REQUEST FOR PROPOSAL

RFP#20210831
Construction Manager at Risk (CMR)
Hillside Project

Proposal Submittal Deadline: **August 31st, 2021**
*2:00 pm, Local Time*

Prepared by:
Kevin J. Boyd - Director of Real Estate
Metrocare
1345 River Bend Drive | Suite 200
Dallas, TX 75247
Date Issued: August 10th, 2021
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SECTION 1: INTRODUCTION

1.1 METROCARE
METROCARE, formerly known as Dallas County MHMR, is the largest provider of behavioral health services in Dallas County, serving nearly 55,000 adults and children annually. For over 50 years, Metrocare has provided a broad array of services to people with mental health challenges and developmental disabilities from mental health care, primary care centers, services for veterans and their loved ones, accessible pharmacies, housing, and supportive social services. Alongside the clinical care, researchers and teachers from Metrocare’s Altshuler Center for Education & Research lead the way in advancing innovative mental health research while training clinicians needed to expand the clinical workforce across the state.

METROCARE receives federal and state financial assistance for numerous programs, the more significant of which include the Texas Department of Health and Human Services and Medicaid/Medicare/Insurance reimbursements.

Proposals submitted in response to this RFP shall be for goods and/or services provided to all of the following: Dallas County MHMR, Dallas County Mental Health & Mental Retardation, Dallas County MHMR dba METROCARE, and METROCARE, as agreed to in writing by the parties.

1.2 THE HILLSIDE PROJECT
METROCARE is soliciting qualified proposals for the selection of a Construction Manager at Risk (CMAR) to provide pre-construction and construction services for the Hillside Project - a campus redevelopment project. The Hillside Project includes the demolition of 12 existing buildings and new construction of 3 LEED GOLD buildings on a 10-acre campus located in the southwestern sector of Dallas, TX. In addition to the 3 new buildings, the campus will include a comprehensive outdoor play therapy area and an expansive outdoor garden/community space.

The project is to be delivered in two phases. Phase 1 includes demolition, sitework, construction of Buildings I, II, an outdoor playground, and the outdoor garden. Phase 2 includes the finish out of 26,460 square feet on levels 2 & 3 of Building II, parking lot improvements on an adjacent parcel, and the construction of Building III.

Building I is a one level, 45,200 square foot medical office building with 2,315 square feet of canopy and 1,165 square foot outdoor patio with pergola. Services provided include outpatient, therapeutic, and pharmacy services.

Building II is a 5 level structure with a basement combining 85,545 square feet of finished office space, 9,839 square feet of terrace with a 163,316 square foot parking
garage. Additionally, Building II was flexibly designed to allow future expansion of office space on levels 2 and 3 of up to 26,460 additional square feet (13,230 per level).

Building III is a one level, 740 square foot meeting space.

When complete, these new facilities will house a broad array of behavioral health, therapy, pharmaceutical services, and other support for children, adolescents, and adults experiencing a mental health challenge or an intellectual developmental disability.

Todd Howard & Associates (th+a) is the architect of record.

This project is tax-exempt. (Federal Tax ID #75-1285603)

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SECTION 2: NOTICE TO PROPOSER

2.1 Submittal Deadline
METROCARE will accept proposals submitted in response to this RFP until 2:00 PM., CST, on August 31st, 2021 (the “Submittal Deadline”).

2.2 Contact Person
Any questions or concerns regarding this RFP should be directed to the following METROCARE contact prior to 2:00 PM., CST, on August 24th, 2021 (the "Question Submittal Deadline"):  

Kevin J. Boyd, Director of Real Estate & Facilities Mgmt.

METROCARE specifically instructs all interested parties to restrict all contact and questions regarding this RFP to written communications forwarded to the Contact via the following link:

kevin.boyd@metrocareservices.org

The Contact must receive all questions or concerns no later than 2:00 PM, local time on August 24th, 2021, 2:00 PM local time. It is METROCARE’s intent to respond to all appropriate questions and concerns; however, METROCARE reserves the right to decline to respond to any question or concern.

Answers to questions will be posted via addendum to this RFP on METROCARE’s Bid Opportunities web page located at:

www.metrocareservices.org/hillsiderfp

Proposers are strongly advised to review this page at least four (4) business days prior to the due date for submissions or earlier to ensure that you have received all applicable addenda.

2.3 Criteria for Selection
METROCARE will conduct a comprehensive, fair, and impartial evaluation of all Proposals received in response to this RFP. METROCARE may appoint a selection committee to perform the evaluation. Each proposal will be analyzed to determine overall responsiveness and qualifications under this RFP. Criteria to be evaluated may include the items listed below.

The selection committee may select all, some, or none of the Proposers for interviews. If METROCARE elects to conduct interviews, Proposers may be interviewed and re-scored based upon the same criteria, or other criteria to be determined by the selection committee.
METROCARE may also request additional information from Proposers at any time prior to final approval of a selected Proposer. METROCARE reserves the right to select one, or more, or none of the Proposers to provide services.

2.4 Best Value Determination
The winning bidder will be chosen based on the best overall value as determined by METROCARE.
The following will be taken into consideration in no specific order:
- Price
- Qualifications of the proposer
- Portfolio (Past performance/Reference examples)
- Relevant references provided
- Project Management methodology
- HUB Certification
- Thoroughness of bid submitted

Furthermore, METROCARE may consider information related to past contract performance of a proposer including, but not limited to, the Texas Comptroller of Public Accounts Vendor Performance Tracking System.

2.5 Schedule of Key Events
Issuance of RFP 08/10/2021
Pre-Submittal Site Visit & Conference #1 08/18/2021, 10:00AM Local Time
Pre-Submittal Site Visit & Conference #2 08/19/2021, 10:00AM Local Time
Question Submittal Deadline 08/24/2021, 2:00PM Local Time
Answers to Questions Posted 08/25/2021, 5:00PM Local Time
Submittal Deadline 08/31/2021, 2:00PM Local Time

2.6 Historically Underutilized Businesses
In accordance with Texas Gov't Code §2161.252 and Texas Administrative Code §20.14, each state agency (including community centers) as defined by §2151.002 that considers entering into a contract with an expected value of $100,000 or more shall, before agency solicits bids, proposals, offers, or other applicable expressions of interest, determine whether subcontracting opportunities are probable under the contract.

