Oklahoma Department of Transportation



Civil Rights Division

Notification Change of DBE Participant DBE FORM 4

	200 N.E. 21st Street, Room 1-C1		Current Date:		
Oklahoma Department of Transportation		Project No:	Job Piece Number: Contract ID:		
Division:		County:			
Prime Contractor:					
	CHANGE:FROM	M/TO (fill in both s	sides)		
Name:		Name:			
Address:		Address:			
City:	Zip Code:	City:	Zip	Code:	
Phone No:		Phone No:			
The DBE is a (Check (One):				
Subcontractor	Supplier (60%) Truckin	ıg Firm 🔲 Mar	nufacturer		
Change in DBE Partic Explain Reason for C					
	py of the letter or other documentat	·	1		
Contractor		Position			
	Division Manager, Civil Rights Division		State Construction Engineer, ODOT		
Division Manager, Civi	Triights Division	State Co	nstruction Engineer, ODOT		
Division Manager, Civi Date	Triights Division	State Co	nstruction Engineer, ODOT		