How to Create a New DBE/ACDBE Application For Firms Seeking DBE/ACDBE Certification
If you are a firm seeking DBE/ACDBE Certification, go to: [https://hdot.dbesystem.com/](https://hdot.dbesystem.com/) and then click on the “Apply for / Manage Certification” button.
In the Apply for Certification dialogue box, under New Certification, click on the “Create Account” link.
In the Create and Account dialogue box fill in all the **REQUIRED ENTRIES**.
Once all the required entries are completed click the “Next” button.

**REQUIRED ENTRIES include:**

**Section 1: Business Lookup**
*Tax ID Number*

**Section 2: Business Information**
*Business Name*
*Company Type – use dropdown menu*

**Section 3: Business Contact Information**
*Main Company Email*
*Main Phone*
*Company Address*
*City*
*State/Province – use dropdown menu*
*Zip Code/Postal Code*
*Country – use dropdown menu*

**Section 4: Company and Contact Person**
*Name (First Name and Last Name)*
*Email/Username – best to use “copy from above” link*
*Phone Number – best to use “copy from above” link*
*Choose Password*
*Retype password*
*Time Zone – use dropdown menu*

Once all the required entries are completed click the “Next” button.
Check the checkbox “I would like to create an account in the system.”
Click the “Next” button if all information is correct
If any data needs to be corrected, click the “Edit” button to make any needed changes
Click on the “Your firm is not currently certified by HDOT” link
Next, Depending on where your firm is located click on the “Your firm is located in Hawaii” link

Or

click on the “Your firm is not located in Hawaii” link
“Your firm is located in Hawaii”
If your firm is located in Hawaii, click on the “Submit an New DBE application” link
“Your firm is not located in Hawaii”

If your firm is not located in Hawaii, click on the “Your firm is DBE/ACDBE certified in your home state” link and complete an Interstate application

Or

Click on the “Your firm is not DBE/ACDBE certified in your home state” link and obtain certification from a qualifying agency in your home state and then return to complete an application
New DBE/ACDBE Application for Hawaii Department of Transportation

1st: Answer Eligibility Requirements questions by selecting Yes or No for each question

2nd: Once complete click “Continue” button

Company & Contact Information should be pre-filled, otherwise answer each question
Download, complete, sign, notarize, and upload the:

1) **Affidavit of Certification** - it **MUST** be signed and notarized and

2) **Personal Net Worth Statement** - For socially and economically disadvantaged owners comprising 51% or more of the ownership percentage of the applicant firm.
Review document list for Mandatory Documents - All mandatory documents must be provided with the application regardless of type of firm. Failure to submit a mandatory document will result in a delay in processing and/or could result in denial. If question does not apply to your firm, simply attach a statement on company letterhead with appropriate signature(s) that state it does not apply to your firm.

Mandatory Documents to be attached/uploaded:
1. Affidavit of Certification
2. Personal Net Worth Statement
3. Personal Federal tax returns for the past 3 years for each disadvantaged owner
4. Federal tax returns filed by the firm and its affiliates with related schedules, for the past 3 years
5. Bank authorization and signatory cards
6. Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past 2 years
7. Documented proof of contributions used to acquire ownership for each owner
8. Schedule of salaries (or other remuneration) paid to all officers, managers, owners, and/or directors of the firm
9. Signed loan and security agreements and bonding forms
10. Descriptions of all real estate owned/leased by firm and documented proof of ownership/signed leases
11. Licenses, license renewal forms, permits, and haul authority forms
12. List of all employees, job titles, and dates of employment
13. List of equipment and/or vehicles owned and leased
14. Resumes for all owners, officers of firm and key personnel of the applicant firm
15. Both sides of all corporate stock certificates and your firm's stock transfer ledger
16. Corporate bank resolution and bank signature cards
17. Corporate by-laws and any amendments
18. Minutes of all stockholders and board of directors meetings
19. Official Certificate of Formation and Operating Agreement with any amendments
20. Shareholders' Agreement(s)
Required documents must be provided when applicable to your firm. Failure to submit a required document without an explanation as to why any such attachment was not provided will result in a delay in processing and/or could result in denial.