METROCARE has determined that subcontracting opportunities (check one)
☒ are probable ☐ are not probable under the agreement

Accordingly, all proposers must submit a HUB subcontracting plan (HSP). A copy of the HSP forms and related information is attached to this RFP (refer to Attachment B). For questions regarding the HUB Program or submittal of your HSP, vendors may contact Metrocare Compliance at:

Compliance@metrocareservices.org
The HSP must be submitted in its own individual sealed package and marked with “HSP” and the RFP # on the outside. This sealed package is to be included in the master container along with the sealed bid response.

**FAILURE TO SUBMIT AN HSP WITH YOUR RESPONSE WILL RESULT IN THE DISQUALIFICATION OF YOUR PROPOSAL.**

2.7 Pre-Submittal Site Visits & Conferences
Two pre-submittal site visits/conferences are scheduled for:

**Site Visit & Conference #1**
Date: August 18\(^{th}\), 2021
Time: 10:00 AM
Location: 1353 N. Westmoreland Rd. Dallas, TX 75211

**Site Visit & Conference #2**
Date: August 19\(^{th}\), 2021
Time: 10:00 AM
Location: 1353 N. Westmoreland Rd. Dallas, TX 75211

*Attendance of at least one site visit & conference is mandatory.* The purpose of the pre-bid meeting is to provide bidders the opportunity to ask questions related to this RFP or the details of the building specifications and construction documents.

If you intend to send representatives to the meeting please send a confirmation email to Ivana Topalovic, Project Coordinator, before 3:00 PM on August 17\(^{th}\), 2021

ivana.topalovic@metrocareservices.org

Answers to questions received prior to the pre-bid meeting will be distributed to all bidders. Further questions may also be submitted by email until the deadline for questions noted above. All questions and answers will be shared with all bidders.
SECTION 3: SUBMITTAL OF PROPOSAL

3.1 Number of Copies
Proposer must submit one (1) complete original copy of its entire proposal. An original signature by an authorized officer must appear on the Execution of Offer (ref. Appendix One, Section 2) of submitted proposal. The Proposer’s proposal bearing an original signature should contain the mark “original” on the front cover of the proposal.

METROCARE does not consider electronic signatures to be valid for submittal of competitive solicitation responses. Therefore, the original signature must be a “wet signature.”

In addition to the original proposal, Proposer must submit one (1) complete copy of the entire proposal electronically on a USB flash drive. The USB flash drive must include a protective cover and labeled with the Proposer’s name and the RFP number.

3.2 Submittal
Proposer shall submit proposal in a sealed package, clearly marked on the front of the package “RFP#20210831 – Hillside Project”. All proposals must be delivered in person to:

Kevin J. Boyd
Director of Real Estate & Facilities Management
Metrocare Services
1345 River Bend Drive
Suite 200
Dallas, Texas, 75247

Proposals must be received by METROCARE on or before the Submittal Deadline (ref. Section 2.1 of this RFP) and should be delivered to:

Proposals must be typed on letter-size (8.5” x 11”) paper. Sections within the proposal are to be tabbed for ease of reference. Pre-printed material(s), if included, should be referenced in the proposal and included as labeled attachments.

Both the proposal and the completed HSP must be in individual sealed envelopes and both envelopes placed in one sealed master container.

Each bidder must sign the “Proposals Submitted” form and be acknowledged by an authorized representative of METROCARE at the time of proposal delivery. Proposals submitted prior to the above time and date may be modified provided such modifications are sealed and received at the same address prior to the date and time set for submissions of proposals. Any proposal or modifications received after this time shall not be considered.
Note: Electronic submittals via facsimile or other electronic means will not be accepted, unless otherwise specified within this RFP.

3.3 Proposal Validity Period
Each proposal must state that it will remain valid for METROCARE’s acceptance for a minimum of one hundred and eighty (180) days after the Submittal Deadline, to allow time for evaluation, selection, and, any unforeseen delays. Should circumstances arise that require an extension to this period, METROCARE reserves the right to provide extensions at its discretion.

3.4 Terms and Conditions
Proposer must comply with the requirements and specifications contained in this RFP, including the Notice to Proposer (ref. Section 2 of this RFP), Proposal Requirements (ref. Section 4 of this RFP).

METROCARE intends to enter into a Guaranteed Maximum Price (GMP) agreement with the Contractor. Award is contingent upon the successful execution of agreement.

A proposal may be withdrawn prior to the due date by sending a written request to the designated METROCARE Staff Contact Person.

METROCARE will require the selected Proposer to execute a contract with METROCARE prior to award. No work shall commence until METROCARE signs the contract document(s). In the event the parties cannot negotiate and execute a contract within the time specified, METROCARE reserves the right to terminate negotiations with the selected Proposer and commence negotiations with another Proposer.

This RFP does not commit METROCARE to enter into a contract, award any services related to this RFP, nor does it obligate METROCARE to pay any costs incurred in preparation or submission of a proposal or in anticipation of a contract.

Proposer agrees and understands that, if selected, it and all persons designated by it to provide services in connection with a contract is (are) and shall be deemed to be an independent contractor(s), responsible for its (their) respective acts or omissions, and that METROCARE shall in no way be responsible for Proposer’s actions, and that none of the parties hereto will have authority to bind the others or to hold out to third parties that is has such authority.

Final approval of a selected Proposer is subject to the action of METROCARE’s Board of Trustees.
SECTION 4 – PROPOSAL REQUIREMENTS

4.1 Submittal Checklist
Proposer is to complete, sign, and return the following documents as a part of its proposal. Failure to return each of these items with the proposal will result in rejection of the proposal.

