

# **HUB Participation & Subcontracting Plan Requirements**

Presented by: Civil Rights-HUB



April 8, 2025

### **HSP Quick Checklist**

There are 4 Methods available to complete the HSP



### 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 autocontracting any portion of the contract to Texas certified HUS vendors and Non-HUS vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUS 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"; complets:
	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 - Affronation
	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 Taxas certified HIB vendors and shor-HIB vendors or only to Non-HIB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Taxas certified HID vendors with which you do not have a <u>controlled contract</u> in place for more than thiv (5) years <u>does nor meet or exceed</u> the HIB 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

\*\*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 good or environe, to include under the same contract for a specified point of time. The frequency the HUB vendor is utilized or paid during the term of the contract is no relevant to benefit the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered for the Individual contract rather than renewals or extensions to the original contract. In such altituations the prime contractor and HUB vendor are entering (have entered) into "new"



### Method 1:

If all (100%) of your subcontracting opportunities will be performed using only HUB vendors, complete the following in the HSP:

- Section 1 Respondent and Requisition Information (Page 1);
- Section 2 a. Yes, I will be subcontracting portions of the contract (Page 2);
- Section 2 b. List all the portions of work you will subcontract, and indicate the
  percentage of the contract you expect to award to HUB vendors (Page 2 and the
  continuation sheet as needed);
- Section 2 c. Yes, I will be using only Texas certified HUBs to perform all the subcontracting opportunities listed (Page 2);

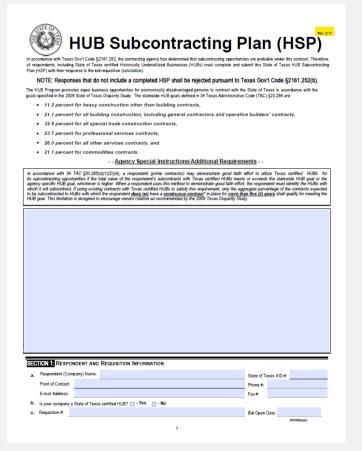


If all (100%) of your subcontracting opportunities will be performed **using only HUB vendors**, complete the following in the HSP:

- Section 4 Affirmation that all information and supporting documentation submitted is true and correct (Page 3); and,
- HSP GFE Method A (Attachment A) Complete this attachment for each subcontracting opportunity (Page 1 of 1).



Respondent and Requisition ----->
Information



Company Name and Requisition #

Subcontracting Intentions: Complete Section 2-a

Yes, I will be subcontracting portions of the contract.

			Rev. 2/17
	Enter your company's name here:	Requisition #:	
i			

#### SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After divining the controct each into reasonable lots or portions to the extent consistent with prusher invalidy practices, and taking into consistention the scope of work to be performed under the proposed control, including all professional subcontrolates (the recognishment set determine with all profess of vince, including contracted staffing, goods and services will be subcontracted. Note: In accordance with 31 ATC §20.282. a "Subcontractor" means a person who controcts with a prime contractor to work, is supply commodifies, not constitute toward complicities under load 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 to 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.)

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 Texas or tified HUBs, and the percentage of the contract you expect to award to Texas or tified 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 Percentage of the contract Percentage of the contract			Non-HUBs	
item #	Subcontracting Opportunity Description		centage of the contract ted to be subcontracted to with which you do not have tinuous contract" in place more than five (5) years.			Percentage of the contre expected to be subcontre	ted to be subcontracted
1			%		%		%
2			%		%		%
3			%		%		%
4			%		%		%
5			%		%		%
6			%		%		%
7			%		%		%
8			%		%		%
9			%		%		%
10			%		%		%
11			%		%		%
12			%		%		%
13			%		%		%
14			%		%		%
15			%		%		%
	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/vendgr/hub/forms.php

- c. Check the appropriate box (Yes or No) that indicates whether you will be using <u>only</u> Texas certified HUBs to perform <u>all</u> of the subcontracting opportunities you listed in SECTION 2. Item is.
- ☐ 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 lox (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract <u>with Texas certified HUBs</u> with which you <u>do not</u> have a <u>continuous contract</u> in place with for <u>more than five [5] years</u>, <u>meets or exceeds</u> the HUB goal the contracting agency identified on page 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.)

"Sommous Contract: Any existing written agreement (including any neweals that are executed) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract or a specific gendor of time. The frequency the HUB vendor is utilized or paid during the arm of the contract is not relevant to whether the contract is contracted or contracts that the contract is stated and in the contract of the contract in considered good and the contract in the contract

Complete Section 2-b:
List all the portions of work you will subcontract and indicate the % of the contract you expect to award to all HUBs.

Complete Section 2-c:

Yes - if you will be using **only HUBs** to perform all Subcontracting Opportunities in 2-b.

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Enter your company's name here:	Requisition #:	

#### SECTION 2 RESPONDENT'S SUBCONTRACTING INTENTIONS

After divining the contract work into reasonable lots or portions to the electric consistent with pushent industry practices, and taking into consistention the soop of more to be performed under the proposed control, including all potential subscontrolling opportunities, the respondent must determine what profitors of work, including constructed staffing, goods and services will be subcontracted. Note: In accordance with 34 TAC \$50.282, 3"Subcontractor, means a person who contracts with a sinter contractor to work, to supely commodifies, or to contribute toward commellent work for a super-mental 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 to 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 vendors that are not a 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					
item #	Subcontracting Opportunity Description		with which you do not have	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.		Pen exper	entage of the contract ted to be subcontracted to non-HUBs.
1			%		%		%
2			%		%		%
3			%		%		%
4			%		%		%
5			%		%		%
6			%		%		%
7			%		%		%
8			%		%		%
9			%		%		%
10			%		%		%
11			%		%		%
12			%		%		%
13			%		%		%
14			%		%		%
15			%		%		%
	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.comptroiler.texas.gov/purchasing/vendor/hub/forms.php

- c. Check the appropriate box (Yes or No) that indicates whether you will be using <u>only</u> Texas certified HUBs to perform <u>all</u> 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 subcombacting opportunities you listed.)
  - No (If No, continue to Item d, of this SECTION.)
- d. Check the appropriate lox ("es or No) that indicates whether the aggregate expected percentage of the contract you will sukcontroct <u>with Texas certified HUBs</u> with which you <u>do not</u> have a <u>continuous contract</u>" in low on the Tor <u>more than five [5] years</u>, <u>meets or exceeds</u> the HUB goal the contracting agency identified no page 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.)

