



Small Business Division

200 2nd Street, 2nd Floor
West Palm Beach, FL 33401
Tel. (561) 822-1275
Fax (561) 822-1279

Small Business Program Good Faith Effort Report

Instructions: Please complete this form if you are unable to meet the established Small Business Goal.

Bidder/Proposer's Name: _____

Address: _____

Telephone: _____ Sealed Bid or RFP No. _____

Bid/RFP Title: _____

Please submit an **original** form and attachments **with your bid package**, and mail a **copy** of the form and **attachments to the Small Business Division at the above address.**

In accordance with the Small Business Ordinance, contractors submitting bids or proposals to provide goods, services and construction to the City of West Palm Beach shall attempt to comply with the small business participation goal. In the event the goal is not achieved, the contractor must include with their bid evidence of good faith effort to achieve the goal. The City of West Palm Beach shall consider the following in determining good faith effort:

1. Attendance at the pre-bid conference, if held: Yes No

2. Was a list of Certified Small Businesses obtained? Yes No

If not, please provide the reason. _____

3. How did you contact the Certified Small Businesses? (Attach documentation)

Telephone Email Fax Other: _____

4. List the types of work you attempted to subcontract:

5. Did you provide assistance or information to the Certified Small Businesses on how to access/review project plans, specifications, Sealed Bid, or Request for Proposals? Yes No

If yes, please explain what assistance or information was provided.

6. List any Certified Small Businesses that submitted a quote for any type of work related to this project. If applicable, please explain why they will not be used on this project.

7. Please explain if bonding or insurance was an issue in rejecting a quote from a Certified Small Business.

8. Have you as a contractor utilized Certified Small Business subcontractors on other (Public and Private Sector) contracts within the last six months? Yes No
Please provide any documentation that can support your answer.

For Informational Use Only:

Did you use the services of small business associations (community organizations, contractor's business groups), local, state and federal small business assistance offices; or other organizations that provide assistance in the recruitment and placement of small businesses? Yes No
If yes, please explain which organizations and provide written documentation.

Bidder/Proposer's Name: _____
(Please Print)

STATE OF FLORIDA }
 } SS:
COUNTY OF PALM BEACH }

AFFIDAVIT

The undersigned person hereby declares that the statements contained in this *Good Faith Effort Report* and all attachments which have been provided are true, accurate and complete, and include all material information necessary to support a finding of a good faith effort to achieve the Small Business Goal.

The undersigned gives permission to any person and/or organization contacted by the City for the purpose of verifying the information contained in this *Good Faith Effort Report* to provide such information either orally or in writing.

Firm Name: _____

Signature: _____

Print Name: _____

Title: _____

AFFIRMED AND SUBSCRIBED before me this ____ day of _____, 20____,

by _____ who:

_____ is personally known to me

OR

_____ produced the following identification: _____

Notary Public – State of Florida

[stamp or print name:]

My commission expires: _____