- Signed and Completed Execution of Offer.
- Signed and Completed HUB Subcontracting Plan. (ref. Section 2.5 of this RFP).

PLEASE SUBMIT THIS INFORMATION IN A SEPARATE ENVELOPE AS SPECIFIED IN SECTION 2.5.

- Responses to Proposer's General Questionnaire.
- Signed and Completed Addenda Checklist
- Responses to evaluation criteria.
- Certificate of Insurance indicating coverages meet or exceed amounts as required by METROCARE (ref. Section 4.3 of this RFP).
- W9
- Signed and Completed Conflict of Interest Form.

4.2 General Requirements
Proposers must meet ALL requirements in order to submit a qualified proposal.

- This is an “all or nothing” bid. If any item is “no bid” the entire response will be dismissed.
- Items must be an “exact match” unless prior written approval from Metrocare has been received. Please refer to Project Specifications for details.
- No “add-ons” will be allowed after bids are submitted. The winning bidder is bound by the dollar amount submitted and no changes or additions will be made unless requested in writing by an authorized representative of METROCARE.
- All bidders are required to include a contingency fee equal to 1.5% of their total bid to account for any unforeseen issues.
- Bidders are responsible for their own field verifications.
- Any deviations from construction documents provided by METROCARE must be approved in writing by both the Architect & Owner Representative.
- Winning bidder will attend mandatory weekly construction meetings each Friday at 10:30am until the project is complete - including completion of all punch items.
- Bids must be presented in a sealed envelope and must be delivered in person.

4.3 Insurance Requirements
Proposers must carry $XXXXXX.XX general aggregate and $XXXXXX.XX product aggregate insurance.
A Certificate of Insurance must be included in your proposal.
4.4 **References Required**
Proposals must include 3 references (designated as Attachment A). These references are highly recommended to be from like organizations. Hospitals, Mental Health, Substance Abuse, Behavioral Health, Family Counseling, and Autism Treatment centers are examples of like organizations.

4.5 **Additional Requirements**
- Installers/workers must be easily identifiable at all times by METROCARE staff.
- Uniforms showing the name of the company represented are preferred.
- Workers must carry government issued ID at all times.
- Workers must NOT leave tools unattended for any amount of time anywhere on site.
- Workers must leave the area clean and clutter free upon completion of work each day.
- Workers may not carry weapons of any sort on their person or in their vehicle.
- Carpet knives and other weapon-like tools necessary to performing the job at hand must be in toolboxes and not carried on the workers’ person.
- All workers, both employees and subcontractors who will be on METROCARE property are to be drug and background checked. Proof of drug and background check must be provided prior to start of project.
- Workers may be searched by security at ANY time while on METROCARE property.
- Workers are NOT to buy, sell, give or trade ANY item to, from or with any employee or patient of METROCARE.
- Two 24/7 points of contact must be available to METROCARE via phone during the entirety of the project. These contacts must be Supervisor level or above.
- Crews are to be supervised at all times while on METROCARE property.

All proposals become the property of METROCARE upon receipt and will not be returned. Any information deemed to be confidential by Proposer should be clearly noted on the page(s) where confidential information is contained; however, METROCARE cannot guarantee that it will not be compelled to disclose all or part of any public record.

Any cost or expense incurred by the Proposer that is associated with the preparation of the Proposal or during any phase of the selection process shall be borne solely by the Proposer.
SECTION 5 – AWARD OF CONTRACT

5.1 AWARD OF CONTRACT AND RESERVATION OF RIGHTS

METROCARE reserves the right to award one, more than one, or no contract(s) in response to this RFP.

The contract, if awarded, will be awarded to the Proposer(s) whose Proposal(s) is deemed most advantageous to METROCARE, as determined by the selection committee.

METROCARE may accept any Proposal in whole or in part. If subsequent negotiations are conducted, they shall not constitute a rejection or alternate RFP on the part of METROCARE.

METROCARE reserves the right to accept one or more proposals or reject any or all proposals received in response to this RFP, and to waive informalities and irregularities in the proposals received.

METROCARE reserves the right to amend this RFP prior to the proposal due date.

METROCARE reserves the right to terminate this RFP and reissue a subsequent solicitation and/or remedy technical errors in the RFP process.

A proposal may be withdrawn prior to the due date by sending a written request to the designated METROCARE Staff Contact Person.

METROCARE will require the selected Proposer(s) to execute a Guaranteed Maximum Price (GMP) contract with METROCARE prior to award. No work shall commence until METROCARE signs the contract document(s). In the event the parties cannot negotiate and execute a contract within the time specified, METROCARE reserves the right to terminate negotiations with the selected Proposer and commence negotiations with another Proposer.

This RFP does not commit METROCARE to enter into a contract, award any services related to this RFP, nor does it obligate METROCARE to pay any costs incurred in preparation or submission of a proposal or in anticipation of a contract.

Proposer agrees and understands that, if selected, it and all persons designated by it to provide services in connection with a contract is (are) and shall be deemed to be an independent contractor(s), responsible for its (their) respective acts or omissions, and that METROCARE shall in no way be responsible for Proposer’s actions, and that none of the parties hereto will have authority to bind the others or to hold out to third parties that is has such authority.
SECTION 6 – RESTRICTIONS ON COMMUNICATIONS

6.1 Restrictions on Communications
Outside of the scheduled question and answer period and required pre-bid site visits, Proposers are prohibited from communicating with METROCARE employees regarding this RFP from the time this RFP has been released until the contract has been awarded. These restrictions extend to “thank-you” letters, phone calls, emails, and any contact that results in the direct or indirect discussion of this RFP and/or Proposals submitted by Proposers. Violation of this provision by the Proposer and/or their agent may lead to disqualification of Proposer’s proposal from consideration.
SECTION 7 – SCOPE OF SERVICES

7.1 Scope of Services
METROCARE is soliciting qualified proposals for the selection of a Construction Manager at Risk (CMAR) to provide pre-construction and construction services for the Hillside Project - a campus redevelopment project.

