Vichec	Prime Contractor's Subagreement Certification	STATE REVOLVING FUND
SRF Project Number		
Project Name	Divisio	on
Contractor's Name and	d Address	
Contractor's Telephone		
CERTIFICATION		
I, as the authorized repr	resentative of the contracting firm named above, certify	y that we:
<u>steps taken</u> to ut prior to entering EPA Form 5700	act a portion of this project <u>and will submit to SCDHEC</u> tilize minority and women's businesses as required by into any subagreement. We agree to submit MBE/WBE 0-52A or equivalent). (<i>Please fill out page 2 of this fo</i> ad/or any uncommitted work.)	Executive Order 11246 utilization reports (U.S.
a later date, to s the positive ste Executive Order	Subcontract any portion of this project. We understand ubcontract a portion of this project, we will be required ps taken to utilize minority and women-owned busin 11246 prior to entering into any subagreement. Failur d with that subagreement declared ineligible for SRF a	d to provide evidence of nesses as required by re to do so may result in
Printed Name and Title of	Contractor's Representative	
Signature of Contractor's I	Representative	Date
State Revo	Submit by email to DHEC project manager or by mail to: olving Fund Division, S.C. DHEC, 2600 Bull Street, Columb	
For SRF equivalency p complete project const contractor's representa intentions. The represer	TIONS / REVIEW & RETENTION: <i>trojects</i> , prime contractors certify whether they plan to ruction using the <i>Prime Contractor's Subagreemen</i> tive will enter the requested project information an intative will sign the certification and fill out page 2 with <i>C 3591 must be submitted any time the information or</i>	<i>t Certification</i> . The prime ad indicate subcontracting n requested information as
The form will be kept in	use this form to document the subcontracting intention n the DBE/EEO file for the named project and will b disbursement to the project's Sponsor - per Retention	e retained for three years

List all tentative subcontractors/vendors you plan to use for this project, identify any that are suppliers and indicate whether the subcontractor/vendor is a minority business enterprise (MBE) or a womenowned business enterprise (WBE). If more space is needed, attach additional sheets using the same format.

1. Type of Work	
Subcontractor's Nam	e and Address
Contact Person	Telephone Number
	Duration of Subcontract
□ MBE □ WBE	
2. Type of Work	
Subcontractor's Nam	e and Address
Contact Person	Telephone Number
Subcontract Amount	Duration of Subcontract
□ MBE □ WBE	☐ Supplier
3. Type of Work	
Subcontractor's Nam	e and Address
	Telephone Number
	Duration of Subcontract
	☐ Supplier
4. Type of Work	
Subcontractor's Nam	e and Address
	Telephone Number
	Duration of Subcontract
	☐ Supplier
Subcontractor's Nam	e and Address
Contact Person	Telephone Number
	Duration of Subcontract
□ MBE □ WBE	
ist of subcontract work	yet to be committed with approximate price and duration of subcontract:
	<u></u>
o	
State Dave	Submit by email to DHEC project manager or by mail to: ving Fund Division, S.C. DHEC, 2600 Bull Street, Columbia, SC 29201