Constitutions Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor is utilized or paid during the item of the contract is not relevant to whether the contract is considered continuous. Two or more outside that contracts is considered continuous. Two or more contracts that run concurrently or overlap one another for different pendors of time are considered by CPA to be individual contracts rather than renewals or exensions to the original contract. In such situations the prime contracts and HUB vendor are entering (have entered) into "new" contracts.



Section 4: Affirmation

Signature affirms that information provided is true and correct.

Enter your company's name here: Requisition # 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. 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 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 Date (mm/dd/mm/ 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.

Complete Attachment A
For each subcontracting
opportunity listed in Section 2b.

Subcontractor selection for this subcontracting opportunity. (Only using HUBs)

Reminder: Notice to subcontractors & TxDOT.

### HSP Good Faith Effort - Method A (Attachment A) Enter your company's name here: Requisition #: IMPORTANT: If you responded "Yes" to SECTION 2, Items c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort. Method A (Attachment A)\* for each of the subcontracting opportunities you listed in SECTION 2, Item b of the completed HSP form. You may photo-copy this page or download the form at https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-secont-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 lo. of the completed HSP form for which you are completing SECTION A-2: SUBCONTRACTOR SELECTION List the subcontractor(s) you selected to perform the subcontracting opportunity you listed aboverin 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 elsearch/index.isp. HUB status code "A" signifies that the company is a Texas certified HUB. Approximate ercentage ( □-Yes □-No □ - Yes □ - No □ - Yes III- No - Yes □ - Yes □ - No ☐ - Yes ☐ - No ☐ - Yes ☐- No ☐ - Yes ☐- No □ - Yes □- No - Yes - No ☐ - Yes ☐- No - Yes - No - Yes - No - Yes - No □ - Yes □- No ☐ - Yes ☐ - No

REMINDER: As specified in SECTION 4 of the completed HSP tom, it you respondent have awarded, any parties of the new section of the regular providence and the providence of the regular providence

- Yes - No



### Method 2:

If you are subcontracting with **HUBs and Non-HUBs**, and the aggregate percentage of subcontracting with HUBs, holding an existing contract with HUBs for 5 years or less, which **meets or exceeds** the HUB Goal identified in the solicitation, complete the following in the HSP:

- Section 1 Respondent and Requisition Information (Page 1);
- Section 2 a. Yes, I will be subcontracting portions of the contract (Page 2);
- Section 2 b. List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to all vendors (Page 2 and the continuation sheet as needed);
- Section 2 c. No, I will not be using only Texas certified HUBs to perform all the subcontracting opportunities listed (Page 2);

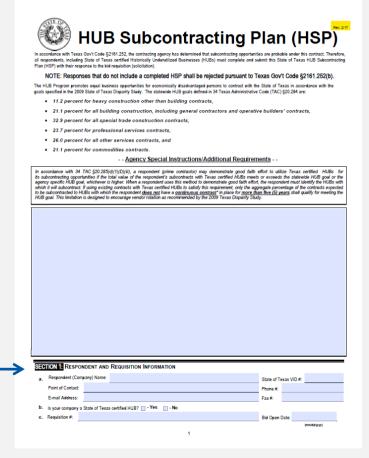


### Method 2:

If you are subcontracting with HUBs and Non-HUBs, and the aggregate percentage of subcontracting with HUBs, holding an existing contract with HUBs for 5 years or less, which meets or exceeds the HUB Goal identified in the solicitation, complete the following in the HSP:

- Section 2 d. Yes, the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs, which you have a contract in place for five (5) years or less, meets or exceeds the HUB goal in the solicitation (Page 2);
- Section 4 Affirmation that all information and supporting documentation submitted is true and correct (Page 3); and,
- HSP GFE Method A (Attachment A) Complete this attachment for each subcontracting opportunity (Page 1 of 1).





Respondent & Requisition Information

Company Name and Requisition #

Subcontracting Intentions: Complete Section 2-a.

Yes, I will be subcontracting portions of the contract.

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Enter your company's name here:	Requisition #:

#### SECTION A RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the control two kind reasonable lost or portions to the eastert consistent with predent instudy produces, and baking into consideration the scope of work. The performance with the proposed control, including all potential subcontrolling operations; the responsed mort and elements when stoperation of exect, including contracted staffing, goods and services will be subcontracted. Note: In accordance with 34 TaC 50.0282, 9"Subcontractor" means a person who controls with a entire contractor to work, to search commodisties or to contribute forward consideration who are assumed mortion.

- 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. | 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 revas certified HUBs, and the sercentage 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 go not have a continuous contract" in place for more than five (5) years.		expect	centage of the contract ad to be subcontracted to s with which you have a assis contract. In place for re than five (5) years.	expected to be subcontracted		
1			%		%		%	
2			%		%		%	
3			%		%		%	
4			%		%		%	
5			%		%		%	
6			%		%		%	
7			%		%		%	
8			%		%		%	
9			%		%		%	
10			%		%		%	
11			%		%		%	
12			%		%		%	
13			%		%		%	
14			%		%		%	
15			%		%		%	
	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/burchasing/vendor/hub/forms.p

- Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting apportunities
  you listed in SECTION 2 from it.
- 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 <u>with Texas certified HUBs</u> with which you <u>do not</u> have a <u>continuous contract</u>? In <u>more than five (5) years</u>, <u>meets or exceeds</u> 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 <u>each</u> 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 <u>each</u> of the subcontracting opportunities you listed.)

