

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 Prime Contractor Identification of DBE Goal Achievement (NDOT 441)

Project Number: _____ **Control Number:** _____

Prime Contractor: _____ **Location:** _____

Note: This form is to be completed as accurately as possible by the prime contractor, 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.

DBE Firm (Construction)	NDOT Work Types	\$ Amount Paid - Construction
		\$
		\$
		\$

DBE Firm (Hauling, Supply)	\$ Amount Paid – Material Supply	\$ Amount Paid - Hauling
	\$	\$
	\$	\$
	\$	\$

DBE Firm	Retainage \$ Withheld	Retainage \$ Returned
	\$	\$
	\$	\$
	\$	\$

Total of Payments to DBE Subcontractor: \$ _____

Completed by: _____
signature/typed name