CERTIFICATION OF FINAL SUBCONSULTANT PAYMENT  
(This form is also required when the Prime Consultant is a DBE) 

Must be provided by the Prime Consultant following Final Payment to each Subconsultant or following contract completion and receipt of final payment from MaineDOT when the Prime Consultant is a DBE

Complete one form for each Subconsultant or when the Prime Consultant is a DBE

Prime Consultant Firm: _____ Contract #: _____ CSN#: _____

Project Identification Number (PIN): _____ Project Location: _____

Total Contract Amount: $ _____ Consultant’s Project #: _____

DBE is Prime: Yes ☐ No ☐ If yes, complete the following: Describe type of work performed on this project: _____.

Total amount paid under this Contract: $ _____ _____% of contract

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Subconsultant Firm’s Name: _____ DBE Subconsultant: ☐ Yes ☐ No

Describe work performed by Subconsultant on this project: _____

Total amount paid to this Subconsultant: $ _____ _____% of contract

Consultant submit to: Sherry Tompkins, EEO Officer  
CIVIL RIGHTS OFFICE  
Maine Department of Transportation  
#16 State House Station  
Augusta, Maine 04333-0016  
Phone #: (207) 624-3066  
Email: Sherry.Tompkins@maine.gov

In connection with the above referenced contract we the undersigned, jointly certify and attest the information contained herein to be true and accurate.

PRIME CONSULTANT FIRM NAME

By: ____________________________ Name & Title Typed

(Date Signed)

SUBCONSULTANT FIRM NAME

By: ____________________________ Name & Title Typed

(Date Signed)