7.2 Specifications/Deliverables
The project is currently in the construction documents phase. Design Development (100%) documents and Project Specifications can be accessed via the link below.

HILLSIDE PROJECT: PLANS & SPECIFICATIONS

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APPENDIX ONE

Section 1: Affirmations and Confirmations

1.1 Purpose

METROCARE is soliciting competitive sealed proposals from Proposers having suitable qualifications and experience providing services in accordance with the terms, conditions and requirements set forth in this RFP. This RFP provides sufficient information for interested parties to prepare and submit proposals for consideration by METROCARE.

By submitting a proposal, Proposer certifies that it understands this RFP and has full knowledge of the scope, nature, quality, and quantity of the services to be performed, the detailed requirements of the services to be provided, and the conditions under which such services are to be performed. Proposer also certifies that it understands that all costs relating to preparing a response to this RFP will be the sole responsibility of the Proposer.

PROPOSER IS CAUTIONED TO READ THE INFORMATION CONTAINED IN THIS RFP CAREFULLY AND TO SUBMIT A COMPLETE RESPONSE TO ALL REQUIREMENTS AND QUESTIONS AS DIRECTED.

1.2 Inquiries and Interpretations

METROCARE may in its sole discretion respond in writing to written inquiries concerning this RFP and mail its response as an Addendum to all parties recorded by METROCARE as having received a copy of this RFP. Only METROCARE's responses that are made by formal written Addenda will be binding on METROCARE. Any verbal responses, written interpretations or clarifications other than Addenda to this RFP will be without legal effect. All Addenda issued by METROCARE prior to the Submittal Deadline will be and are hereby incorporated as a part of this RFP for all purposes. These addenda shall be posted to METROCARE’ Bid Opportunities Web Page located at: www.metrocareservices.org/HillsideRFP

Vendors are strongly encouraged to visit this page at least four (4) business days prior to submitting your response to ensure that you have received all applicable addenda.

Proposers are required to acknowledge receipt of each Addendum as specified in this Section. The Proposer must acknowledge all Addenda by completing, signing and returning the Addenda Checklist in Section 4 of this appendix. The Addenda Checklist should accompany the Proposer's proposal.

Any interested party that receives this RFP by means other than directly from METROCARE is responsible for notifying METROCARE that it has received an RFP package, and should provide its name, address, telephone number and FAX number to METROCARE, so that if METROCARE issues Addenda to this RFP or provides written answers to questions, that information can be provided to such party.

1.3 Public Information

Proposer is hereby notified that METROCARE strictly adheres to all statutes, court decisions and the opinions of the Texas Attorney General with respect to disclosure of public information.

All information, documentation, and other materials submitted in response to this RFP is subject to public disclosure under the Texas Public Information Act (Government Code, Chapter 552.001, et seq.). Proposer will be advised of a request for public information that implicates their materials if those materials are marked "Confidential and Proprietary" and will have the opportunity to raise any objections to disclosure to the Texas Attorney General.

1.4 Type of Agreement

Guaranteed Maximum Price construction contract

1.5 Proposal Evaluation Process

METROCARE will select Contractor by using the competitive sealed proposal process described in this Section.

METROCARE may make the selection of Contractor based on the proposals initially submitted, without discussion, clarification or modification. In the alternative, METROCARE may make the selection of Contractor based on negotiation with any of the Proposers. In conducting such negotiations, METROCARE will use commercially reasonable efforts to avoid disclosing the contents of competing proposals.

At METROCARE' sole option and discretion, METROCARE may discuss and negotiate elements of proposals submitted with any or all proposers. Furthermore, METROCARE may request presentations or system demonstrations from any or all proposers at no cost or obligation to METROCARE.

After submission of a proposal but before final selection of Contractor is made, METROCARE may permit a Proposer to revise its proposal in order to obtain the Proposer's best and final offer. In that event, representations made by Proposer in its revised proposal, including price and fee quotes, will be binding on Proposer. METROCARE is not obligated to select the Proposer offering the most attractive economic terms if that Proposer is not the most advantageous to METROCARE overall, as determined by METROCARE according to the evaluation criteria contained herein.

METROCARE reserves the right to (a) enter into an agreement for all or any portion of the requirements and specifications set forth in this RFP with one or more Proposers, (b) reject any and all proposals and re-solicit proposals, or (c) reject any and all proposals and temporarily or permanently abandon this selection process, if deemed to be in the best interests of
1.6 Acceptance of Evaluation Methodology
By submitting a proposal, Proposer acknowledges (1) Proposer's acceptance of [a] the Proposal Evaluation Process (ref. Section 1.5 of APPENDIX ONE), [b] the Criteria for Selection (ref. 2.3 of this RFP), [c] the Specifications and, [d] the terms and all other requirements and specifications set forth in this RFP; and (2) Proposer's recognition that some subjective judgments must be made by METROCARE during this RFP process.

1.7 Solicitation for Proposal and Proposal Preparation Costs
Proposer understands and agrees that (1) this RFP is a solicitation for proposals and METROCARE has made no representation written or oral that one or more agreements with METROCARE will be awarded under this RFP; (2) METROCARE issues this RFP predicated on METROCARE’s anticipated requirements for the Services, and METROCARE has made no representation, written or oral, that any particular scope of services will actually be required by METROCARE; and (3) Proposer will bear, as its sole risk and responsibility, any cost that arises from Proposer’s preparation of a proposal in response to this RFP.

