ATTACHMENT B



HUB Subcontracting Plan (HSP)

In accordance with Texas Gov't Code §2161.252, the contracting agency has determined that subcontracting opportunities are probable under this contract. Therefore, all respondents, including State of Texas certified Historically Underutilized Businesses (HUBs) must complete and submit this State of Texas HUB Subcontracting Plan (HSP) with their response to the bid requisition (solicitation).

NOTE: Responses that do not include a completed HSP shall be rejected pursuant to Texas Gov't Code §2161.252(b).

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) §20.284 are:

- 11.2 percent for heavy construction other than building contracts,
- 21.1 percent for all building construction, including general contractors and operative builders' contracts,
- 32.9 percent for all special trade construction contracts,
- 23.7 percent for professional services contracts,
- 26.0 percent for all other services contracts, and
- 21.1 percent for commodities contracts.

- - Agency Special Instructions/Additional Requirements - -

In accordance with 34 TAC §20.285(d)(1)(D)(iii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent does not have a continuous contract* in place for more than five (5) years shall qualify for meeting the HUB goal. This limitation is designed to encourage vendor rotation as recommended by the 2009 Texas Disparity Study.

In accordance with 34 TAC §20.13(d)(1)(D)(iii), the goals below are the applicable goals for The University of Texas at Arlington only effective September 1, 2020.

THE GOAL FOR THIS PROCUREMENT IS 26.0%

Respondents shall submit a completed HUB Subcontracting Plan (HSP) to be considered responsive. Failure to submit a completed HSP shall result in the bid, proposal or other expression of interest to be considered Non-responsive.

Prime Contractor Progress Assessment Report (PAR) shall be submitted with each request for payment as a condition of payment.

Please note that phone logs are no longer acceptable documentation of Good Faith Effort. Only fax, email and certified letter are acceptable.

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 OpenDate:

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

SECTION 2: RESPONDENT'S 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 contracted staffing, goods and services will be subcontracted**. Note: In accordance with 34 TAC §20.282, a "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 <u>any</u> portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If **No**, continue to SECTION 3 and SECTION 4.)
- 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).

		HU	Non-HUBs	
Item #	Subcontracting Opportunity Description	Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract* in place for more than five (5) years.	expected to be subcontracted to HUBs with which you do not have a continuous contract* in place continuous contract* in place continuous contract*	
1		%	%	%
2		%	%	%
3		%	%	%
4		%	%	%
5		%	%	%
6		%	%	%
7		%	%	%
8		%	%	%
9		%	%	%
10		%	%	%
11		%	%	%
12		%	%	%
13		%	%	%
14		%	%	%
15		%	%	%
	Aggregate percentages of the contract expected to be subcontracted:	%	%	%

- 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, Itemb.
 - 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, ofthis SECTION.)
- 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 do not have a continuous contract* in place with for more than five (5) years, 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.)

*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

Enter your company's name here:	Requisition#:

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS (CONTINUATION SHEET)

This page can be used as a continuation sheet to the HSP Form's page 2, Section 2, Item b. Continue listing 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).

		HUBs		Non-HUBs	
Item #	Subcontracting Opportunity Description	Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract* in place for more than five (5) years.	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.	
16		%	%	%	
17		%	%	%	
18		%	%	%	
19		%	%	%	
20		%	%	%	
21		%	%	%	
22		%	%	%	
23		%	%	%	
24		%	%	%	
25		%	%	%	
26		%	%	%	
27		%	%	%	
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31		%	%	%	
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33		%	%	%	
34		%	%	%	
35		%	%	%	
36		%	%	%	
37		%	%	%	
38		%	%	%	
39		%	%	%	
40		%	%	%	
41		%	%	%	
42		%	%	%	
43		%	%	%	
	Aggregate percentages of the contract expected to be subcontracted:	%	%	%	

*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

Enter your company's name here:		Requisition#:	
SECTION 3: SELF PERFORMING JUSTIFICA esponded "No" to SECTION 2, Item a, in the space paterials and/or equipment.			
SECTION 4: Affirmation			
.s evidenced by my signature below, I affirm that I ar upporting documentation submitted with the HSP is			
The respondent will provide notice as soon as contract. The notice must specify at a minimum the opportunity they (the subcontractor) will perform	s practical to all the subcontractors (HUBs and N the contracting agency's name and its point of contant, the approximate dollar value of the subcontracting A copy of the notice required by this section must	lon-HUBs) of their selection as a subcontra act for the contract, the contract award numbering opportunity and the expected percentage	actor for the awarde er, the subcontractin e of the total contrac
The respondent must submit monthly compliance	be reports (Prime Contractor Progress Assessment nd expenditures made to its subcontractor		
subcontractors and the termination of a subcont	contracting agency prior to making any modificatractor the respondent identified in its HSP. If the lower than the contract or of the contract or	HSP is modified without the contracting age	ency's prior approval
•	contracting agency to perform on-site reviews of the on regarding staffing and other resources.	ne company's headquarters and/or work-site	where services are
Signature	Printed Name	Title	Date (mm/dd/yyyy)
Reminder:	email address	Phone Number	

- If you responded "Yes" to SECTION 2, Items c or d, you must complete an "HSP Good Faith Effort Method A (Attachment A)" for <u>each</u> of the subcontracting opportunities you listed in SECTION 2, Item b.
- If you responded "No" SECTION 2, Items c and d, you must complete an "HSP Good Faith Effort Method B (Attachment B)" for <u>each</u> of the subcontracting opportunities you listed in SECTION 2, Item b.

HSP Good Faith Effort - Method A (Attachment A)

Rev. 10/16

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 <u>each</u> 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 https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-a.pdf

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 the attachment.

Item Number: Description:

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 Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at http://mvcpa.cpa.state.tx.us/tpasscmblsearch/index.jsp. HUB status code "A" signifies that the company is a Texas certified HUB.

Company Name	Texas certified HUB	Texas VID or federal EIN Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank.	Approximate Dollar Amount	Expected Percentage of Contract
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
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	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%
	- Yes - No		\$	%

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to <u>all</u> the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. 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 <u>no later than ten (10) working days</u> after the contract is awarded.

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 <u>each</u> 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 https://www.comptroller.texas.gov/purchasing/vendor/hub/forms.php

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 the attachment.

Item Number: Description:

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

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 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 https://www.comptroller.texas.gov/purchasing/vendor/hub/forms.php

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs and 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 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 you submitting your bid response to the contracting agency. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) Historically Underutilized Business (HUB) Directory Search located at https://mycpa.cpa.state.tx.us/tpasscmblsearch/tpasscmblsearch.do. HUB status code "A" signifies that the company is a Texas certified HUB.
- b. List the <u>three (3)</u> Texas certified HUBs you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the company's Texas Vendor Identification (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	Texas VID (Do not enter Social Security Numbers.)	Date Notice Sent	Did the HUB Respond?	
			- Yes	- No
			- Yes	- No
			- Yes	- No

- c. Provide written notification of the subcontracting opportunity you listed in SECTION B-1 to two (2) or more 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 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 https://www.comptroller.texas.gov/purchasing/vendor/hub/resources.php
- d. List two (2) 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.

Trade Organizations or Development Centers	Date Notice Sent (mm/dd/yyyy)	Was the Notice Accepted	
		- Yes	- No
		- Yes	- No

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

Product of Now Heir VID / EIN, leave their VID / EIN, leave their VID / EIN field blank. Contract	nter your company's name here:		Requisition#:					
Item Number: Description:	iter the item number and description of the subcontracting opportunity you l	listed in SECTIO	N 2, Ite	em b , of the completed HS	P form for which yo	u are completinç		
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 Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure the you use the State of Texas 'Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at https://mycpa.cpa.state.tx.us/tpasscmblsearch/tpasscmblsearch.do. HUB status code "A" signifies that the company is a Texas certified HUB. Company Name Texas certified HUB Texas villo or federal EIN Denote steet Social Security Numbers. If you do not rever Social Security Numbers. If you do not rever Social Security Numbers. If you do not rever Viol / EIN fed blank. Press - No \$ \$ % - Yes	Enter the item number and description of the subcontracting opportunity for	or which you are co	mpletin	g this Attachment B continua	ition page.			
HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and ventrying their HUB status, ensure the you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at https://mycpa.cpa.state.tx.us/tpasscmblsearch/tpasscmblsearch.do. HUB status code "A" signifies that the company is a Texas certified HUB. Texas viD or federal EIN	Item Number: Description:							
Texas certified HUB Do not enter Social Security Numbers If you do not know their VID / EIN field blank. Percentage of Contract	HUB and their Texas Vendor Identification (VID) Number or federal Emp subcontracted, and the expected percentage of work to be subcontracte you use the State of Texas' Centralized Master Bidders List (CMBL) - H	ployer Identification ed. When searchir listorically Underu	n Numb ng for Te tilized B	per (EIN), the approximate dexas certified HUBs and veri usiness (HUB) Directory Se	ollar value of the working their HUB state arch located at	ork to be		
- Yes - No \$ % - Yes - No \$ %	Company Name	Texas certifie	d HUB	Do not enter Social Security Numbers. If you do not know their VID / EIN,		Percentage of		
- Yes - No \$ % - Yes - No \$ %		- Yes	- No		\$	%		
- Yes - No \$ % - Yes - No \$ %		- Yes	- No		\$	%		
- Yes - No \$ %		- Yes	- No		\$	%		
- Yes - No \$ % 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 write Write		- Yes	- No		\$	%		
- Yes - No \$ %		- Yes	- No		\$	%		
- Yes - No \$ %		- Yes	- No		\$	%		
- Yes - No \$ % - Yes - No \$ % - Yes - No \$ % 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 write		- Yes	- No		\$	%		
- Yes - No \$ % 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 write		- Yes	- No		\$	%		
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 write		- Yes	- No		\$	%		
		- Yes	- No		\$	%		
			you liste	d in SECTION B-1 is <u>not</u> a	Texas certified HU	B, provide <u>writte</u>		

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to <u>all</u> the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. 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 it (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 <u>no later than ten (10) working days</u> after the contract is awarded.



