

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

The University of Houston strives to provide you with the most effective resource materials to ensure that your HUB Subcontracting Plan (HSP) is compliant.

First, determine what HSP option will best fit the commodity, project and/or service requirements. Below are the four (4) HSP options outlined within the HSP.

OPTION 1- 100% HUB Participation

OPTION 2- The respondent WILL MEET the HUB subcontracting goals as identified in the Agency Special Instructions or within the solicitation document.

OPTION 3- The respondent WILL NOT meet the HUB subcontracting goals as identified in the Agency Special Instructions or within the solicitation document.

OPTION 4- Self Perform- The respondent will NOT be subcontracting any portion of the contract and will utilize its own resources in completing the project.

Frequently asked Questions:

Q: I'm a certified HUB. Do I have to complete this form?

A: Yes

Q: As a certified HUB who is a prime, what is the percentage of work I must perform in order for the University to receive 100% HUB credit?

A: In accordance with Texas Administrative Code 20.16, when a prime contractor is a HUB, it must perform at least 25% of the total value of the contract with its own or leased employees in order for the agency to receive 100% HUB credit for the entire contract.

The following pages will provide you with examples of the various Options

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

OPTION 1- 100% HUB PARTICIPATION Complete the Respondent and Requisition Information. The requisition number can be found on the cover page of the solicitation document.

SECTION 1 RESPONDENT AND REQUISITION INFORMATION

a. Respondent (Company) Name: _____ State of Texas VID #: _____
 Point of Contact: _____ Phone #: _____
 E-mail Address: _____ Fax #: _____

b. Is your company a State of Texas certified HUB? - Yes - No

c. Requisition #: _____ Bid Open Date: _____
(mm/dd/yyyy)

1. Enter your company’s name and enter the requisition number at the top of the document. Select **YES, I will be subcontracting portions of the contract.**

Enter your company’s name here: _____ Requisition #: _____

SECTION 2 SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including goods and services, will be subcontracted. Note: In accordance with 34 TAC §20.11., an “Subcontractor” means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

- a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:
- Yes, I will be subcontracting portions of the contract. (If **Yes**, complete Item b, of this SECTION and continue to Item c of this SECTION.)
- No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources. (If **No**, continue to SECTION 3 and SECTION 4.)

2. List all portions of the work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors.

b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for five (5) years or less.	Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for more than five (5) years.	Percentage of the contract expected to be subcontracted to non-HUBs .
1	Drywall	12% %	%	%
2	Removal	%	4% %	%
3		%	%	%
4		%	%	%
5		%	%	%

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

OPTION 2- The respondent WILL MEET the HUB subcontracting goals as identified in the Agency Special Instructions or within the solicitation document.

1. Complete the Respondent and Requisition Information. The requisition number can be found on the cover page of the solicitation document.

SECTION 1 RESPONDENT AND REQUISITION INFORMATION	
a. Respondent (Company) Name: _____	State of Texas VID # _____
Point of Contact: _____	Phone #: _____
E-mail Address: _____	Fax #: _____
b. Is your company a State of Texas certified HUB? <input type="checkbox"/> - Yes <input type="checkbox"/> - No	
c. Requisition #: _____	Bid Open Date: _____ <small>(mm/dd/yyyy)</small>

2. Enter your company's name and the requisition number at the top of the document. Select **YES, I will be subcontracting portions of the contract.**

Enter your company's name here: _____	Requisition #: _____
---------------------------------------	----------------------

SECTION 2 SUBCONTRACTING INTENTIONS	
<p>After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including goods and services, will be subcontracted. Note: In accordance with 34 TAC §20.11., an "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.</p>	
<p>a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:</p>	
<input checked="" type="checkbox"/> - Yes, I will be subcontracting portions of the contract. (If Yes , complete Item b, of this SECTION and continue to Item c of this SECTION.)	
<input type="checkbox"/> - No, I will not be subcontracting <u>any</u> portion of the contract, and I will be fulfilling the entire contract with my own resources. (If No , continue to SECTION 3 and SECTION 4.)	

3. List all portions of the work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors.

- b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for five (5) years or less.	Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for more than five (5) years.	Percentage of the contract expected to be subcontracted to non-HUBs .
1	Drywall	12%	%	%
2	Removal	%	4%	%
3		%	%	%
4		%	%	%
5		%	%	%

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

4. Select NO to using ONLY Texas certified HUBs to perform ALL the subcontracting opportunities

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)
- No (If No, continue to Item d, of this SECTION.)

5. Select YES to affirming that the respondent will meet or exceed the HUB subcontracting goal.

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you have a continuous contract" in place with for five (5) years or less meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements".

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)
- No (If No, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed.)

6. Enter your company's name and the requisition number at the top of the document. Sign, print your name, and date the Affirmation Section. Please make sure the individual signing the document has signature authority.

SECTION 4 AFFIRMATION

As evidenced by my signature below, I affirm that I am an authorized representative of the respondent listed in SECTION 1, and that the information and supporting documentation submitted with the HSP is true and correct. Respondent understands and agrees that, if awarded any portion of the requisition:

- The respondent will provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor for the awarded contract. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.
- The respondent must submit monthly compliance reports (Prime Contractor Progress Assessment Report – PAR) to the contracting agency, verifying its compliance with the HSP, including the use of and expenditures made to its subcontractors (HUBs and Non-HUBs). (The PAR is available at <http://www.window.state.tx.us/procurement/prog/hub/hub-forms/progressassessmentrpt.xls>).
- The respondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the hiring of additional or different subcontractors and the termination of a subcontractor the respondent identified in its HSP. If the HSP is modified without the contracting agency's prior approval, respondent may be subject to any and all enforcement remedies available under the contract or otherwise available by law, up to and including debarment from all state contracting.
- The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site where services are being performed and must provide documentation regarding staffing and other resources.

Signature Printed Name Title Date (mm/dd/yyyy)

7. Enter your company's name and the requisition number at the top of the document. Complete Attachment A for each subcontracting opportunity listed in Section 2b

Rev. 02/12

HSP Good Faith Effort - Method A (Attachment A)

Enter your company's name here: _____ Requisition #: _____

IMPORTANT: If you responded "Yes" to SECTION 2, Items c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed in SECTION 2, Item b of the completed HSP form. You may photo-copy this page or download the form at <http://www.window.state.tx.us/procurement/prog/hub/hub-forms/HUBSubcontractingPlanAttachment-A.doc>

SECTION A-1 SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing this attachment.

Item #: 1 Description: Drywall

SECTION A-2 SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their VID number, the approximate dollar value of the work to be subcontracted, the expected percentage of work to be subcontracted, and indicate whether the company is a Texas certified HUB.

Company Name	Texas certified HUB	VID # (Required if Texas certified HUB)	Approximate Dollar Amount	Expected Percentage of Contract
ABC Company	<input type="checkbox"/> - Yes <input checked="" type="checkbox"/> - No	12345678	\$ 1200	12 %
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

OPTION 3- The respondent WILL NOT meet the HUB subcontracting goals as identified in the Agency Special Instructions or within the solicitation document.

1. Complete the Respondent and Requisition Information. The requisition number can be found on cover page of the solicitation document.

SECTION 1 RESPONDENT AND REQUISITION INFORMATION	
a. Respondent (Company) Name: _____	State of Texas VID # _____
Point of Contact: _____	Phone #: _____
E-mail Address: _____	Fax #: _____
b. Is your company a State of Texas certified HUB? <input type="checkbox"/> - Yes <input type="checkbox"/> - No	
c. Requisition #: _____	Bid Open Date: _____ <small>(mm/dd/yyyy)</small>

2. Enter your company's name and the requisition number at the top of the document. Select **YES, I will be subcontracting portions of the contract**

Enter your company's name here: _____	Requisition #: _____
---------------------------------------	----------------------

SECTION 2 SUBCONTRACTING INTENTIONS	
<p>After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including goods and services, will be subcontracted. Note: In accordance with 34 TAC §20.11., an "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.</p>	
<p>a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:</p>	
<input checked="" type="checkbox"/> - Yes, I will be subcontracting portions of the contract. (If Yes , complete Item b, of this SECTION and continue to Item c of this SECTION.)	<input type="checkbox"/> - No, I will not be subcontracting <u>any</u> portion of the contract, and I will be fulfilling the entire contract with my own resources. (If No , continue to SECTION 3 and SECTION 4.)

3. List all portions of the work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors.

- b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for five (5) years or less.	Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract* in place for more than five (5) years.	Percentage of the contract expected to be subcontracted to non-HUBs .
1	Drywall	12%	%	%
2	Removal	%	%	4%
3		%	%	%
4		%	%	%
5		%	%	%

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

4. Select **NO** to using **ONLY Texas certified HUBs to perform ALL the subcontracting opportunities.**

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

- No (If No, continue to Item d, of this SECTION.)

5. Select **NO** to affirming that the respondent will not meet or exceed the HUB subcontracting goal.

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you have a continuous contract* in place with for five (5) years or less meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements".

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

- No (If No, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed.)

6. Enter your company's name and the requisition number at the top of the document. Sign, print your name, and date the Affirmation Section. Please make sure the individual signing the document has signature authority.

SECTION 4 AFFIRMATION

As evidenced by my signature below, I affirm that I am an authorized representative of the respondent listed in SECTION 1, and that the information and supporting documentation submitted with the HSP is true and correct. Respondent understands and agrees that, if awarded any portion of the requisition:

- The respondent will provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor for the awarded contract. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.
- The respondent must submit monthly compliance reports (Prime Contractor Progress Assessment Report – PAR) to the contracting agency, verifying its compliance with the HSP, including the use of and expenditures made to its subcontractors (HUBs and Non-HUBs). (The PAR is available at <http://www.window.state.tx.us/procurement/prog/hub/hub-forms/progressassessmentrpt.xls>).
- The respondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the hiring of additional or different subcontractors and the termination of a subcontractor the respondent identified in its HSP. If the HSP is modified without the contracting agency's prior approval, respondent may be subject to any and all enforcement remedies available under the contract or otherwise available by law, up to and including debarment from all state contracting.
- The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site where services are being performed and must provide documentation regarding staffing and other resources.

Signature

Printed Name

Title

Date
(mm/dd/yyyy)

7. Enter your company's name and the requisition number at the top of the document. **Complete Attachment B for each subcontracting opportunity listed in Section 2b.**

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

Rev. 02/12

HSP Good Faith Effort - Method B (Attachment B)

Enter your company's name here: _____ Requisition #: _____

IMPORTANT: If you responded "No" to SECTION 2, Items c and d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method B (Attachment B)" for each of the subcontracting opportunities you listed in SECTION 2, Item b of the completed HSP form. You may photo-copy this page or download the form at <http://www.window.state.tx.us/procurement/prog/hub/hub-forms/HUBSubcontractingPlanAttachment-B.doc>

SECTION B-1 SUBCONTRACTING OPPORTUNITY

Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing this attachment.

Item #: **1** Description: **Drywall**

SECTION B-2 MENTOR PROTÉGÉ PROGRAM

If respondent is participating as a Mentor in a State of Texas Mentor Protégé Program, submitting its Protégé (Protégé must be a State of Texas certified HUB) as a subcontractor to perform the subcontracting opportunity listed in SECTION B-1, constitutes a good faith effort to subcontract with a Texas certified HUB towards that specific portion of work.

Check the appropriate box (Yes or No) that indicates whether you will be subcontracting the portion of work you listed in SECTION B-1 to your Protégé.

- Yes (If Yes, to continue to SECTION B-4.)

No / Not Applicable (If No or Not Applicable, continue to SECTION B-3 and SECTION B-4.)

8. Notification of Subcontracting Opportunities- You must notify three (3) Texas Certified HUBS **AND** (2) Minority or Women trade organizations or development centers about the subcontracting opportunities you identified in Section B-1. Notice guidelines are as followed:

Sent seven (7) working days**
Must be in writing
Scope of work
Venue to review plans & specifications

Bonding/Insurance requirements stated
required qualifications
Identify a contact person

**Seven working days prior to the submission of the response. Working days are considered a normal business day of a state agency, not including weekends, federal or state holidays or days the agency is declared closed by executive order. The initial day notice is sent is considered day zero and does not count as one of the seven (7) working days.

Supporting written documentation, such as certified letters, faxes and emails, should be retained and provided as back up within the response submittal. Logged telephone conversations are not considered proper notice or proper documentation.

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

SECTION B-3 NOTIFICATION OF SUBCONTRACTING OPPORTUNITY

When completing this section you **MUST** comply with items **a, b, c and d**, thereby demonstrating your Good Faith Effort of having notified Texas certified HUBs **and** minority or women trade organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plans and specifications, bonding and insurance requirements, required qualifications, and identify a contact person. When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUB Subcontracting Opportunity Notice form, which is also available online at <http://www.window.state.tx.us/procurement/prog/hub/hub-subcontracting-plan/>

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs **and** minority or women trade organizations or development centers. Also, be mindful that a working day is considered a normal business day of a state agency, not including weekends, federal or state holidays, or days the agency is declared closed by its executive officer. The initial day the subcontracting opportunity notice is sent/provided to the HUBs **and** to the minority or women trade organizations or development centers is considered to be "day zero" and does not count as one of the seven (7) working days.

- a. Provide written notification of the subcontracting opportunity you listed in SECTION B-1, to three (3) or more Texas certified HUBs. Unless the contracting agency specified a different time period, you must allow the HUBs at least seven (7) working days to respond to the notice prior to your submitting your bid response to the contracting agency. When searching for Texas certified HUBs, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) and Historically Underutilized Business (HUB) Search directory located at <http://www.window.state.tx.us/procurement/cmb/cmbhub.html>. HUB Status code "A" signifies that the company is a Texas certified HUB.
- b. List the three (3) Texas certified HUBs you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the company's Vendor ID (VID) number, the date you sent notice to that company, and indicate whether it was responsive or non-responsive to your subcontracting opportunity notice.

Company Name	VID #	Date Notice Sent <small>(mm/dd/yyyy)</small>	Did the HUB Respond?
ABC HUB	123456	1/12/15	<input type="checkbox"/> - Yes <input checked="" type="checkbox"/> - No
XYZ HUB	123456	1/12/15	<input type="checkbox"/> - Yes <input checked="" type="checkbox"/> - No
123 HUB	123456	1/12/15	<input type="checkbox"/> - Yes <input checked="" type="checkbox"/> - No

- c. Provide written notification of the subcontracting opportunity you listed in SECTION B-1 to two (2) or more minority or women trade organizations or development centers **in Texas** to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting opportunity notice to minority or women trade organizations or development centers at least seven (7) working days prior to submitting your bid response to the contracting agency. A list of trade organizations and development centers that have expressed an interest in receiving notices of subcontracting opportunities is available on the Statewide HUB Program's webpage at <http://www.window.state.tx.us/procurement/prog/hub/mwb-links-1/>
- d. List two (2) minority or women trade organizations or development centers you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the date when you sent notice to it and indicate if it accepted or rejected your notice.

Minority/Women Trade Organizations or Development Centers	Date Notice Sent <small>(mm/dd/yyyy)</small>	Was the Notice Accepted?
Organization 1	1/12/15	<input checked="" type="checkbox"/> - Yes <input type="checkbox"/> - No
Organization 2	1/12/15	<input checked="" type="checkbox"/> - Yes <input type="checkbox"/> - No

9. Enter your company's name and the requisition number at the top of the document. Enter the number and description of the subcontracting opportunities and provide the list of subcontractors who will be performing the work.

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

HSP Good Faith Effort - Method B (Attachment B) *Cont.*

Enter your company's name here: _____ Requisition #: _____

SECTION B-4 SUBCONTRACTOR SELECTION

a. Enter the item number and description of the subcontracting opportunity for which you are completing this Attachment B continuation page.

Item #: 1 Description: Drywall

b. List the subcontractor(s) you selected to perform the subcontracting opportunity you listed in SECTION B-1. Also identify whether they are a Texas certified HUB and their VID number, the approximate dollar value of the work to be subcontracted, the expected percentage of work to be subcontracted, and indicate whether the company is a Texas certified HUB.

Company Name	Texas certified HUB	VID # (Required if Texas certified HUB)	Approximate Dollar Amount	Expected Percentage of Contract
West Drywall	<input type="checkbox"/> - Yes <input checked="" type="checkbox"/> - No		\$ 2400	12% %
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%

10. If any of the subcontractors you have selected to perform are **NOT** HUBs, provide written justifications for your selection process, in the space below.

c. If any of the subcontractors you have selected to perform the subcontracting opportunity you listed in SECTION B-1 is **not** a Texas certified HUB, provide written justification for your selection process (attach additional page if necessary):

Timely and adequate notice was sent to HUB entities, minority, women and veteran trade organizations. We received no responses.

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

OPTION 4- Self Perform- The respondent will NOT be subcontracting any portion of the contract and will utilize its own resources to complete the project.

1. Complete the Respondent and Requisition Information. The requisition number can be found on cover page of the solicitation document.

SECTION 1 RESPONDENT AND REQUISITION INFORMATION	
a. Respondent (Company) Name:	State of Texas VID #
Point of Contact:	Phone #:
E-mail Address:	Fax #:
b. Is your company a State of Texas certified HUB? <input type="checkbox"/> - Yes <input type="checkbox"/> - No	
c. Requisition #:	Bid Open Date: _____ (mm/dd/yyyy)

2. Enter your company's name and enter the requisition number at the top of the document. Select **NO, I will not be subcontracting any portion of the contract.**

Enter your company's name here: _____	Requisition #: _____
---------------------------------------	----------------------

SECTION 2 SUBCONTRACTING INTENTIONS
After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including goods and services, will be subcontracted. Note: In accordance with 34 TAC §20.11., an "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.
a. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:
<input type="checkbox"/> - Yes, I will be subcontracting portions of the contract. (If Yes, complete Item b, of this SECTION and continue to Item c of this SECTION.)
<input checked="" type="checkbox"/> - No, I will not be subcontracting <u>any</u> portion of the contract, and I will be fulfilling the entire contract with my own resources. (If No, continue to SECTION 3 and SECTION 4.)

3. Please check the appropriate box. **Yes-** in the space below list the specific pages/sections within your response which explains how your company will self-perform. **No-** in the space below explain how your company will self-perform

Enter your company's name here: _____	Requisition #: _____
---------------------------------------	----------------------

SECTION 3 SELF PERFORMING JUSTIFICATION (If you responded "No" to SECTION 2, Item a, you must complete this SECTION and continue to SECTION 4.)
Check the appropriate box (Yes or No) that indicates whether your response/proposal contains an explanation demonstrating how your company will fulfill the entire contract with its own resources.
<input type="checkbox"/> - Yes (If Yes, in the space provided below list the specific page(s)/section(s) of your proposal which explains how your company will perform the entire contract with its own equipment, supplies, materials and/or employees.)
<input type="checkbox"/> - No (If No, in the space provided below explain how your company will perform the entire contract with its own equipment, supplies, materials and/or employees.)

HOW TO COMPLETE A HUB SUBCONTRACTING PLAN

4. Enter your company's name and the requisition number at the top of the document. Sign, print your name, and date the Affirmation Section. Please make sure the individual executing the document has signature authority.

SECTION 4 AFFIRMATION

As evidenced by my signature below, I affirm that I am an authorized representative of the respondent listed in SECTION 1, and that the information and supporting documentation submitted with the HSP is true and correct. Respondent understands and agrees that, if awarded any portion of the requisition:

- The respondent will provide notice as soon as practical to all the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor for the awarded contract. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity they (the subcontractor) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage of the total contract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contracting agency's point of contact for the contract no later than ten (10) working days after the contract is awarded.
- The respondent must submit monthly compliance reports (Prime Contractor Progress Assessment Report – PAR) to the contracting agency, verifying its compliance with the HSP, including the use of and expenditures made to its subcontractors (HUBs and Non-HUBs). (The PAR is available at <http://www.window.state.tx.us/procurementprog/hub/hub-forms/progressassessmentrpt.xls>).
- The respondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the hiring of additional or different subcontractors and the termination of a subcontractor the respondent identified in its HSP. If the HSP is modified without the contracting agency's prior approval, respondent may be subject to any and all enforcement remedies available under the contract or otherwise available by law, up to and including debarment from all state contracting.
- The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site where services are being performed and must provide documentation regarding staffing and other resources.

Signature	Printed Name	Title	Date (mm/dd/yyyy)
-----------	--------------	-------	----------------------