<u>Commons Centract</u>: Any existing written agreement (including any renewals that are exercised) hereveen a prime command and a MUS vendor where the HUS vendor with operating the renewal product of the renewal product of the renewal product of the renewal product or a specified pend of time. The frequency the HUS vendor is utilized or paid during the lemm of the command is not relevant to whether the command service desired committous. Two or more contracts that more consuming or overlaps one another for different pendors of man are considered by CFA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime commandor and HUS vendor are entering (have entered) into "new" contracts.



Complete Section 2-b.
List all the portions of work you will subcontract and indicate the % of the contract you expect to award to HUBs and Non-HUBs.

Complete Section 2-c. No to using only HUBs to perform all Subcontracting Opportunities in 2-b.



#### SECTION 24 RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract not into reasonable lots or portions to the extent consistent with pushen hardery proctions, and taking into consistention the scope of unique to be performed under the proposed control, including all potential allocartocating operations. Se response forms determine which operations of note, including constructed staffing, goods and services will be subcontracted. Note in accordance with 9.4 To E. (20.282, a "Subcontractor" means a person who contracts with a prime contractor to work. It suspice commissions or not contribute toward countries and the contraction of the

- 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 is 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 Vendors that are not a Texas certified HUB (i.e., Non-HUB).

Item #	Subcontracting Opportunity Description		ted to be subcontracted to	expect	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.		entage of the contract ted to be subcontracted to non-HUEs.
1			%		%		%
2			%		%		%
3			%		%		%
4			%		%		%
5			%		%		%
6			%		%		%
7			%		%		%
8			%		%		%
9			%		%		%
10			%		%		%
11			%		%		%
12			%		%		%
13			%		%		%
14			%		%		%
15			%		%		%
	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.lexas.gov/burchasing/vendgr/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 would listed in SECTION 2. Here is
  - 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.)

    III No (if No continue to Item d. of this SECTION.)
- d. Check the appropriate loss (Yes or No) that indicates whether the aggregate expected percentage of the conhact you will subconhact 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 in the "Agency populal 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.)
- Pag (if Mg, continue to SECTION 4 and complete an HSP Good Faith Effort Method B (Attachment B)\* for <u>each</u> of the subcontracting opportunities you listed.)

"Scattissous Costract: Any existing written agreement (including any reversals that are executed) between a prime contractor and a Hill Sendor, where the HUB sendor provides the green contractor with pool of services under the Earth contract or a specified period of time. The frequency the HUB sendor is unitized or paid during the arm of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrency or overlap one amount for efferency periods of time are considered by CPA to be instituted. Sendor is unless that the contract is considered continuous. Two or more contracts that run concurrency or overlap one amount for efferency periods of time are considered by CPA to be instituted. The contract is such contracts the period contract or and HUB sendor or entering plane entered) micro-free relevanting plane entered) micro-free relevanting plane entered) micro-free relevanting plane entered) micro-free relevanting plane entered on the relevant plane.



Complete Section 2-d.
Yes, to the Aggregate % of the contract expected to be subcontracted to HUBs to meet or exceed the HUB goal, which you have a contract agreement in place for five (5) years or less.

		Rev. 2/17
Enter your company's name here:	Requisition #:	

#### SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After divining the contract work into responsible lots or portions to the electric consistent with previent industry practices, and taking into consistention the soop of most in the performant under the proposed control, including all potential subscontrolling opportunities, the respondent must determine what portions of work, including constracted staffing, goods and services will be subcontracted. Note: In accordance with 34 TAC \$0.022, 3"-Subcontractor means a person who contracts with a sinter contractor to work to seally commissible, or to contribute bound consistential work for a secure-mental 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 vendors that are not a Texas certified HUR (i.e., Non-HUR).

	, , , , , , , , , , , , , , , , , , ,	HUBs					Non-HUBs	
Item #	Subcontracting Opportunity Description	Percentage of the contract expected to be subconstructed to HUBs with which you do not have a confinence contract in place for more than fire. (It years.		ed to be subcontracted to s with which you have a	expected to be subcontracted			
1			%		%		%	
2			%		%		%	
3			%		%		%	
4			%		%		%	
5			%		%		%	
6			%		%		%	
7			%		%		%	
8			%		%		%	
9			%		%		%	
10			%		%		%	
11			%		%		%	
12			%		%		%	
13			%		%		%	
14			%		%		%	
15			%		%		%	
	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.ph/

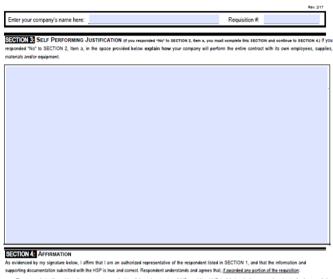
- c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you like the in SECTION 2 from it.
- ☐ Yes (if Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort Method A (Attachment A)" for <u>each</u> of the subcontracting opportunities you listed.)
  ☐ No (if No. continue to litem d, of this SECTION.)
- d. Check the appropriate lox (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 <u>continuous contract</u> in place with for <u>more than five (5) years</u>, meets or exceeds the HUB goal the contracting agency identified on see in the "Agency Spokali 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.)

"Commons. Contract: Any existing written agreement (including any relevants that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provises the prime contractor the prode of restrict the a specified period of time. The frequency the HUB vendor is utilized or paid during the serie of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or everals poel another for different persons of time are considered by CPA to be individual contracts atther than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

2

Section 4: Affirmation.

Signature affirms that information provided is true and correct.



- The respondent will provide notice as soon as practical to all the subcontractors (FUBS) and Non-HUBS) of their selection as a subcontractor for the assarded contract. The notice must specify at a minimum the contracting agency's nature and its point of contact for the contract save in number, the subcontracting opportunity they (the subcontractory) 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 contract for the contract capital than the LOI (Survival ages) after the contracting agency's
- 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.oraphotile.texas.as/unitvarbasina/locks/sub-forms/Progress/seasemet/Report/form.s/s).
- The respondent must seek approval from the contracting agency pior to making any modifications to its HSP, including the hining of additional or different associations and the termistrical of a subcontractive the respondent itemsfeld in its HSP. If the ISP is modified without the contracting agency prior agencyal, 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

#### 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 <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.

Complete Attachment A for each subcontracting opportunity listed in Section 2b.

> Subcontractor Selection (HUBs and Non-HUBs)

Reminders: Notice to subcontractors and TxDOT.

#### HSP Good Faith Effort - Method A (Attachment A)

Enter your company's name here: 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 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

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), We approximate dollar value of the work to be

subcontracted, and the expected percentage of work to be subcontracted. When searching for Teylo certified thes and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underfullized Business (HUB) Directory Search located at us/tpasscmb/search/index.jsp. HUB status code "A" signifies that the company is a rexas certified HUB.

			leave their VID / EIN field blank.		
	□ Tes	□- No		5	%
	- Yes	□-No		5	%
	- Yes	□- No		5	%
	- Yes	□- No		\$	%
	🗆 - Yes	□- No		5	%
	🗆 - Yes	□- No		5	%
	- Yes	□-No		5	%
	- Yes	□- No	·	5	%
	🗆 - Yes	□-No		5	%
	🗆 - Yes	□- No		5	%
	- Yes	□- No		5	%
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	🗆 - Yes	□- No		\$	%
	- Yes	□- No		5	%
	🔲 - Yes	□- No		5	%

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



### Method 3:

If you are subcontracting with **HUBs and Non-HUBs**, and the aggregate percentage of subcontracting with HUBs, holding an existing contract with HUBs for 5 years or less, **does not meet or exceed** the HUB Goal identified in the solicitation, complete the following in the HSP:

- Section 1 Respondent and Requisition Information (Page 1).
- Section 2 a. Yes, I will be subcontracting portions of the contract (Page 2).
- Section 2 b. List all the portions of work you will subcontract. Indicate the percentage of the contract you expect to award to all vendors (Page 2 and the continuation sheet as needed).
- Section 2 c. No, I will not be using only Texas certified HUBs to perform all the subcontracting opportunities listed (Page 2).



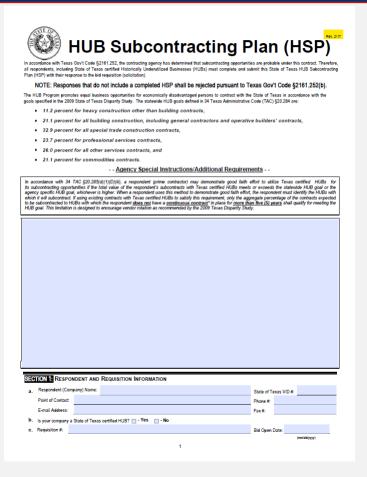
### Method 3:

If you are subcontracting with HUBs and Non-HUBs, and the aggregate percentage of subcontracting with HUBs, holding an existing contract with HUBs for 5 years or less, does not meet or exceed the HUB Goal identified in the solicitation, complete the following in the HSP:

- Section 2 d. No, to the Aggregate % of the contract expected to be subcontracted to HUBs to meet or exceed the HUB goal, which you have a contract agreement in place for five (5) years or less (Page 2).
- Section 4 Affirmation that all information and supporting documentation submitted is true and correct (Page 3).
- HSP GFE Method B (Attachment B) Complete this attachment for each subcontracting opportunity (Page 1 of 1).



Respondent & Requisition Information





Company Name and Requisition #

Subcontracting Intentions: Complete Section 2-a:

Yes, I will be subcontracting portions of the contract.

		Rev. 2/17
Enter your company's name here:	Requisition #:	

#### CHON 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After diving the contract work into reasonable lots or portions to the extent consistent with purposes and taking into consistent on the second or work. The destination of the extent contract with purposes contract, including in proteinal subcombating proteinables, the responsible contracted in the proposes contracted in successful assumptions and the protein of work proteins or work proteins of work proteins or work proteins or work proteins of work proteins or work for a preventmental 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 apportunities) 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		centage of the contract ted to be subcontracted to with which you do not have tinuous contract" in place more than five (5) years.	HUB HUB	centage of the contract ted to be subcontracted to s with which you have a axus contract" in place for one than five (5) years.	Percentage of the contract expected to be subcontracted to non-HUBs.	
1			%		%		%
2			%		%		%
3			%		%		%
4			%		%		%
5			%		%		%
6			%		%		%
7			%		%		%
8			%		%		%
9			%		%		%
10			%		%		%
11			%		%		%
12			%		%		%
13			%		%		%
14			%		%		%
15			%		%		%
	Aggregate percentages of the contract expected to be subcontracted:		%		%		%

Chall the associate has New as No. 5 of inflaton whether you will be unique as by Town suffer URDs to end on all of the advantage of the contract of the contr

- c. Check the appropriate lox (Yes or No) that indicates whether you will be using <u>only</u> Texas certified HUBs to perform <u>all</u> 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 lox ("fes or No) that indicates whether the apprepails expected percentage of the contract you will subcontract with Texas certified NUBs 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.)

"Commons. Contract: Any existing written agreement (including any relevable that are executed) between a prime contractor and a HIGB vendor, where the HIGB vendor provises the prime contractor with goods of senters center that appending period of time. The Revision of the Contract that are contracted that are contracted that are contracted that are consistent operations. Two or more contracted that are concurrently not everlage one another for different pendos of time are consistently of QFI to be invitabled contracted that are relevable or extensions to the original contract. In such situations the prime contracted and HIGB vendor are entering (have entered) into "new".

Complete Section 2-b.

List all the portions of work you will subcontract and indicate the % of the contract you expect to award to HUBs and Non-HUBs.

Complete Section 2-c:

No to using only HUBs to perform all Subcontracting Opportunities in 2-b.

		Rev. 2/17
Enter your company's name here:	Requisitio	n#:

#### SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After diving the controct work into reasonable lots or portions to the extent consistent injustry process, and taking into consistent may be a process or the extent of th

- 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 to 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 HUBs. (e., Non-HUB).

			HUBs				Non-HUBs
Item #	Subcontracting Opportunity Description	HUBs 1	with which you do not have	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 subcontracte to non-HUBs.	
-1			%		%		%
2		Г	%		%		%
3		П	%		%		%
4			%		%		%
5			%		%		%
6			%		%		%
7			%		%		%
8		Г	%		%		%
9			%		%		%
10			%		%		%
-11			%		%		%
12			%		%		%
13			%		%		%
14			%		%		%
15			%		%		%
	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.cov/burchasing/vendor/hub/forms.ph

- c. Check the appropriate lox (Yes or No) that indicates whether you will be using <u>only</u> Texas certified HUBs to perform <u>all</u> 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 lost (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Trexas certified HUBs with which you do not have a continuous contract? In place with for more than five ISI years, meets or exceeds the HUB goal the contracting agency identified on page I in the "tagency pecial 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.)

"Scansous Contract: Any existing written agreement (including any inneveals that are seroteed) between a prime contractor and a HUB wedor, where the HUB verdor provides the prime contractor with a wood or service under the same contract for a specific begrood of time. The Preference where the HUB verdor is utilized or paid cluring the HIM eventor is not relevant to whether the contract is consistent continuous. Two or more contracts that run concurrency or verdor poes another for different periods of time are consistented by CPA. To be individual contracts rather than reversals or take or the original contract. In such a students the prime contractor and HUB verdor are entering plane entered into "new"

Complete Section 2-d.

No, to the Aggregate % of the contract expected to be subcontracted to HUBs to meet or exceed the HUB goal, which you have a contract agreement in place for five (5) years or less.



SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After divining the controct exist into reasonable foils or portions to the extent consistent with pushers inhaltry paractions, and stalking into consistention the scope of scork to be performed under the prospect control, including all potential subcontrolling expenditures, the responsed extent subtermine when protocol or lover, including contracted staffing goods and services will be subcontracted. Note in accordance with 34 TaC 502.022, 2 "Subcontractor" means a person who contracts with a prime contract to work, its pupily controllists, or to contribute forward foundations of the provided prime of the prim

- 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 (subcombracting opportunities) you will subcombract. 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).

- 1		н	Non-HUBs		
item #	Subcontracting Opportunity Description	Percentage of the contract expected to be subcontracted to HUBs with which you go not have a continuous contract in place for more than five (5) years.	HUllis with which you have a	Percentage of the contract expected to be subcontracted to non-HUBs.	
1		%	%	%	
2		%	%	%	
3		%	%	%	
4		%	%	%	
5		%	%	%	
6		%	%	%	
7		%	%	%	
8		%	%	%	
9		%	%	%	
10		%	%	%	
11		%	%	%	
12		%	%	%	
13		%	%	%	
14		%	%	%	
15		%	%	%	
	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 <a href="https://www.comptroller.texas.gov/purchasing/vendgr/hub/forms.php">https://www.comptroller.texas.gov/purchasing/vendgr/hub/forms.php</a>

- Check the appropriate lox (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities
  was listed in SECTION 2 from it.
- Yes (if Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort Method A (Attachment A)" for <u>each</u> of the subcontracting opportunities you listed.)
   No (if No, continue to Item d, of this SECTION.)
- d. Check the appropriate loss (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract <u>with Texas certified Hubs</u> with which you <u>do not</u> have a <u>continuous contract</u>?" In place with the <u>more than five (5) years, meets or exceeds</u> the HUB goal the contracting agency identified on page in the "agency Special Instructions/Additional Registeries with the <u>Property of the Property Special Instructions/Additional Registeries to the Property Special Instructions (Additional Registeries to the Property Special Instructions (Addition</u>
- 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.)
- \*Community Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor.

"Scannings Contract: Any existing errors agreement (including any reservable that are exercised) between a prime contractor and a HMD windor, where the HMD error provides the prime contractor with pools or service under the assess contract or a specified perior of time. The Propersion that HMD evendor is unitized or paid during the serior of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that the contract is not expected, and in the contract is considered or CFA to be individual contracts stated and relevant or existence in existence in extension to the original contract. In such instructions the prime contractor and HMD vendor are entering (have entered) into "new" contracts.



Section 4: Affirmation

Signature affirms that information provided is true and correct.

		Rev. 2/17
Enter your company's name here:	Requisition #:	
Enter your company's name here: Requisition #:  SECTION 3. SELF PERFORMING JUSTIFICATION of you responded "No" to ECTION 2, item a, you must compare this sECTION and continue to SECTION 4.) If expronded "No" to SECTION 2, item a, in the space provided below explain how your company will perform the entire contract with its own employees, supported and or equipment.		
SECITION 4: AFFIRMATION		
As evidenced by my signature below, I affirm that I am an authorized representativ		
supporting documentation submitted with the HSP is true and correct. Respondent u	nderstands and agrees that, <u>if awarded any portion of the requisition</u> :	
<ul> <li>The respondent will provide notice as soon as practical to all the subcontract</li> </ul>	tors (HUBs and Non-HUBs) of their selection as a subcontractor for	r 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
- . The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headiguarters and/or work-site where services are being performed and must provide documentation regarding staffing and other resources.

Signature	Printed Name	Title	Date

- 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 o 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.

Complete Attachment B for each subcontracting opportunity listed in Section 2b.

Complete Section B-1

Complete Section B-2 →

\*If you are using your HUB Protégé mark Yes and continue to Section B-4\*

#### HSP Good Faith Effort - Method B (Attachment B)

Requisition #

IMPORTANT: If you responded "No" to SECTION 2, Items to and do fit the completed HSP form, you must submit a completed "HSP Good Faith EffortMethod 8 (Attachment 8) for each of the subcontracting opportunities you listed in SECTION 2, Item to of the completed HSP form. You may photo-copy this
sape or developed for from a hints: [If we completed HSP and confured warm for the product of the reference has been a first in the wormholder leaves on operational submit and the best of the completed HSP form a hints: [If we completed HSP form is not in the product of the reference has been a first in the product of the refer

#### 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:

Enter your company's name here:

#### SECTION B-2: MENTOR PROTÉGÉ PROGRAM

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

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 <u>MUST</u> comply with items <u>a</u>, <u>b</u>, <u>o</u> and <u>d</u>, thereby demonstrating your Good Faith Effort of having notified Texas certified HURs and tobic organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. You notice should include the scope of work, information reparating the location to review plants and specifications, bonding and insurance requirements, required qualifications, and identify a control person. When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUR Subcontracting Opportunity Notice form, which is also available online at this; silven complete items as quire about a control person.

Rebin supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good tath effort to notify the Texas certified HUBS and tode comparations or elevelopment centers. A), be inhalff that a working day's considered a normal learnines day of a state appear, not including weekering, federal or state holdsys, or stay the agency is declared closed by its executive officer. The initial day the subcontracting appointment price is sentprovised to the HUBs <u>and</u> to the tode comparations or elevelopment centers is considered to be faily pare? and does not count as one of the seven (if) solving the contractions of the seven fails of the seven (if) solving the contraction of the seven fails of the seven (if) solving the seven fails of the seven fails of the seven fail solving the seven fails of the

- a. Provide written notification of the subcomboding opportunity you listed in SECTION B-1, to there (3) or more Texas certified HUBs. Unless the contracting agency specified a different time period, you must allow the HUBs at <u>listed seven (1) working days</u> to respons to the notice prior to you submitting your bild response to the contracting agency. When searching for texas certified HUBs and verifying their HUBs status, seven that you use the State of Texas Centralized Master Bidders List (CMBL). Historically Underrulized Business (HUB) Directory Search located at <a href="https://morea.gos.state.tx.ur/lipasscratified-psichlindex.ige.HUB status code "At significant that for company">https://morea.gos.state.tx.ur/lipasscratified-psichlindex.ige.HUB status code "At signified that the company is a Texas certified HUB.</a>
- b. List the <a href="three-light">three-light</a> Texas certified HUBs you notified regarding the subcontracting opportunity you listed in SECTION 8-1. 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

Company Name	Texas VID (Do not enter Social Security Numbers.)		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 apportunity you listed in SECTION 8-1 to baz\_22 or more trade organizations or development center in <u>Taxas</u> to assist in identifying potential HUB's by disseminating the subcontracting apportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting apportunity notice to toake organizations or development centers <u>1 listest seven (T) sundrined days</u> point to submitting your bid response to the comboting agency. A list of trade organizations and development centers that have expressed an interest in necessing notices of subcontracting opportunities is an audition on the Statistical URD Program's weekpoint and the proporties trade or high provides that as projectionally an interesting in the contracting of the provides and the provides that as projectionally an interesting in the contraction of the provides and the provides the state of the provides and the pro
- 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	Was the Notice Accepted
		- Yes - No
		🛮 - Yes 🔲 - No

Section B-3: Good Faith Effort to find Texas Certified HUB Vendors.

Written Notification Requirements.

List three (3) HUBs contacted for this subcontracting opportunity.

### HSP Good Faith Effort - Method B (Attachment B)

Rev. 2/17

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 EffortMethod 8 (Attachment 8)" for <u>each</u> of the subcontrocting opportunities you listed in SECTION 2, Item to of the completed HSP form. You may photo-copy this
sape or demonded the form at high Cymw compribile results on your understanding the completed HSP form.

#### SECTION :: 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

Item Number: Description:

#### SECTION R-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 subcontract to refer the subcontract with a Texas certified HUB towards that results and the effort to subcontract with a Texas certified HUB towards that results and the effort of subcontract with a Texas certified HUB towards that

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 : NOTIFICATION OF SUBCONTRACTING OPPORTUNITY

When completing this section you <u>MUST</u> comply with items <u>a</u>, <u>b</u>, <u>c</u> and <u>d</u>, 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 reparating the location to review plans and speciations, so, noting and insurance requirements, required qualifications, and institutions and insufficient control in the state of the state o

Retain supporting documentation (i.e., certified liter, tax, e-mail) demonstrating evidence of your good task effort to notify the Texas certified HUBS, and toole organizations or development centers. As, be inmidst Must as, be inmidst Must as the second or the second

- 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) movining days to respond to the notice prior to you submitting your hist response to contracting agency. When seconding for Texas certified HUBs and verlying she's HUB status, respire what you use the late of Texas (Sentine Master Bidders List (CMSL) Historically Underwillized Business (HUB) Directory Search located at <a href="https://doi.org/10.1145/nca
- 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 voltage.

Company Name	Texas VID (Do not enter Sodal Security Numbers)		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 subcontrocting apportunity you listed in SECTION 8-1 to <u>you CI</u><sub>2</sub> or more trade organizations or development centers in <u>ITexas</u> to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency repetited a different time period, you must provide your subcontracting opportunity notice to that organizations or development centers <u>at listed seven (IT tracking datap</u> perior 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 variable on the Statewise HUB Program's between the Texas Computer Listed and expressed an interest in receiving notices.
- 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	Was the Notice	e Accepted?
		- Yes	□ - No
		- Yes	□ - No

Written Notification to Trade Organizations.

List two (2) trade organizations notified with dates sent/accepted.

#### HSP Good Faith Effort - Method B (Attachment B)

Rev. 2/17

Enter your company's name here: Requisition #:

IMPORTANT: If you responded "No" to SECTION 2, Items c and d of the completed HSP from, you must submit a completed "HSP Good Fath EffortMethod 8 (Attachment 8) for each of the subcomboding apportunities you listed in SECTION 2, Item b of the completed "HSP Good Fath Effortmapper or demonder for from this type: "More completed resus outperball resistance" from the under the described shows he offer.

#### 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

Item Number: \_\_\_\_\_ Descrip

#### SECTION B-2: MENTOR PROTÉGÉ PROGRAM

If respondent is participating as a Mentor in a State of Texas Mentor Protégé Program, sulemitting 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

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 65 NOTIFICATION OF SUBCONTRACTING OPPORTUNITY

When completing this section you <u>MUST</u> comply with items <u>a</u> <u>b</u>, <u>c</u> and <u>d</u> thereby demonstrating your Good Faith. Effort of having notified Flass certified HUBS and hade organizations or development centers about the subcontracting opportunity you site in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plants and specifications, bronking and insurance requirements, required qualifications, and identify a contract person. When sending notice of your subcontracting opportunity you are encouraged to use the attached HUBS subcontracting opportunity Notice form, which is also available online at this; these complete is reas a gent person strength or the contraction of your subcontracting opportunity Notice form, which is also available online at their silves complete it is an active production of your part.

Rebin supporting documentation (i.e., cerified letter, fax, e-mail) demonstrating evidence of your good tath effort to notify the Texas cerified HUBs and toxed organizations or development centers, hos, be mindful that it working days is conditived an aromal sublines sky of a state appear, not including evidences, federal or state holistys, or days the agency is declared closed by its executive officer. The initial day the subcombarding opportunity notice is sentiprovised to the HUBs and to the folial compartitions or evidencement centers is considered to be fairburs or days of the seven (if it contains the sent senting the senting or days of the sent of the

- a. Provide written notification of the subcontracting opportunity you listed in SECTION 8-1, to there (3) or move 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 heid response to the contracting agency. When searching for Texas certified HUBs and verying their HUB status, ensure that you war the State of Texas Certificating Master Bidders List (CMBL). Historically Undersulfized Bissiness (HUB) Directory Search located at <a href="http://morphs.com.state.tx.ur/passcratification-in-HUB status code\*A">http://morphs.com.state.tx.ur/passcratification-in-HUB status code\*A"</a> sanifes 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

Company Name	(Do n	Texas VID at enter Social Security Numbers.)	Date Notice Sent	Did the HUB	Respond?
				- Yes	- No
				🛮 - Yes	- No
				∏ - Yes	∏ - No

- c. Provide written notification of the subconharding opportunity you isseld in SECTION 8-1 to <u>base 20</u> or more basic organizations or development centers in <u>Texas</u> to assist in identifying potential HUBs by disseminating the subconharding opportunity to their members/participants. Unless the contracting agency assisted as different time period, you must provide your subconharding opportunity notice to take organizations or development centers at <u>18 east seven (T) working dary prior to</u> submitting your bid response to the contracting agency. A lot of trade organizations and development centers that have expressed an interest make necessary and the contracting agency. A lot of trade organizations and development centers that have expressed an interest in the necessary and submitted to the contracting agency. A lot of trade organizations and development centers that have expressed an interest in energy modern and the contracting agency. A lot of trade organizations and development centers that have expressed an interest in the contracting agency. A lot of trade organizations and development centers that have expressed an interest in the contracting agency and the contracting agency and the contracting agency and the contracting agency and the contracting agency agency and the contracting agency agency
- 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	Was the Notice Accepted?	
		- Yes - No	ı
		🛮 - Yes 🔲 - No	ı

Item#&Description

Subcontractor Selection (HUBs and Non-HUBs)

Provide written justification why HUB was not selected for this subcontracting opportunity.

Reminder: Notice to subcontractors and TxDOT

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

Enter your company's name here: Requisition

#### SECTION B-4: SUBCONTRACTOR SELECTION

the attachment.

b. List the subcontractor(s) you selected to perform the subcontracting apportunity you issted 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, when of the expected performing of even to be subcontracted. When searching for Texas credited HUBs and verifiely their HUB states, resure that you use the State of Texas' Centralized Master Bidders List (CMBI) - Historically Undernicated Business (HUB) Directory Search located at http://www.master.com/proximates/performers.org/states/poor/states/

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		5	×
	- Yes - No		5	% ·
	-Yes -No		5	%
	□ - Yes □ - No		\$	%
	- Yes - No		\$	%
	-Yes -No		\$	%
	- Yes - No		5	%
	- Yes - No		5	N.
	□- Yes □- No		5	×
	□-Yes □-No		5	*

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 from, If you been detailed are social on the sequidition, you are included as so one specified to select the seperation local files selected to as 18 seperated to 24 files selected as a selected to 34 files selected as a selected for the selected files as selected files as selected for the controlled pages of the selected as a selected file selected files as selected files selected files as selected files selected files files selected files files selected files for the selected files files

Page 2 of 2 (Attachment B)



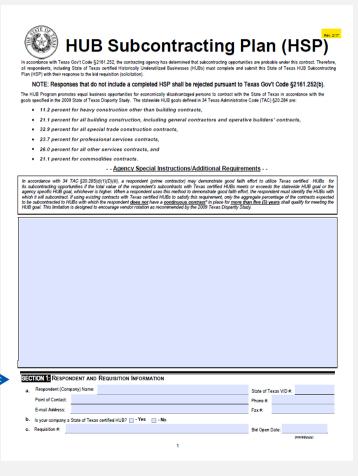
### Method 4:

If you are **not subcontracting** any portion of the contract and will be fulfilling the **entire contract with your own resources** (i.e., equipment, supplies, materials, and/or employees), complete the following in the HSP:

- Section 1 Respondent and Requisition Information (Page 1);
- Section 2 a. No, I will not be subcontracting portions of the contract, and I will be fulfilling the entire contract with my own resources (Page 2);
- Section 3 Self Performing Justification that explains how your company will fulfill the entire contract with its own resources (Page 3); and,
- Section 4 Affirmation that all information and supporting documentation submitted is true and correct (Page 3).



Respondent and Requisition Information



Subcontracting Intentions: Complete Section 2-a.

No, I will not be subcontracting any portion of the contract.

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

SECTION 2 RESPONDENT'S SUBCONTRACTING INTENTIONS

After diving the contract work into reasonable lots or portions to the either consistent with present instarty process, and taking into consistent on seque of using the consistent with present instarty process, and taking into consistent some divine the progress control, including all proteins placed instancements, the reasonables, the secondaries placed in the control of the process control, including all proteins and services will be subcontracted. Note in no occasional with 7.4 Co. 50.002, 20.002, 20.000, and occurrencements a person who controls with a pairm control of two wirt, to supply commodifies, or to contribute toward completing once for the agreement entire.

- 3. 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).

		HUBs					Non-HUBs
item #	Subcontracting Opportunity Description	Percentage of the contract expected to be subcontracted to be subcontracted to be subcontracted to be followed by the subcontracted to be subcontr		Percentage of the contract expected to be subcontracted to non-HUBs.			
1			%		%		%
2			%		%		%
3			%		%		%
4			%		%		%
5			%		%		%
6			%		%		%
7			%		%		%
8			%		%		%
9			%		%		%
10			%		%		%
11			%		%		%
12			%		%		%
13			%		%		%
14			%		%		%
15			%		%		%
	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/burchasing/vendor/hub/forms.phg/

- 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 was listed in SECTION 3. Name is
- Yes (if Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort Method A (Attachment A)" for <u>each</u> of the subcombacting opportunities you listed.)
  → No (if No continue to litem d, of this SECTION.)
- d. Check the appropriate loss ("Fe or No) that indicates whether the appreptie expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract" in join will for more than firer (5) years, meets or exceeds the HUB goal the contracting agency identified on page in the "Expensy pockal interrustractions/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.)

"Scansauss Contact: Any existing witness agreement producing any newwals that are exercised however a prime commercial at HISP vendor, water the HISP exercise previous the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HISP vendor is utilized or paid curring the term of the contract is not relevant to whether the contract is considered continuous. Two of more contracts that run concurring or overlap one amount for different periods of time are considered by CFA to be individual contracts status than reversals or extensions to the original contract, in soon assurance the prime of time are considered by CFA the extension of the original contract. In soon assurance the prime of time are considered by CFA we extension of the original contract. In soon assurance the prime of time are considered by CFA we extension of the original contract. In soon assurance, the contract is not released or extensions to the original contract, in soon assurance the prime of the prime of



Section 3:Self-Performing Justification

List the specific page(s)/
section(s) of your proposal
response, **or** in the space
provided, which explains how
your company will perform the
entire contract with its own
equipment, supplies, materials,
and/or employees.

			Rev. 2/17
nter your company's name here:		Requisition #:	
OTION 2. Co. o December 1.			
CFIONIX SELF PERFORMING JUSTRICAT pounded "No" to SECTION 2, lisen a, in the space encids and/or equipment.			
ECTION 4: AFFIRMATION			
evidenced by my signature below, I affirm that I am	an authorized representative of the responde	ent listed in SECTION 1, and tha	t the information and
porting documentation submitted with the HSP is tru	e and correct. Respondent understands and a	grees that, <u>if awarded any portion</u>	of the requisition:
The respondent will provide notice as soon as p contract. The notice must specify at a minimun subcontracting opportunity they (the subcontracto the total contract that the subcontracting opportunity	n the contracting agency's name and its poi or) will perform, the approximate dollar value or nity represents. A copy of the notice required it	nt of contact for the contract, to if the subcontracting opportunity by this section must also be pro-	he contract award number, the and the expected percentage of
point of contact for the contract <u>no later than ten (</u> :  The respondent must submit monthly complian- compliance with the HSP, including the use <a href="https://www.comptroller.texas.gov/purchasing/documents/">https://www.comptroller.texas.gov/purchasing/documents/</a>	ce reports (Prime Contractor Progress Asses of and expenditures made to its subcor	ssment Report - PAR) to the o ntractors (HUBs and Non-HUB	
The respondent must seek approval from the or subcontractors and the termination of a subcontra respondent may be subject to any and all enforcer state contracting.	octor the respondent identified in its HSP. If the	HSP is modified without the con	tracting agency's prior approval,
		f the company's headquarters ar	nd/or work-site where services
The respondent must, upon request, allow the co are being performed and must provide documenta	tion regarding staffing and other resources.		
	tion regarding staffing and other resources.		
	Printed Name	Title	Date
are being performed and must provide documenta		Title	Date (mm44)yyy)
are being performed and must provide documenta Signature	Printed Name tems c or d, you must complete an "HSP C		(mm/ddyyyy)
are being performed and must provide documenta  Signature  eminder:  If you responded "Yes" to SECTION 2, 1	Printed Name  tems o or d, you must complete an 'HSP C SECTION 2, Item b. ss o and d, you must complete an 'HSP G	Good Faith Effort - Method A (A	(mm/s6yyyy)  Attachment A)* for each of

Section 4: Affirmation ————

Signature affirms that information provided is true and correct.





### **Current HSP Form**

- Make sure to use the most current HSP form.
- For the most current version, visit:

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



### **TxDOT Civil Rights Division | HUB Program**

### CIV HUB@txdot.gov

https://www.txdot.gov/business/disadvantaged-small-business-enterprise/hub.html

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