CITY OF MIAMI
CAPITAL IMPROVEMENTS PROGRAM

SUBCONTRACTOR UTILIZATION

Sheet No. ____ of _____

Project No. B-_____ **Project Title:** ____ _____

This Form must be submitted with a Bidder's Bid submission. Failure to submit this Exhibit with the Bid will result in the bid being rejected as non-responsive. The City in its sole discretion allow the Bidder to submit the Exhibit after Bids are due.

Provide the following information for each subcontractor regardless of tier.* Attach additional sheets if necessary.

Name of Business	**Portion of Work**	**Dollar Amount**	**Percent**	**Address/City/State/Zip**	**License Information****		**Business Certification******		
					Type	Number	SBE	CSBE	DBE
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* All tiers must be shown, including multiple sub-tiers, if permitted by the Contract Documents.
**List only those relevant to this Project.
*** Must be certified by either Miami-Dade County, State of Florida, or the Federal Government