the goals and complete the M/W/DBE documentation even if the provider is an individual.**



Things to Know Continued

- **If M/W/DBEs are contacted and their pricing is excessively higher than pricing received from non-M/W/DBE, you must submit the cost comparisons.**
- **If proposals include personnel only, no inventory or suppliers, ALL M/W/DBE documents must be completed and the waiver request will be evaluated for the possible granting of an M/W/DBE participation waiver.**



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QUESTIONS





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For More Information

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