

**EXHIBIT 3**

**ACDBE/DBE FORM 1**

**SCHEDULE OF ACDBE/DBE PARTICIPATION**

NAME OF PROPOSER: \_\_\_\_\_

JAA RFP NO.: 12-28-43605

**CONTRACT: VALET PARKING SERVICES CONCESSION**

TOTAL BASE BID AMOUNT: \$ \_\_\_\_\_

INDICATE DBE TYPE OF BUSINESS BY (✓) CHECK NEXT TO NAME

- SUBCONTRACTOR 100% OF BID PRICE APPLIES TOWARDS DBE PARTICIPATION GOAL
- MANUFACTURERS 100% OF BID PRICE APPLIES TOWARDS DBE PARTICIPATION GOAL
- SUPPLIERS 60% OF BID PRICE APPLIES TOWARDS DBE PARTICIPATION GOAL
- SERVICES 100% OF BID PRICE APPLIES TOWARDS DBE PARTICIPATION GOAL

ACDBE/DBE PARTICIPATION				\$ Amount	\$ Amount	% of
			Name	Bid by DBE	Applied to	Bid
			Work to Be Performed		DBE Goal	
			ACDBE/DBE Participation – Total \$ Value and %			

Total ACDBE/DBE Participation and %			
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The undersigned will enter into a Formal Agreement with the ACDBE/DBE Subcontractors identified herein for work listed in this schedule conditioned upon execution of a contract with the Jacksonville Aviation Authority.

Signature \_\_\_\_\_ Title \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

NOTARY PUBLIC \_\_\_\_\_ (SEAL)



**EXHIBIT 3  
ACDBE/DBE FORM 3**

**LETTER OF INTENT TO PERFORM AS A SUBCONTRACTOR**

TO: \_\_\_\_\_  
(Name of General Contractor Proposing)

JAA PROJECT: **VALET PARKING SERVICES CONCESSION**      RFP NO.: 12-28-43605

The undersigned intends to perform work in connection with the above Contract as:

Check One:

\_\_\_\_\_ an individual      \_\_\_\_\_ a corporation  
\_\_\_\_\_ a partnership      \_\_\_\_\_ a joint venture

The status of the undersigned is confirmed on the attached ACDBE/DBE Contractor identification Affidavit.

Specify in Detail, work items or parts thereof to be performed

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

at the following price: \$\_\_\_\_\_.

\_\_\_\_\_ (%) of the total dollar value of this subcontract will be sublet and/or awarded to non-minority Subcontractors.

The undersigned agrees to enter into a contract with you to perform the above work, if you are awarded the prime contract.

\_\_\_\_\_  
(Date)                                      \_\_\_\_\_  
(Telephone No.)                                      \_\_\_\_\_  
(Name of ACDBE/DBE Subcontractor)

\_\_\_\_\_  
(Firm Address)                                      By: \_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(City and State)                                      Name: \_\_\_\_\_  
(Typed)

Title: \_\_\_\_\_  
(Typed)