



Disadvantaged Business Enterprise Program

DBE Form 6: Payment Affidavit - Subcontractor / Supplier Utilization

To be submitted with each request for payment from the City of Charlotte. Copy this form as needed.

v.9.10.14

Project Name: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Payment Request # \_\_\_\_\_

Contract Number: \_\_\_\_\_ Invoice Amount: \$ \_\_\_\_\_

Payment Period: From \_\_\_\_\_ To \_\_\_\_\_

FINAL PAYMENT  Check this box only when submitting Final Pay request.

Section 1: Payments to SUBCONTRACTORS

Complete the chart below for ALL subcontractors used on the Project/Contract regardless of dollar amount. Report payments that have already been made to subcontractors.

Table with 5 columns: Subcontractor's Name, Description of Work Performed, NAICS Code, Payment this Period, Cumulative Payments. Contains 8 empty rows.

The undersigned Company certifies the preceding chart is a true and accurate statement of all payments that have been made to subcontractors and suppliers on this Project/Contract. If no subcontractors or suppliers are listed on the preceding chart, the Company certifies that no subcontractors or suppliers were used in performing the Project/Contract for the payment period indicated.

This \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

Signature \_\_\_\_\_

Print Name and Title \_\_\_\_\_

Summary table for FINAL PAYMENT with columns for Total Paid to Contractor, Total Paid to DBEs, DBE Goal, DBE Goal Commitment, DBE Goal Attainment.