1.8 Proposal Requirements and General Instructions
1.8.1 Proposer should carefully read the information contained herein and submit a complete proposal in response to all requirements and questions as directed.
1.8.2 Proposals and any other information submitted by Proposer in response to this RFP will become the property of METROCARE.
1.8.3 METROCARE will not provide compensation to Proposer for any expenses incurred by the Proposer for proposal preparation or for demonstrations or oral presentations that may be made by Proposer. Proposer submits its proposal at its own risk and expense.
1.8.4 Proposals that (i) are qualified with conditional clauses; (ii) alter, modify, or revise this RFP in any way; or (iii) contain irregularities of any kind, are subject to disqualification by METROCARE, at METROCARE’s sole discretion.
1.8.5 Proposals should be prepared simply and economically, providing a straightforward, concise description of Proposer's ability to meet the requirements and specifications of this RFP. Emphasis should be on completeness, clarity of content, and responsiveness to the requirements and specifications of this RFP. Proposers are encouraged to address the evaluation criteria thoroughly and completely.
1.8.6 METROCARE makes no warranty or guarantee Proposer's that an award will be made as a result of this RFP. METROCARE reserves the right to accept or reject any or all proposals, waive any formalities, procedural requirements, or minor technical inconsistencies, and delete any requirement or specification from this RFP or the Agreement when deemed to be in METROCARE's best interest. METROCARE reserves the right to seek clarification from any Proposer concerning any item contained in its proposal prior to final selection. Such clarification may be provided by telephone conference or personal meeting with or writing to METROCARE, at METROCARE’s sole discretion. Representations made by Proposer within its proposal will be binding on Proposer.
1.8.7 Any proposal that fails to comply with the requirements contained in this RFP may be rejected by METROCARE, in METROCARE' sole discretion.
1.8.8 Should a vendor wish to protest or dispute determinations or awards made in connection with this RFP, it shall be done by submitting a Letter of Protest/Dispute to METROCARE Senior Director for Procurement Services outlining the issue to be considered.

1.9 Execution of Offer
Proposer must complete, sign and return the attached Execution of Offer (ref. Appendix One, Section 2) as part of its proposal. The Execution of Offer must be signed by a representative of Proposer duly authorized to bind the Proposer to its proposal. Any proposal received without a completed and signed Execution of Offer may be rejected by METROCARE, in its sole discretion.

1.10 Pricing and Delivery Schedule
Proposer must complete and return the Pricing Schedule (ref. Section 5 of this RFP), as part of its proposal. In the Pricing and Delivery Schedule, the Proposer should describe in detail (a) the total fees for the entire scope of the Services; and (b) the method by which the fees are calculated. The fees must be inclusive of all associated costs for delivery, labor, insurance, taxes, overhead, and profit.

METROCARE will not recognize or accept any charges or fees to perform the Services that are not specifically stated in the Pricing and Delivery Schedule.

In the Pricing and Delivery Schedule, Proposer should describe each significant phase in the process of providing the Services to METROCARE, and the time period within which Proposer proposes to be able to complete each such phase.

1.11 Proposer's General Questionnaire
Proposals must include responses to the questions in Section 3 of Appendix 1. Proposer should reference the item number and repeat the question in its response. In cases where a question does not apply or if unable to respond, Proposer should refer to the item number, repeat the question, and indicate N/A (Not Applicable) or N/R (No Response), as appropriate. Proposer should explain the reason when responding N/A or N/R.
1.12 **Addenda Checklist**  
Proposer should acknowledge all addenda to this RFP (if any) by completing, signing and returning the Addenda Checklist (ref. Appendix One, Section 4) as part of its proposal. Any proposal received without a completed and signed Addenda Checklist may be rejected by METROCARE, in its sole discretion.

1.13 **Submittal**  
Proposer should submit all proposal materials enclosed in a sealed envelope, box, or container. The RFP No. (ref. Section 1.3 of this RFP) and the Submittal Deadline (ref. Section 2.1 of this RFP) should be clearly shown in the lower left-hand corner on the top surface of the container. In addition, the name and the return address of the Proposer should be clearly visible.

Proposer must also submit the number of originals of the HUB Subcontracting Plan (also called the HSP), if required, as directed by this RFP (ref. Section 2.5 of the RFP.)

**Note:** If proposal requires the submittal of an HSP, the completed HSP documents and the proposal response documents must be in separate sealed envelopes. Both envelopes are to be placed in a master container, and such master container should be marked in the lower left-hand corner with the RFP number and name and Submittal Deadline, as stated above.

Upon Proposer’s request and at Proposer’s expense, METROCARE will return to a Proposer its proposal received after the Submittal Deadline if the proposal is properly identified. METROCARE will not under any circumstances consider a proposal that is received after the Submittal Deadline or which is not accompanied by the number of completed and signed originals of the HSP that are required by this RFP.

METROCARE will not accept proposals submitted by telephone, proposals submitted by facsimile (“fax”) transmission, or proposals submitted by electronic transmission (i.e., e-mail) in response to this RFP.

Except as otherwise provided in this RFP, no proposal may be changed, amended, or modified after it has been submitted to METROCARE. However, a proposal may be withdrawn and resubmitted at any time prior to the Submittal Deadline. No proposal may be withdrawn after the Submittal Deadline without METROCARE’s consent, which will be based on Proposer's submittal of a written explanation and documentation evidencing a reason acceptable to METROCARE, in METROCARE’s sole discretion.

By signing the Execution of Offer (ref. Appendix One, Section 2) and submitting a proposal, Proposer certifies that any terms, conditions, or documents attached to or referenced in its proposal are applicable to this procurement only to the extent that they (a) do not conflict with the laws of the State of Texas or this RFP and (b) do not place any requirements on METROCARE that are not set forth in this RFP or in the Appendices to this RFP. Proposer further certifies that the submission of a proposal is Proposer's good faith intent to enter into the Agreement with METROCARE as specified herein and that such intent is not contingent upon METROCARE’s acceptance or execution of any terms, conditions, or other documents attached to or referenced in Proposer's proposal.

1.14 **Page Size, Binders, and Dividers**  
Proposals must be typed on letter-size (8-1/2” x 11”) paper, and must be submitted in a binder. Preprinted material should be referenced in the proposal and included as labeled attachments. Sections within a proposal should be divided by tabs for ease of reference.

