State of Wisconsin Department of Natural Resources Bureau of Community Financial Assistance 101 S. Webster St., PO Box 7921 Madison WI 53707-7921 Phone No. (608) 266-7555 FAX (608) 267-0496 Website: dnr.wi.gov/Aid/EIF.html

Form 8700-294A (R 03/17)

NOTE: This form is authorized by chs. NR 162 and NR 166, Wis. Adm. Code. The information requested on this form is necessary for the review of solicitation of Disadvantaged Business Enterprises (DBEs). This form is intended to be a tool to assist those seeking funding from the EIF (Clean Water Fund Program or Safe Drinking Water Loan Program) to meet the DBE requirements of EIF programs. Submitting this form to the Department is optional. Applicants may submit the form as the required documentation of solicitation efforts or provide the information in some other format. Personally identifiable information provided on this form will only be used in determining whether or not DBE requirements are met. Failure to complete or submit this form has no impact on the applicant. For complete information regarding DBE requirements, see the Contract Packet for DBE Compliance on DNR's website at http://dnr.wi.gov/Aid/documents/EIF/Guide/DBE.html.

Contact DBEs on a Unified Certification Program (UCP) List to solicit bids from DBE firms (e.g., firms registered in the WisDOT UCP,

http://wisconsindot.gov/pages/doing-bus/civil-rights/dbe/certified-firms.aspx). The individual that makes the contacts should document all contacts. Contact at least 2 minority business enterprises (MBEs) and 2 women's business enterprises (WBEs); additional contacts may be to any type of DBE. Only contacts made to DBEs on DOT's UCP list can be considered in determining whether a good faith effort was made to solicit DBEs.

| Project Information | | | | | |
|---|-------------------------|--|-------------------------|--|--|
| Name of Municipality Name of Prime Contractor | | EIF Project Number Information Prepared By (Name and Phone or E-Mail Address) | | | |
| | | | | | |
| Information Needed For Review | Contact 1 | Contact 2 | Contact 3 | | |
| a. Name of Firm Contacted | | | | | |
| b. Contact's Phone Number or E-Mail | | | | | |
| c. Firm Type | ○ MBE ○ WBE ○ Other DBE | | ◯ MBE ◯ WBE ◯ Other DBE | | |
| d. On DOT UCP list? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| e. Date Contacted | | | | | |
| f. Result of contact | | | | | |
| g. Bid received? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| h. If bid received and rejected, why rejected? | | | | | |
| i. Utilizing this firm? (If yes, more on p. 4)* | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |

Environmental Improvement Fund (EIF) DBE Contacts Worksheet Form 8700-294A (R 03/17) Page 2 of 4

| Information Needed For Review | Contact 4 | Contact 5 | Contact 6 | | |
|---|---|---|---|--|--|
| a. Name of Firm Contacted | | | | | |
| b. Contact's Phone Number or E-Mail | | | | | |
| c. Firm Type | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | | |
| d. On DOT UCP list? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| e. Date Contacted | | | | | |
| f. Result of contact | | | | | |
| g. Bid received? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| h. If bid received and rejected, why rejected? | | | | | |
| i. Utilizing this firm? (If yes, more on p. 4)* | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| | | | | | |
| Information Needed For Review | Contact 7 | Contact 8 | Contact 9 | | |
| Information Needed For Review a. Name of Firm Contacted | Contact 7 | Contact 8 | Contact 9 | | |
| Needed For Review | Contact 7 | Contact 8 | Contact 9 | | |
| a. Name of Firm Contacted | Contact 7 | Contact 8 | Contact 9 | | |
| Needed For Review a. Name of Firm Contacted b. Contact's Phone Number or E-Mail | | | | | |
| Needed For Review a. Name of Firm Contacted b. Contact's Phone Number or E-Mail c. Firm Type | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | | |
| Needed For Review a. Name of Firm Contacted b. Contact's Phone Number or E-Mail c. Firm Type d. On DOT UCP list? | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | | |
| Needed For Review a. Name of Firm Contacted b. Contact's Phone Number or E-Mail c. Firm Type d. On DOT UCP list? e. Date Contacted | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | | |
| Needed For Review a. Name of Firm Contacted b. Contact's Phone Number or E-Mail c. Firm Type d. On DOT UCP list? e. Date Contacted f. Result of contact | ○ MBE ○ WBE ○ Other DBE ○ Yes ○ No | MBE ○ WBE ○ Other DBE Yes ○ No | ○ MBE ○ WBE ○ Other DBE ○ Yes ○ No | | |

Environmental Improvement Fund (EIF) DBE Contacts Worksheet Form 8700-294A (R 03/17) Page 3 of 4

| Information Needed For Review | Contact 10 | Contact 11 | Contact 12 | | |
|---|-------------------------|-------------------------|-------------------------|--|--|
| a. Name of Firm Contacted | | | | | |
| b. Contact's Phone Number or E-Mail | | | | | |
| c. Firm Type | ○ MBE ○ WBE ○ Other DBE | | ◯ MBE ◯ WBE ◯ Other DBE | | |
| d. On DOT UCP list? | ◯ Yes ◯ No | ○ Yes ○ No | | | |
| e. Date Contacted | | | | | |
| f. Result of contact | | | | | |
| g. Bid received? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| h. If bid received and rejected, why rejected? | | | | | |
| i. Utilizing this firm? (If yes, more on p. 4)* | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| Information Needed For Review | Contact 13 | Contact 14 | Contact 15 | | |
| a. Name of Firm Contacted | | | | | |
| b. Contact's Phone Number or E-Mail | | | | | |
| c. Firm Type | ○ MBE ○ WBE ○ Other DBE | ○ MBE ○ WBE ○ Other DBE | ◯ MBE ◯ WBE ◯ Other DBE | | |
| d. On DOT UCP list? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| e. Date Contacted | | | | | |
| f. Result of contact | | | | | |
| g. Bid received? | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |
| h. If bid received and rejected, why rejected? | | | | | |
| i. Utilizing this firm? (If yes, more on p. 4)* | ◯ Yes ◯ No | ◯ Yes ◯ No | ◯ Yes ◯ No | | |

Environmental Improvement Fund (EIF) DBE Contacts Worksheet Form 8700-294A (R 03/17) Page 4 of 4

| Information Needed For Review | Information Needed For Review Contact 16 | | Contact 17 | | Contact 18 | | |
|---|---|-------------------------|-----------------|-------------------------|---------------|-------------------------|--|
| a. Name of Firm Contacted | | | | | | | |
| b. Contact's Phone Number or E-Mail | | | | | | | |
| c. Firm Type | ◯ MBE ◯ WBE ◯ Other | ◯ MBE ◯ WBE ◯ Other DBE | | ○ MBE ○ WBE ○ Other DBE | | ◯ MBE ◯ WBE ◯ Other DBE | |
| d. On DOT UCP list? | ◯ Yes ◯ No | ◯ Yes ◯ No | | ◯ Yes ◯ No | | ◯ Yes ◯ No | |
| e. Date Contacted | | | | | | | |
| f. Result of contact | | | | | | | |
| g. Bid received? | ◯ Yes ◯ No | | ◯ Yes ◯ No | | ◯ Yes ◯ No | | |
| h. If bid received and rejected, why rejected | ed? | | | | | | |
| i. Utilizing this firm? (If yes, more on p. | 4)* 🔿 Yes 🔿 No | | ◯ Yes ◯ No | | ◯ Yes ◯ No | | |
| Information on Utilized Firms | | 1 | | | | | |
| Business Name | Street Address | Ci | ity, State, Zip | Type of Produ | ct or Service | Subcontract Amount | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |