



CBI FORM 2: Solicitation Form

Copy this Form 2 as needed to document SBE and MBE contacts.

Per Part B, Section 5.3.1 of the CBI Policy, the Bidder must make the required contacts no less than ten (10) Days before Bid Opening to receive credit for this Good Faith Effort. All contacts must be verifiable with supporting documentation reflecting the methods and content of the solicitation. All documentation must be submitted with CBI Form 2.

A Bidder must submit CBI Form 2 within the time specified in the City Solicitation Documents. If no time period is specified in the City Solicitation Documents, the Bidder must submit CBI Form 2 within three (3) Business Days after the City requests it.

If checking “No” for “Selected” below, the Bidder must document the reasons for rejecting each bid submitted by a SBE or MBE on CBI Form 2A.

Bidder Name:			
Project Name:			
Project Number:			
Number of SBEs/MBEs Contacted by Bidder:			

SBE/MBE Firm (Circle one or both):				Contact Person:		
Scope of Work:				NIGP Commodity Code:		
Initial Contact:	Date:	Method:	<input type="checkbox"/> Email	<input type="checkbox"/> Fax	<input type="checkbox"/> Courier	
Follow-up:	Date:	Method:	<input type="checkbox"/> Phone	<input type="checkbox"/> In-Person		
Response:	<input type="checkbox"/> No response	<input type="checkbox"/> Not bidding		<input type="checkbox"/> Is bidding \$	<input type="checkbox"/> Other (explain)	
Selected:	<input type="checkbox"/> Yes	<input type="checkbox"/> NO (explain)				

SBE/MBE Firm (Circle one or both):				Contact Person:		
Scope of Work:				NIGP Commodity Code:		
Initial Contact:	Date:	Method:	<input type="checkbox"/> Email	<input type="checkbox"/> Fax	<input type="checkbox"/> Courier	
Follow-up:	Date:	Method:	<input type="checkbox"/> Phone	<input type="checkbox"/> In-Person		
Response:	<input type="checkbox"/> No response	<input type="checkbox"/> Not bidding		<input type="checkbox"/> Is bidding \$	<input type="checkbox"/> Other (explain)	
Selected:	<input type="checkbox"/> Yes	<input type="checkbox"/> NO (explain)				

SBE/MBE Firm (Circle one or both):				Contact Person:		
Scope of Work:				NIGP Commodity Code:		
Initial Contact:	Date:	Method:	<input type="checkbox"/> Email	<input type="checkbox"/> Fax	<input type="checkbox"/> Courier	
Follow-up:	Date:	Method:	<input type="checkbox"/> Phone	<input type="checkbox"/> In-Person		
Response:	<input type="checkbox"/> No response	<input type="checkbox"/> Not bidding		<input type="checkbox"/> Is bidding \$	<input type="checkbox"/> Other (explain)	
Selected:	<input type="checkbox"/> Yes	<input type="checkbox"/> NO (explain)				

SBE/MBE Firm (Circle one or both):				Contact Person:		
Scope of Work:				NIGP Commodity Code:		
Initial Contact:	Date:	Method:	<input type="checkbox"/> Email	<input type="checkbox"/> Fax	<input type="checkbox"/> Courier	
Follow-up:	Date:	Method:	<input type="checkbox"/> Phone	<input type="checkbox"/> In-Person		
Response:	<input type="checkbox"/> No response	<input type="checkbox"/> Not bidding		<input type="checkbox"/> Is bidding \$	<input type="checkbox"/> Other (explain)	
Selected:	<input type="checkbox"/> Yes	<input type="checkbox"/> NO (explain)				