1.15 **Table of Contents**  
Proposals must include a Table of Contents with page number references. The Table of Contents must contain sufficient detail and be organized according to the same format as presented in this RFP, to allow easy reference to the sections of the proposal as well as to any separate attachments (which should be identified in the main Table of Contents). If a Proposer includes supplemental information or non-required attachments with its proposal, this material should be clearly identified in the Table of Contents and organized as a separate section of the proposal.

1.16 **Pagination**  
All pages of the proposal should be numbered sequentially in Arabic numerals (1, 2, 3, etc.). Attachments should be numbered or referenced separately
Section 2: Execution of Offer

THIS EXECUTION OF OFFER MUST BE COMPLETED, SIGNED AND RETURNED WITH PROPOSER’S RESPONSE. FAILURE TO COMPLETE, SIGN AND RETURN THIS EXECUTION OF OFFER WITH THE PROPOSER’S RESPONSE WILL RESULT IN THE REJECTION OF THE PROPOSAL.

2.1 By signature hereon, Proposer represents and warrants the following:

2.1.1 Proposer acknowledges and agrees that (1) this RFP is a solicitation for a proposal and is not a contract or an offer to contract; (2) the submission of a proposal by Proposer in response to this RFP will not create a contract between METROCARE and Proposer; (3) METROCARE has made no representation or warranty, written or oral, that one or more contracts with METROCARE will be awarded under this RFP; and (4) Proposer will bear, as its sole risk and responsibility, any cost arising from Proposer’s preparation of a response to this RFP.

2.1.2 Proposer is a reputable company that is lawfully and regularly engaged in providing the Services.

2.1.3 Proposer has the necessary experience, knowledge, abilities, skills, and resources to perform the Services.

2.1.4 Proposer is aware of, is fully informed about, and is in full compliance with all applicable federal, state and local laws, rules, regulations and ordinances.

2.1.5 Proposer understands (i) the requirements and specifications set forth in this RFP and (ii) the terms and conditions set forth in the Agreement under which Proposer will be required to operate.

2.1.6 If selected by METROCARE, Proposer will not delegate any of its duties or responsibilities under this RFP or the Agreement to any sub-contractor, except as expressly provided in the Agreement.

2.1.7 If selected by METROCARE, Proposer will maintain any insurance coverage as required by the Agreement during the term thereof.

2.1.8 All statements, information and representations prepared and submitted in response to this RFP are current, complete, true and accurate. Proposer acknowledges that METROCARE will rely on such statements, information and representations in selecting Contractor. If selected by METROCARE, Proposer will notify METROCARE immediately of any material change in any matters with regard to which Proposer has made a statement or representation or provided information.

2.1.9 Proposer will defend with counsel approved by METROCARE, indemnify, and hold harmless METROCARE, Dallas County Mental Health and Mental Retardation, DCMHMR, and all of their trustees, officers, agents and employees, from and against all actions, suits, demands, costs, damages, liabilities and other claims of any nature, kind or description, including reasonable attorneys’ fees incurred in investigating, defending or settling any of the foregoing, arising out of, connected with, or resulting from any negligent acts or omissions or willful misconduct of Proposer or any agent, employee, subcontractor, or supplier of Proposer in the execution or performance of any contract or agreement resulting from this RFP.

2.1.10 Pursuant to Sections 2107.008 and 2252.903, Government Code, any payments owing to Proposer under any contract or agreement resulting from this RFP may be applied directly to any debt or delinquency that Proposer owes the State of Texas or any agency of the State of Texas regardless of when it arises, until such debt or delinquency is paid in full.

2.2 By signature hereon, Proposer offers and agrees to furnish the services to METROCARE and comply with all terms, conditions, requirements, and specifications set forth in this RFP.

2.3 By signature hereon, Proposer affirms that it has not given or offered to give, nor does Proposer intend to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor or service to a public servant in connection with its submitted proposal. Failure to sign this Execution of Offer, or signing with a false statement, may void the submitted proposal or any resulting contracts, and the Proposer may be removed from all proposal lists at METROCARE.

2.4 By signature hereon, Proposer certifies that it is not currently delinquent in the payment of any taxes due under Chapter 171, Tax Code, or that Proposer is exempt from the payment of those taxes, or that Proposer is an out-of-state taxable entity that is not subject to those taxes, whichever is applicable. A false certification will be deemed a material breach of any resulting contract or agreement and, at METROCARE’s option, may result in termination of any resulting contract or agreement.

2.5 By signature hereon, Proposer hereby certifies that neither Proposer nor any firm, corporation, partnership or institution represented by Proposer, or anyone acting for such firm, corporation or institution, has violated the antitrust laws of the State of Texas, codified in Section 15.01, et seq., Business and Commerce Code, or the Federal antitrust laws, nor communicated directly or indirectly the proposal made to any competitor or any other person engaged in such line of business.

2.6 By signature hereon, Proposer certifies that the individual signing this document and the documents made a part of this RFP, is authorized to sign such documents on behalf of Proposer and to bind Proposer under any agreements and other contractual arrangements that may result from the submission of Proposer’s proposal.

2.7 By signature hereon, Proposer certifies as follows:

"Under Section 231.006, Family Code, relating to child support, Proposer certifies that the individual or business entity named in the Proposer’s proposal is not ineligible to receive the specified contract award and acknowledges that any agreements or other contractual arrangements resulting from this RFP may be terminated if this certification is inaccurate."
2.8 By signature hereon, Proposer certifies that (i) no relationship, whether by blood, marriage, business association, capital funding agreement or by any other such kinship or connection exists between the owner of any Proposer that is a sole proprietorship, the officers or directors of any Proposer that is a corporation, the partners of any Proposer that is a partnership, the joint venturers of any Proposer that is a joint venture or the members or managers of any Proposer that is a limited liability company, on one hand, and an employee of any component of METROCARE of North Texas System, on the other hand, other than the relationships which have been previously disclosed to METROCARE in writing; (ii) Proposer has not been an employee of any component institution of the METROCARE within the immediate twelve (12) months prior to the Submittal Deadline; and (iii) no person who, in the past four (4) years served as an executive of a state agency was involved with or has any interest in Proposer’s proposal or any contract resulting from this RFP (ref. Section 669.003, Government Code). All disclosures by Proposer in connection with this certification will be subject to administrative review and approval before METROCARE enters into a contract or agreement with Proposer.

