



ARCHITECTURE & ENGINEERING UTILIZATION REPORT

 MONTHLY REPORT (PARTS 1A & 1B)

 FINAL REPORT (PARTS 1A, 2 & 3)

 CBE MEASURE

PARTS 1A & 1B This part is to be completed by the Prime Consultant and forwarded to the User Department

This report is required by Miami Dade County. Failure to comply may result in MDC commencing proceedings to impose sanctions on the successful bidder, in addition to pursuing any other available legal remedy. Sanctions may include the suspension of any payment or part thereof, termination or cancellation of the contract, and the denial to participate in any further contracts awarded by MDC. Pursuant to Florida Statutes (F.S.) 837.06, whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of their official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in F.S. 755.082, F.S. 755.083 and F.S. 755.084.

A	REPORTING PERIOD	CONTRACT NAME			CONTRACT NO.	
	FROM:	PROJECT LOCATION			START DATE	
	TO:	USER DEPARTMENT				
	CBE MEASURE:	DEPT. PROJ. MGR/CONTACT PERSON		PHONE	FACSIMILE	
PRIME CONSULTANT		CONTRACT AWARD			CHANGE ORDER MODIFICATION AMOUNT	ADDITIONAL SERVICES AMOUNT
		DATE	AGREEMENT AMOUNT			
NAME OF FIRM						
ADDRESS		SCHEDULED COMPLETION DATE			PERCENTAGE OF CONTRACT COMPLETED	
TELEPHONE		FACSIMILE	EMAIL	PROJECT MANAGER (PRIME CONTR.)		
AMOUNT REQUISITIONED THIS PERIOD		\$	DATE REQUISITIONED		DID LAST PMT EQUAL REQUISITION AMOUNT?	
TOTAL AMOUNT REQUISITIONED TO DATE		\$			YES <input type="checkbox"/>	
LAST PAYMENT BY MIAMI DADE COUNTY (MDC)		\$	DATE OF LAST PMT BY MDC		NO <input type="checkbox"/>	
TOTAL AMOUNT PAID BY MDC		\$	WAS LAST PMT WITHIN 14 DAYS OF PRIME REQUISITION?		IF NO PLEASE EXPLAIN	
					YES <input type="checkbox"/>	
					NO <input type="checkbox"/>	

SUBCONSULTANTS' DATA												
NAME OF SUBCONSULTANT	GOAL % (IF APPLICABLE)	CBE MAKE-UP	DESCRIPTION OF WORK	SIGNED AGREEMENT	AGREEMENT AMOUNT	AMOUNT SUB REQUISITIONED THIS PERIOD	DATE OF REQUISITION (FROM SUB)	AMT REQUISITIONED TO DATE	LAST PAYMENT AMT	LAST PAYMENT DATE	Was last pmt. Within 2 days of MDC payment to Prime? Y/N	AMT PAID TO DATE
		✓		✓								

_____	_____	_____	_____
AUTHORIZED SIGNATURE OF PRIME CONSULTANT	PRINT NAME	TITLE	DATE

Department of Small Business Development Community Business Enterprise (CBE) Program Instructions for the Monthly Utilization Report (MUR)

Monthly Report (PARTS 1A & 1B): Mark if applicable

Final Report (PARTS 1A, 2 & 3): Mark if applicable (Final MUR should be submitted upon the completion and final payment of project)

CBE Measure: Mark if applicable

Reporting Period: The period for which the MUR payment information is being submitted. The MUR is due on the 10th of every month; as a result, the reporting period will be for the prior month.

Contract Name: The assigned project name as it is identified in the contract documents

Contract NO.: The assigned project number as it is identified in the contract documents

Project Location: The address or descriptive location of project work site

Start Date: Date of work commencement

User Department: e.g. GSA, Parks, etc.

DEPT. PROJ. MGR/CONTACT PERSON: Contracting Department project manager or contact person name

Phone: Project manager or contact person telephone number

Facsimile: Project manager or contact person fax number

Prime Consultant: Name of Awardee, address and telephone, fax, email and project manager name

Contract Award: Date of contract award and agreement amount

Change Order Modification Amount: The total amount of all approved change orders thru the listed reporting period.