HUB Subcontracting Opportunity Notification Form

In accordance with Texas Gov't Code, Chapter 2161, each state agency that considers entering into a contract with an expected value of \$100,000 or more shall, before the agency solicits bids, proposals, offers, or other applicable expressions of interest, determine whether subcontracting opportunities are probable under the contract. The state agency I have identified below in **Section B** has determined that subcontracting opportunities are probable under the requisition to which my company will be responding.

34 Texas Administrative Code, §20.285 requires all respondents (prime contractors) bidding on the contract to provide notice of each of their subcontracting opportunities to at least https://exas.certified HUBs (who work within the respective industry applicable to the subcontracting opportunity), and allow the HUBs at least seven (7) working days to respond to the notice prior to the respondent submitting its bid response to the contracting agency. In addition, at least seven (7) working days prior to submitting its bid response to the contracting agency, the respondent must provide notice of each of its subcontracting opportunities to https://exas.certified HUBs https://exas.certified https://exas.certified HUBs https://exas.certified https://exas.certified https://exas.certified <a href="h

We respectfully request that vendors interested in bidding on the subcontracting opportunity scope of work identified in **Section C**, **Item 2**, reply no later than the date and time identified in **Section C**. **Item 1**. Submit your response to the point-of-contact referenced in **Section A**.

identified in Section C, item 1. Submit your response to the point-or-contact refer	enced in Section A.
SECTION A: PRIME CONTRACTOR'S INFORMATION	
Company Name:	State of Texas VID #:
Point-of-Contact:	Phone #:
E-mail Address:	Fax #:
SECTION B: CONTRACTING STATE AGENCY AND REQUISITION	INFORMATION
Agency Name:	
Point-of-Contact:	Phone #:
Requisition #:	Bid Open Date:
' -	(mm/dd/yyyy)
SECTION C: SUPCONTRACTING OPPORTUNITY PESPONSE DI	JE DATE DESCRIPTION REQUIREMENTS AND RELATED INFORMATION
Potential Subcontractor's Bid Response Due I	
	company's bid for the subcontracting opportunity identified below in Item 2,
we must receive your bid response no later than	on Central Time Date (mm/dd/yyyy)
In accordance with 24 TAC \$20,285, each notice of subcontracting apports	unity shall be provided to at least three (3) Texas certified HUBs, and allow the HUBs at
least seven (7) working days to respond to the notice prior to submitting our to us submitting our bid response to the contracting agency, we must organizations or development centers (in Texas) that serves members and American, Woman, Service Disabled Veteran) identified in Texas Administration (A working day is considered a normal business day of a state agency, no	r bid response to the contracting agency. In addition, at least seven (7) working days prior provide notice of each of our subcontracting opportunities to two (2) or more trade of groups (i.e., Asian Pacific America n, Black American, Hispanic America n, Native rative Code, §20.282(19)(C). In the including weekends, federal or state holidays, or days the agency is declared closed are is sent/provided to the HUBs and to the trade organizations or development centers.
2. Subcontracting Opportunity Scope of Work:	
3. Required Qualifications:	NotApplicable
4. Bonding/Insurance Requirements:	- NotApplicable
5. Location to review plans/specifications:	NotApplicable



HUB Subcontracting Plan (HSP) Prime Contractor Progress Assessment Report

	and submitted to the contracting agency <u>each mont</u> Date of Award:								
Contract/Requisition Number:				Object Code:		(Agency Use Only)			
Contracting Agency/University Name:				((3.) ,			
Contracting Agency/oniversity Name.									
Contractor (Company) Name:	State of Texas VID #:								
Point of Contact:	Phone #:								
Reporting (Month) Period:	Total Amount Paid this Reporting Period to Contractor: \$								
Report HU When verifying subcontractors' HU Directory Search located at: https://mycpa.cp		the State of T	exas' Centralized Maste	er Bidders List (CMBL) - H	istorically Underutilized				
Subcontractor's Name	Subcontractor's VID or HUB Certificate Number (if Non- HUB, leave blank)	Texas Certified HUB? (Yes or No)	Total Contract \$ Amount from HSP with Subcontractor	Total \$ Amount Paid This Reporting Period to Subcontractor	Total Contract \$ Amount Paid to Date to Subcontractor	Object Code (Agency Use Only)			
			\$	\$	\$				
			\$	\$	\$				
			\$	\$	\$				
			\$	\$	\$				
			\$	\$	\$				
			\$	\$	\$				
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			\$	\$	\$				
		TOTALS:	\$	\$	\$				
Signature:		Title: _		Date	:				
Printed Name:		Ph	one #:			8			