

OKLAHOMA DEPARTMENT OF TRANSPORTATION
NOTIFICATION CHANGE OF DBE PARTICIPANT

(DBE FORM 4)

Project No: _____ Current Date: _____

Job Piece Number: _____ Division: _____ County: _____

Prime Contractor: _____

CHANGE: From / To (fill in both sides) or **ADD:** To (fill in this side only)

From Name: _____ To Name: _____

Address: _____ Address: _____

_____ Address: _____

_____ Address: _____

Phone No: _____ Phone No: _____

The DBE is a (Check One):

Subcontractor ☐ Supplier(60%) ☐ Trucking Firm ☐ Manufacturer ☐ Professional ☐

Change in service to be performed _____

Change in DBE Participation Amount _____

Explain Reason for Changing: _____

NOTE: Attach a copy of the letter by the Original DBE stating reason for inability to perform work.

Signed: _____

Contractor

Position

Approved / Disapproved: _____ Date: _____

Title VI Coordinator

Approved / Disapproved: _____ Date: _____

Construction Engineer

DISTRIBUTION: Title VI Coordinator
Assistant Division Manager, Regulatory Services
Construction Division