Additional Services Amount: Any dollar amount added for additional services

Scheduled Completion Date: The anticipated date the contract will be completed

Percentage of Contract Completed: The proportion of work that has been completed for this project stated as a percentage

Amount Requisitioned this Period: The dollar amount billed/requisitioned to MDC for work performed during the listed reporting period

Department of Small Business Development Community Business Enterprise (CBE) Program Instructions for the Monthly Utilization Report (MUR)

Date Requisitioned: The date the requisitioned amount was submitted to MDC

Did last MDC Payment Equal Requisition Amount: If requisition was paid in full check "YES"; if requisition amount was not paid in full check "NO" and explain reasons for payment difference in space provided

Total Amount Requisitioned to Date: The total dollar amount requisitioned from project inception through the reporting period

Last Payment by Miami Dade County (MDC): The last dollar amount paid to Prime by MDC for reporting period

Date of Last Payment by MDC: The date of the last payment by MDC for the reporting period

Was last MDC payment within 14 days of Prime's requisition: Check YES if payment by MDC was made within 14 days of prime's requisition; Check NO if payment by MDC was not made within 14 days of prime's **undisputed** requisition.

Total Amount Paid by MDC: The total amount paid to date by MDC as of the reporting period

Name of Sub-consultant: The legal name of all sub-consultant(s) meeting a goal listed on the Prime's Letter of Agreement (s) approved by SBD.

Goal % (If Applicable): The goal percentage that is being fulfilled by the CBE sub-consultant. If the percentages differ from the percentage listed on the SBD approved LOI, a new LOI must be submitted to SBD for review and approval.

CBE Make-up: Check if listed firm is meeting a CBE make up dollar amount.

Description of Work: A brief description of the scope of work to be performed by CBE sub-consultant(s). If the scope of work is different from the percentage listed on the SBD approved LOI, a new LOI must be submitted to SBD for review and approval.

Signed Agreement: Check if Prime has an executed agreement with CSBE sub-consultant listed.

Agreement Amount: The dollar value of the executed agreement between the prime consultant and CBE sub consultant. If the agreement amount is different from the value of the SBD approved LOI, a new LOI must be submitted to SBD for review and approval.

Amount SUB Requisitioned this Period: Actual dollar amount requisitioned by the CBE sub-consultant during the listed reporting period

Department of Small Business Development Community Business Enterprise (CBE) Program Instructions for the Monthly Utilization Report (MUR)

Date of Requisition (from Sub): The date of the requisition submitted by CBE sub consultant for payment during the reporting period.

Amount Requisitioned to Date: The total dollar amount requisitioned/billed by the listed CBE firm from project inception thru the listed reporting period.

Last Payment: The last dollar amount paid to CBE sub-consultant(s) for the reporting period

Last Payment Date: The date of last payment of CBE sub consultant(s) for the reporting period

Was last payment within 2 days of MDC payment to prime: "Y" for Yes if payment to sub consultant(s) was made within 2 days of MDC payment to prime; "N" for No if payment to sub consultant(s) was not made within 2 days of MDC payment to prime

AMT Paid to Date: The total amount paid to the listed CBE subcontractor(s) from project inception thru the listed reporting period

Authorized Signature of Prime Consultant: Signature of the person completed the firm

Print Name: Print name

Title: Title

Date: Date form completed

Total: The total of each column where applicable

PART 2

Name of Sub consultant: The legal name of all sub consultant(s) meeting a goal listed on the Prime's Letter of Agreement(s) approved by SBD.

Authorized Signature of Sub consultant: The legal name of all sub consultant(s) meeting a goal listed on the Prime's Letter of Agreement(s) approved by SBD.

Total Agreement Amount: The dollar value of the executed agreement between the prime consultant and CBE sub consultant including amendments.

Final SUB Requisition Amount: Actual dollar amount of final requisitioned to the prime consultant

Total Paid to Date to Sub consultant: The total amount paid by the Prime Consultant to the CBE sub consultant.

Department of Small Business Development Community Business Enterprise (CBE) Program Instructions for the Monthly Utilization Report (MUR)

Total Sub Requisitioned to Date: Total amount requisitioned by the CBE sub consultant to date

Prompt Payment Issues: "Y" if your firm has a prompt payment issue and "N" if the CBE sub consultant does not have prompt payment issue

Date of Work Completion: Date the CBE sub consultant completed the work

Goal % (If Applicable): The goal percentage that is being fulfilled by the CBE sub consultant. If the percentages differ from the percentage listed on the SBD approved LOI, a new LOI must be submitted to SBD for review and approval.

PART 3

Executed by: The signature and printed name of the CEO, President, or an officer of the company, legally authorized to represent the prime consultant

Sworn before me: Notary Information

COUNTY USE

Authorized Signature of PROJ.MGR/Contract Person: Signature of the contracting department project manager or contact person.

Print Name: Print the name of the contracting department project manager or contact person.

DATE: Title