1. DBE/ACDBE and SBA 8(a), SDB, MBE/WBE certifications, denials, and/or decertifications
2. Insurance agreements for each truck owned or operated by your firm
3. **Proof of citizenship – THIS IS MANDATORY**
4. Proof of warehouse/storage facility ownership or lease arrangements
5. Title(s), registration certificate(s), and U.S. DOT numbers for each truck owned or operated by your firm
6. Year-end balance sheets and income statements for the past 3 years
7. Audited financial statement
8. Personal Federal Tax returns for the past 3 years, if applicable, for other disadvantaged owners of the firm
9. SUPPLIERS - List of distribution equipment owned and/or leased
10. SUPPLIERS - List of product lines carried
11. Trust agreements held by any owner claiming disadvantaged status
12. Irrevocable Transfer of Rights
13. Additional supporting documents not listed
Check this box and click “Continue” to start the application process.
Section 1: Certification Information – Basic Contact Information – click on “Process” button and proceed to answer questions. You can complete the sections in any order.
Complete Sections and Documentation  
Click on “Save & Return to Application Summary” button  

Section 1: Certification Information – Basic Contact Information  
Provide responses to all questions highlighted in PINK  

1.A.1. Contact person and Title  
1.A.2. Legal name of firm  
1.A.3. Phone #  
1.A.6. E-mail  
1.A.8.a. Street address of firm  
1.A.8.b. County/Parish of Street Address  
1.A.9.a. Mailing address of firm  
1.A.9.b. County/Parish of Mailing Address

Color Coding Legend  
Pink – required response  
Yellow – optional response  
Grey - completed

Once complete click on “Save & Return to Application Summary” button
Section 1: Certification Information – Basic Information

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 1: Certification Information - Prior/Other Certifications and Applications

Click on “Save & Return to Application Summary” button

Provide responses to all questions highlighted in PINK

Complete Section 1: Certification Information – Prior/Other Certifications and Applications
ALL ARE REQUIRED

Is the firm applying for Airport Concession Disadvantaged Business Enterprise (ACDBE) certification?

Is the firm applying for Disadvantaged Business Enterprise (DBE) certification?

1.B.10. Is your firm currently certified for any of the following U.S. DOT programs?

1.B.11. Indicate whether the firm or any persons listed in this application have ever been:

Once complete click on “Save & Return to Application Summary” button
Section 1: Certification Information - Prior/Other Certifications and Applications

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 2: General Information - Business Profile
Provide responses to all questions highlighted in PINK

Color Coding Legend
Pink – required response
Yellow – optional response
Grey - completed

Complete Section 2: General Information - Business Profile
* Required entry
2.A.1. Give a concise description of the firm's primary activities and the product(s) or service(s) it provides *
2.A.2.a. Applicable NAICS Code for this line of work *
2.A.2.b. Additional NAICS Code for this line of work
2.A.2.c. Additional NAICS Code for this line of work
2.A.2.d. Additional NAICS Code for this line of work
2.A.2.e. Additional NAICS Code for this line of work
2.A.2.f. Additional NAICS Code for this line of work
2.A.2.g. Additional NAICS Code for this line of work
2.A.3. This firm was established on *
2.A.4. I/We have owned this firm since *
2.A.5. Method of acquisition *
2.A.6.a. Is your firm "for profit"? *
2.A.6.b. Federal Tax ID# *
2.A.7. Type of Legal Business Structure *
2.A.8. Number of employees * - enter “0” if there are no full-time, part-time or seasonal employees
2.A.9. Specify the firm’s gross receipts for the last 3 years *

Once complete click on “Save & Return to Application Summary” button
Section 2: General Information – Business Profile

COMPLETED – Green checkmark next to Process button indicates section is completed.
Section 2: General Information - Relationships and Dealings with Other Businesses

Provide responses to all questions highlighted in PINK

Color Coding Legend
Pink – required response
Yellow – optional response
Grey - completed

Complete Section 2: General Information - Business Profile

ALL ARE REQUIRED

2.B.1. Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office or storage space, yard, warehouse, facilities, equipment, inventory, financing, office staff, and/or employees with any other business, organization, or entity?

2.B.2. Has any other firm had an ownership interest in your firm at present or at any time in the past?

2.B.3.a. At present, or at any time in the past, has your firm ever existed under different ownership, a different type of ownership, or a different name?

