OCR-487-S
10/02

DBE Prime Contractors

MISSISSIPPI DEPARTMENT OF TRANSPORTATION
OFFICE OF STATE AID ROAD CONSTRUCTION
JACKSON, MISSISSIPPI

PROJECT NUMBER: _____ **COUNTY:** _____

NAME OF NON-DBE FIRM: _____

ADDRESS: _____

A	B	C
REF. NO. OF ITEMS	PER CENT WORK SUBCONTRACTED, (SEE NOTE BELOW 4 & 5)	VALUE OF ITEM (SUBCONTRACTED, MANUFACTURED OR SUPPLIED)
TOTAL		
PER CENT OF TOTAL BID		

DATE RECEIVED: _____

DATE APPROVED: _____

APPROVED BY: _____

_____
PRIME CONTRACTOR

_____
SUBMITTED BY

_____
TITLE

INSTRUCTIONS:
1. SUBMIT THIS FORM TO STATE AID ROAD CONSTRUCTION WITH THE PERMISSION TO SUBCONTRACT FORM (FAS-SA) SC-1.
2. DBE PRIMES MUST FILL OUT AN OCR-487-S ON ALL NON-DBE SUBS.