



REQUEST FOR SBE OR M/WBE SUBSTITUTION/MODIFICATION/REMOVAL

INSTRUCTIONS FOR SECTIONS 1 TO 3: PRIME CONTRACTOR COMPLETES ALL SECTIONS AS APPLICABLE AND SUBMITS TO DEPARTMENT PROJECT MANAGER AND OEBO OFFICE FOR APPROVAL.

Section 1: Prime Contractor/Consultant Information

Name of Prime	Contact Person	Phone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Project Name	Bid/Proposal/Project No.	% SBE Participation- original
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Original Contract Amount	New Contract Amount	% SBE Participation - new
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Section 2: SBE or M/WBE Modification*

Original Subcontractor/Sub consultant	% of Participation
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Contact Person	Phone
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
New Subcontractor/ Sub consultant	% of Participation
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Amendment/Change Order/Contingency Amount (if Applicable)	<input style="width: 95%;" type="text"/>

Section 3: SBE or M/WBE Removal or Substitution*

Please attach completed Palm Beach County S/M/WBE Subcontractor/consultant's Performance Report and Good Faith Effort Form. *A separate and properly executed Schedule 2 (Letter of Intent) is required to support any changes submitted on this form, when applicable.

Approvals:

Dept. Project Manager		Signature:		Date:	
OEBO Representative		Signature:		Date:	