2.B.3.b. At present, or at any time in the past, has your firm existed as a subsidiary of any other firm?

2.B.3.c. At present, or at any time in the past, has your firm existed as a partnership in which one or more of the partners are/were other firms?

2.B.3.d. At present, or at any time in the past, has your firm owned any percentage of any other firm?

2.B.3.e. At present, or at any time in the past, has your firm had any subsidiaries?

2.B.3.f. At present, or at any time in the past, has your firm served as a subcontractor with another firm constituting more than 25% of your firm’s receipts?

Once complete click on “Save & Return to Application Summary” button
Section 2: General Information - Relationships and Dealings with Other Businesses

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 3: Majority Owner Information Section Status

Click on "Add Owner" if there are additional owners and follow directions.

Color Coding Legend
Pink – required response
Yellow – optional response
Grey - completed
Section 3: Majority Owner Information Section Status

Provide responses to all questions highlighted in **PINK**

Owner #1:

Section 3: Majority Owner Information Section Status

**ALL ARE REQUIRED**

• Full name

• Background information

• Number of years as owner

• Percentage owned

• Class of stock owned

• Date acquired

• Initial investment to acquire ownership interest in firm

• Describe how you acquired your business

• Describe familial relationship to other owners and employees

• Does this owner perform a management of supervisory function for any other business?

• Does this owner own or work for any other firm(s) that has a relationship with this firm?

• Does this owner work for any other firm, non-profit organization, or is engaged in any other activity more than 10 hours per week?

• What is the Personal Net Worth (PNW) of the disadvantaged owner applying for certification?

• Has any trust been created for the benefit of the disadvantaged owner?

• Do any of your immediate family members, managers, or employees own, manage or are associated with another company?

Color Coding Legend
Pink – required response
Yellow – optional response
Grey - completed

Once complete click on “Save & Return to Application Summary” button
Section 3: Majority Owner Information Section Status

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 4: Control - Officers & Board of Directors
Provide responses to all questions highlighted in PINK

4.A.1 Identify your firm’s Officers
4.A.2 Identify your firm’s Board of Directors
4.A.3 Do any of the persons listed above perform a management or supervisory function for any other business?
4.A.4 Do any of the persons listed as an Officer or Director own or work for any other firm(s) that has a relationship with this firm? (e.g., ownership interests, shared office space, financial investments, equipment, leases, personnel sharing, etc.)

Once complete click on “Save & Return to Application Summary” button
Section 4: Control - Officers & Board of Directors

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 4: Control - Management Personnel

Provide responses to all questions highlighted in PINK

**Color Coding Legend**
- Pink – required response
- Yellow – optional response
- Grey – completed

**Section 4: Control - Management Personnel**

* Required entry

4.B.1. Duties of Owners, Officers, Directors, Managers, and Key Personnel *

Identify your firm's management personnel who control your firm in the following areas.

- Sets policy for company direction/scope of operation
- Bidding and estimating
- Major purchasing decisions
- Marketing and sales
- Supervises field operations
- Attends bid openings and lettings
- Performs office management
- Hires and fires management staff
- Hires and fires staff or crew
- Designates profits, spending or investment
- Obligates business by contract/credit
- Purchase equipment
- Signs business checks

4.B.1.a Do any of the persons listed above perform a management or supervisory function for any other business? *

4.B.1.b Do any of the person listed above own or work for any other firm(s) that has a relationship with this firm? *

Once complete click on “Save & Return to Application Summary” button
Section 4: Control - Management Personnel

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 4: Control – Inventory

Provide responses to all questions highlighted in **PINK**

**Color Coding Legend**
- **Pink** – required response
- **Yellow** – optional response
- **Grey** – completed

Section 4: Control – Inventory

**ALL ARE REQUIRED**

4.C.1 Indicate your firm’s inventory of Equipment and Vehicles
4.C.2 Indicate your firm’s Office Space
4.C.3 Indicate your firm’s Storage Space

Once complete, click on “Save & Return to Application Summary” button.
**Section 4: Control – Inventory**

**COMPLETED** – Green checkmark next to Process button indicates section is completed.
Section 4: Control - Financial Information

ALL ARE REQUIRED

4.D Does your firm rely on any other firm for management functions or employee payroll?

