

Return To:
 NDOT – HCRO
 PO Box 94759
 Lincoln, NE 68509-4759
 Fax: 402-479-3728
 Email: ndot.hcro-dbe@nebraska.gov

Date: _____

Nebraska Department of Transportation DBE Identification of Work Performed (NDOT 442)

Project Number: _____

Control Number: _____

DEB Subcontractor: _____

Location: _____

Note: This form is to be completed by the DBE subcontractor as accurately as possible, with the understanding that the final quantities may be not available at the time of completion.

Complete the form and either email to ndot.hcro-dbe@nebraska.gov or fax to 402-479-3728.

Prime Contractor	NDOT Work Types	\$ Amount Paid - Construction
		\$
		\$
		\$

Prime Contractor	\$ Amount Received – Material Supply	\$ Amount Received - Hauling
	\$	\$
	\$	\$
	\$	\$

Prime Contractor	Retainage \$ Withheld	Retainage \$ Returned
	\$	\$
	\$	\$
	\$	\$

Total of payments received from Prime Contractor: \$ _____

Completed by: _____
signature/typed name