2.9 By signature hereon, Proposer certifies its compliance with all federal laws and regulations pertaining to Equal Employment Opportunities and Affirmative Action.

2.10 By signature hereon, Proposer affirmatively states that it does not boycott Israel, pursuant to Texas Gov’t Code Section 2270.001. Additionally, Proposer shall not engage in a boycott of Israel during the term of this Agreement.

2.11 Proposer will and has disclosed, as part of its proposal, any exceptions to the certifications stated in this Execution of Offer. All such disclosures will be subject to administrative review and approval prior to the time METROCARE makes an award or enters into any contract or agreement with Proposer.

2.12 Proposer should complete the following information:

If Proposer is a Corporation, then list the State of Incorporation: _____________________________

If Proposer is a Corporation, then list the Proposer’s corporate charternumber: _____________________________

RFP No.: _____________________________, Title: _____________________________

**NOTICE:** With few exceptions, individuals are entitled, on request, to be informed about the information that governmental bodies of the State of Texas collect about such individuals. Under Sections 552.021 and 552.023, Government Code, individuals are entitled to receive and review such information. Under Section 559.004, Government Code, individuals are entitled to have governmental bodies of the State of Texas correct information about such individuals that is incorrect.

Submitted and Certified By:

(Proposer Institution’s Name)

(Signature of Duly Authorized Representative)

(Printed Name/Title)

(Date Signed)

(Proposer’s Street Address)

(City, State, Zip Code)

(Telephone Number)

(FAX Number)

(Email Address)
Section 3 – Proposer’s General Questionnaire

NOTICE: WITH FEW EXCEPTIONS, INDIVIDUALS ARE ENTITLED, ON REQUEST, TO BE INFORMED ABOUT THE INFORMATION THAT GOVERNMENTAL BODIES OF THE STATE OF TEXAS COLLECT ABOUT SUCH INDIVIDUALS. UNDER SECTIONS 552.021 AND 552.023, GOVERNMENT CODE, INDIVIDUALS ARE ENTITLED TO RECEIVE AND REVIEW SUCH INFORMATION. UNDER SECTION 559.004, GOVERNMENT CODE, INDIVIDUALS ARE ENTITLED TO HAVE GOVERNMENTAL BODIES OF THE STATE OF TEXAS CORRECT INFORMATION ABOUT SUCH INDIVIDUALS THAT IS INCORRECT.

Proposals must include responses to the questions contained in this Proposer’s General Questionnaire. Proposer should reference the item number and repeat the question in its response. In cases where a question does not apply or if unable to respond, Proposer should refer to the item number, repeat the question, and indicate N/A (Not Applicable) or N/R (No Response), as appropriate. Proposer will explain the reason when responding N/A or N/R.

THIS AREA LEFT INTENTIONALLY BLANK
3.1 Vendor Profile

Company’s Legal Name:

Address of principal place of business:

Address of office that would be providing service under the Agreement:

Number of years in Business: ________________

State of incorporation: _______________________

Number of Employees: _______________________

Annual Revenues Volume: _____________________

Name of Parent Corporation, if any (mark “N/A” if not applicable) ___________________________________

Are you a certified Historically Underutilized Business (HUB)? (check one) ☐ YES ☐ NO

If “Yes”, please indicate the issuing authority and include copy of your certificate in your bid response package.

THIS AREA LEFT INTENTIONALLY BLANK
Section 4: Addenda Checklist

Proposal of: (Proposer Company Name)  
To: METROCARE  
RFP Title: ________________________________  
RFP No.: ________________________________

The undersigned Proposer hereby acknowledges receipt of the following Addenda to the captioned RFP (initial where applicable).

Note: Only check the boxes that apply. For example, if there was only one addendum, initial just the first blank after “No. 1”, not all 5 blanks below.

No. 1 _____  No. 2 _____  No. 3 _____  No. 4 _____  No. 5 _____

Respectfully submitted,

Proposer: (Company Name)  
By: (Authorized Signature Name, print or type)

(Title)  
(Date)  
Signature (authorized signature)

-END-
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, to include 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.

HUB Subcontracting Plan (HSP)

QUICK CHECKLIST

While this HSP Quick Checklist is being provided to merely assist you in readily identifying the sections of the HSP form that you will need to complete, it is very important that you adhere to the instructions in the HSP form and instructions provided by the contracting agency.

▸ If you will be awarding all of the subcontracting work you have to offer under the contract to only Texas certified HUB vendors, complete:
  - Section 1 - Respondent and Requisition Information
  - Section 2 a. - Yes, I will be subcontracting portions of the contract.
  - Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors.
  - Section 2 c. - Yes
  - Section 4 - Affirmation
  - GFE Method A (Attachment A) - Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.

▸ If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract* in place for more than five (5) years meets or exceeds the HUB Goal the contracting agency identified in the “Agency Special Instructions/Additional Requirements”, complete:
  - Section 1 - Respondent and Requisition Information
  - Section 2 a. - Yes, I will be subcontracting portions of the contract.
  - Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors and Non-HUB vendors.
  - Section 2 c. - No
  - Section 2 d. - Yes
  - Section 4 - Affirmation
  - GFE Method A (Attachment A) - Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.

▸ If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors or only to Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract* in place for more than five (5) years does not meet or exceed the HUB Goal the contracting agency identified in the “Agency Special Instructions/Additional Requirements”, complete:
  - Section 1 - Respondent and Requisition Information
  - Section 2 a. - Yes, I will be subcontracting portions of the contract.
  - Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors and Non-HUB vendors.
  - Section 2 c. - No
  - Section 2 d. - No
  - Section 4 - Affirmation
  - GFE Method B (Attachment B) - Complete an Attachment B for each of the subcontracting opportunities you listed in Section 2 b.