4.E.1 Financial/Banking Information

4.E.2 Bonding Information

4.F Identify all sources, amounts, and purposes of money loaned to your firm including from financial institutions. Identify whether you or the owner and any other person or firm loaned money to the applicant DBE/ACDBE

4.G List all contributions or transfers of assets

Once complete click on “Save & Return to Application Summary” button
Section 4: Control - Financial Information

COMPLETED – Green checkmark next to Process button indicates section is completed
Section 4: Control - Licenses & Contracts

Provide responses to all questions highlighted in PINK

ALL ARE REQUIRED

4.H List current licenses/permits held by owner and/or employee of your firm

4.I List the three largest contracts completed by your firm in the past three years, if any

4.J List the three largest active jobs on which your firm is currently working

Once complete click on “Save & Return to Application Summary” button
Section 4: Control - Licenses & Contracts

COMPLETED – Green checkmark next to Process button indicates section is completed
Airport Concession (ACDBE)
Provide responses to all questions highlighted in PINK

Color Coding Legend
Pink – required response
Yellow – optional response
Grey - completed

Airport Concession (ACDBE)
ALL ARE REQUIRED
- Identify the following information concerning the ACDBE applicant firm
- Provide information concerning any other airport concession business that applicant firm or any affiliate owns and/or operates, including name, location, type of concession, and start date of concession

Once complete click on “Save & Return to Application Summary” button
Airport Concession (ACDBE)

COMPLETED – Green checkmark next to Process button indicates section is completed

Green checkmark next to Process button indicates section is completed
Document List

Attach or Fax Mandatory Documents and Required Documents
How to Attach Mandatory Documents and Required Documents

1st: Click on "Attach" and a dialogue box appears

2nd: Click on “Choose File” to select which document you need attach

3rd: Select which document to attach and click "Open"

4th: Click "Upload File" to attach document to your application

Repeat steps 1-4 for each document that needs to be attached – for both Mandatory Documents and Required Documents – when finished hit the “Return” button.
How to Attach **Mandatory** Documents and Required Documents

You can view, edit or delete file if needed.

It is successfully attached.
If you would like to fax your documents instead of attaching them, simply click on the “Fax” button and follow the directions.

Repeat for each document that you will be faxing.

Faxes are provided to a third party contractor who attaches them for you.
How to Fax Mandatory Documents and Required Documents – Sample Page

You must include the cover page with the document. Fax document to (315) 772-7299.
Main Summary

All sections are completed and application is ready for signature and submittal

**Certification Application: Main Summary**

All sections have been completed and the application is complete. Click the Sign button to electronically sign the application.

**Application Information**

New DEEAC/ODE Application
Hawaii Department of Transportation
Submit Now - A
Application Status: Complete, Pending Signature > Sign Application
12/20/2019 (Pending)
Glen Le\* - BLD 100 141-01-00

**Sections and Documentation**

| Section | Process | Complete | Required | 8 of 10 required | 8 of 10 of 8 required by (Glen Le\*)
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**Signature and Submit**

Click on “Sign” to begin signature process.
1st: - Type in your full, legal name and your title

2nd: - Put a check mark in the box

3rd: - Click on “Sign Application” button
Submit Application

1st: Click on box

2nd: Click on “Submit Application” button

3rd: Or view and print your application
Or edit your application
Submit Application

Certification Application: Submit Application

Test HDOT - A
Application Type: New DBE/ACDBE Application
Application Number: 8251773

Mahalo (thank you) for your submittal. Your certification application number is 8251773. Please reference this number in all correspondence.

Applicants can expect to receive a final determination on their application within 90 days. During this time, you may be contacted to supply additional information and/or supporting documentation; a delay in your response will result in an extended period of review.

HDOT reserves the right to inspect in person and/or request original documents by mail of any supporting document at any time during the term of certification.

Click “View and Print Application For Your Records” button
Congratulations! You have completed your firm’s New DBE/ACDBE Application

Next step is for HDOT OCR to review your firm’s New DBE/ACDBE Application and schedule an on-site visit
Questions, Comments, Input, Suggestions, Corrections?

Hawaii Department of Transportation
Office of Civil Rights
hdot-dbe@hawaii.gov