▸ If you will not be subcontracting any portion of the contract and will be fulfilling the entire contract with your own resources (i.e., employees, supplies, materials and/or equipment), complete:
  - Section 1 - Respondent and Requisition Information
  - Section 2 a. - No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources.
  - Section 3 - Self Performing Justification
  - Section 4 - Affirmation

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*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, to include 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.
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.

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.**

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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.

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**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: __________ (m/dd/yyyy)

RFP#20210831 METROCare Hillside Project
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 any 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).

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<th>Item #</th>
<th>Subcontracting Opportunity Description</th>
<th>HUBs</th>
<th>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.</th>
<th>Non-HUBs</th>
<th>Percentage of the contract expected to be subcontracted to Non-HUBs.</th>
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Aggregate percentages of the contract expected to be subcontracted: % % %

(Note: If you have more than fifteen subcontracting opportunities, a continuation sheet is available online at https://www.comptroller.texas.gov/purchasing/vendor/hub/forms.php.)

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.)

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.
**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).

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Aggregate percentages of the contract expected to be subcontracted: % % %

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*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.
SECTION 3: SELF PERFORMING JUSTIFICATION (if you responded “No” to SECTION 2, Item a, you must complete this SECTION and continue to SECTION 4.) If you responded “No” to SECTION 2, Item a, in the space provided below explain how your company will perform the entire contract with its own employees, supplies, materials and/or equipment.

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 https://www.comptroller.texas.gov/purchasing/docs/hub-forms/ProgressAssessmentReportForm.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)

Reminder:

► If you responded “Yes” to SECTION 2, Items c or d, you must complete an “HSP Good Faith Effort - Method A (Attachment A)” for each 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 each of the subcontracting opportunities you listed in SECTION 2, Item b.
**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 [https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-a.pdf](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://mycpa.cpa.state.tx.us/tpasscmblsearch/index.jsp](http://mycpa.cpa.state.tx.us/tpasscmblsearch/index.jsp). HUB status code "A" signifies that the company is a Texas certified HUB.

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Texas certified HUB</th>
<th>Texas VID or federal EIN</th>
<th>Approximate Dollar Amount</th>
<th>Expected Percentage of Contract</th>
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**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 all 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 no later than ten (10) working days after the contract is awarded.
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 https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-gfe-achm-b.pdf.

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 SECTION B-4.)
☐ - No / Not Applicable (If No or Not Applicable, continue to SECTION B-3 and SECTION B-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/docs/hub-forms/HUBSubcontractingOpportunityNotificationForm.pdf.

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 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 http://mycpa.cpa.state.tx.us/passcmbsearch/index.jsp. 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 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.

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Texas VID</th>
<th>Date Notice Sent</th>
<th>Did the HUB Respond?</th>
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</thead>
<tbody>
<tr>
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<td>(Do not enter Social Security Numbers.)</td>
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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.

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<thead>
<tr>
<th>Trade Organizations or Development Centers</th>
<th>Date Notice Sent</th>
<th>Was the Notice Accepted?</th>
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Page 1 of 2
(Attachment B)
SECTION B-4: SUBCONTRACTOR SELECTION

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.

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

   Item Number: _______ Description: _______

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 that you use the State of Texas’ Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at http://mycpa.cpa.state.tx.us/tpaas/CMBLSearch/index.jsp. HUB status code “A” signifies that the company is a Texas certified HUB.

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<tr>
<th>Company Name</th>
<th>Texas certified HUB</th>
<th>Texas VID or federal EIN</th>
<th>Approximate Dollar Amount</th>
<th>Expected Percentage of Contract</th>
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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):

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 all 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 no later than ten (10) working days after the contract is awarded.
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 three (3) Texas 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 two (2) or more trade organizations or development centers (in Texas) that serves members of groups (i.e., Asian Pacific American, Black American, Hispanic American, Native American, Woman, Service Disabled Veteran) identified in Texas Administrative Code §20.282(19)(C).

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.

**SECTION A: PRIME CONTRACTOR’S INFORMATION**

<table>
<thead>
<tr>
<th>Company Name:</th>
<th>State of Texas VID #:</th>
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<tbody>
<tr>
<td>Point-of-Contact:</td>
<td>Phone #:</td>
</tr>
<tr>
<td>E-mail Address:</td>
<td>Fax #:</td>
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</tbody>
</table>

**SECTION B: CONTRACTING STATE AGENCY AND REQUISITION INFORMATION**

<table>
<thead>
<tr>
<th>Agency Name:</th>
<th>Phone #:</th>
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<tbody>
<tr>
<td>Point-of-Contact:</td>
<td>Bid Open Date:</td>
</tr>
<tr>
<td>Requisition #:</td>
<td>(mm/dd/yyyy)</td>
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**SECTION C: SUBCONTRACTING OPPORTUNITY RESPONSE DUE DATE, DESCRIPTION, REQUIREMENTS AND RELATED INFORMATION**

1. Potential Subcontractor’s Bid Response Due Date:

If you would like for our company to consider your 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 34 TAC §20.285, each notice of subcontracting opportunity shall be provided to at least three (3) Texas certified HUBs, and allow the HUBs at least seven (7) working days prior to submitting our bid response to the contracting agency, we must provide notice of each of our subcontracting opportunities to two (2) or more trade organizations or development centers (in Texas) that serves members of groups (i.e., Asian Pacific American, Black American, Hispanic American, Native American, Woman, Service Disabled Veteran) identified in Texas Administrative Code, §20.282(19)(C).

(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.)

2. Subcontracting Opportunity Scope of Work:

3. Required Qualifications:

   - [ ] Not Applicable

4. Bonding/Insurance Requirements:

   - [ ] Not Applicable

5. Location to review plans/specifications:

   - [ ] Not Applicable