**APPENDIX THREE**

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THE UNIVERSITY OF TEXAS

HEALTH SCIENCE CENTER – HOUSTON

January 2012

**POLICY ON UTILIZATION**

**HISTORICALLY UNDERUTILIZED BUSINESSES**

**The University of Texas Health Science Center at Houston**

**Policy on Utilization of Historically Underutilized Businesses (HUBs)**

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###### The University of Texas Health Science Center at Houston

**POLICY ON UTILIZATION OF**

**HISTORICALLY UNDERUTILIZED BUSINESSES (HUBs)**

**Introduction**

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

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

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) §20.13 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,**
* **32.7 percent for all special trade construction contracts,**
* **23.6 percent for professional services contracts,**
* **24.6 percent for all other services contracts, and**
* **21 percent for commodities contracts.**

The University of Texas Health Science Center at Houston (UTHSC-H) shall make a good faith effort to meet or exceed these goals to assist HUBs in receiving a portion of the total contract value of all contracts that UTHSC-H expects to award in a fiscal year. UTHSC-H may achieve the annual program goals by contracting directly with HUBs or indirectly through subcontracting opportunities in accordance with the Texas Government Code, Chapter 2161, Subchapter F.

**SUMMARY OF REQUIREMENTS**

**Historically Underutilized Business (HUBs) Subcontracting Plan**

It is the policy of The University of Texas System and each of its component institutions, to promote and encourage contracting and subcontracting opportunities for Historically Underutilized Businesses (HUBs) in all contracts. Accordingly, The University of Texas Health Science Center at Houston has adopted “**APPENDIX THREE**, **Policy on Utilization of Historically Underutilized Businesses**." The Policy applies to all contracts with an expected value of $100,000 or more. The Board of Regents of The University of Texas System is the contracting authority.

1. In all contracts for professional services, contracting services, and/or commodities with an expected value of $100,000 or more, The University of Texas Health Science Center at Houston (UTHSC-H) will indicate in the purchase solicitation (e.g. RFQ, RFP, or ITB) whether or not UTHSC-H has determined that subcontracting opportunities are probable in connection with the contract. A HUB Subcontracting Plan is a required element of the architect, contractor or vendor Response to the purchase solicitation. The HUB Subcontracting Plan shall be developed and administered in accordance with the Policy. **Failure to submit a required HUB Subcontracting Plan will result in rejection of the Response.**

2. If subcontracting opportunities are probable, UTHSC-H will declare such probability in its invitations to bid, requests for proposals, or other purchase solicitation documents, and shall require submission of the appropriate HUB Subcontracting Plan with the Response.

a. When subcontracting opportunities are probable, and the Respondent proposes to subcontract any part of the work, the Respondent shall submit a **HUB Subcontracting Plan as prescribed by the Texas Comptroller** identifying subcontractors [**[34 TAC §20.14 (d) (1)(A)(B)(C)(D) (2)(A)(B)(C)(D)(E) (3)(A)(B)].**

b. When subcontracting opportunities are probable, but the Respondent can perform such opportunities with its employees and resources, the Respondent’s HUB Subcontracting Plan shall include **the Self Performance HUB Subcontracting Plan, Section 3 – Self Performance Justification as the HUB Subcontracting Plan (HSP). [34 TAC §20.14 (d)(4)(A)(B)(C)(D)]**

3. If subcontracting opportunities are not probable, UTHSC-H will declare such probability in its invitations to bid, requests for proposals, or other purchase solicitation documents.

4. Respondents shall follow, but are not limited to, procedures listed in the Policy when developing a HUB Subcontracting Plan.

5. In making a determination whether a good faith effort has been made in the development of the required HUB Subcontracting Plan, UTHSC-H shall follow the procedures listed in the Policy. If accepted by UTHSC-H, the HUB Subcontracting Plan shall become a provision of the Respondent's contract with UTHSC-H. ***Revisions necessary to clarify and enhance information submitted in the original HUB subcontracting plan may be made in an effort to determine good faith effort***. **Any revisions after the submission of the HUB Subcontracting Plan shall be approved by the HUB Manager**.

6. **UTHSC-H shall reject any Response that does not include a fully completed HUB Subcontracting Plan, as required. An incomplete HUB Subcontracting Plan is considered a material failure to comply with the solicitation for proposals.**

7. Changes to the HUB Subcontracting Plan. Once a Respondent’s HUB Subcontracting Plan is accepted by UTHSC-H and becomes a provision of the contract between Respondent and UTHSC-H, the Respondent can only change that HUB Subcontracting Plan if (a) the Respondent complies with 34 TAC Section 20.14; (b) the Respondent provides its proposed changes to UTHSC-H for review; (c) UTHSC-H (including UTHSC-H’s HUB Manager) approves Respondent’s proposed changes to its HUB Subcontracting Plan; and (d) UTHSC-H and the Respondent amend their contract (via a writing signed by authorized officials of both parties) in order to replace the contract’s existing HUB Subcontracting Plan with a revised HUB Subcontracting Plan containing the changes approved by UTHSC-H.

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8. Expansion of Work. If, after entering into a contract with a Respondent as a result of a purchase solicitation subject to the Policy, UTHSC-H wishes to expand the scope of work that the Respondent will perform under that contract through a change order or any other contract amendment (the “Additional Work”), UTHSC-H will determine if the Additional Work contains probable subcontracting opportunities not identified in the initial purchase solicitation for that contract. If UTHSC-H determines that probable subcontracting opportunities exist for the Additional Work, then the Respondent must submit to UTHSC-H an amended HUB Subcontracting Plan covering those opportunities that complies with the provisions of 34 TAC Section 20.14. Such an amended HUB Subcontracting Plan must be approved by UTHSC-H (including UTHSC-H’s HUB Manager) before (a) the contract may be amended by UTHSC-H and the Respondent to include the Additional Work and the amended HUB Subcontracting Plan and (b) the Respondent performs the Additional Work. If a Respondent subcontracts any of the additional subcontracting opportunities identified by UTHSC-H for any Additional Work (i) without complying with 34 TAC Section 20.14 or (ii) before UTHSC-H and that Respondent amend their contract to include a revised HUB Subcontracting Plan that authorizes such subcontracting, then the Respondent will be deemed to be in breach of its contract with UTHSC-H. As a result of such breach, UTHSC-H will be entitled to terminate its contract with the Respondent, and the Respondent will be subject to any remedial actions provided by Texas law, including those set forth in Chapter 2161, Texas Government Code, and 34 TAC Section 20.14. UTHSC-H may report a Respondent’s nonperformance under a contract between that Respondent and UTHSC-H to the Texas Comptroller in accordance with 34 TAC Sections 20.101 through 20.108.

9. A Response may state that the Respondent intends to perform all the subcontracting opportunities with its own employees and resources in accordance with the Policy. However, if such a Respondent enters into a contract with UTHSC-H as a result of such a Response but later desires to subcontract any part of the work set forth in that contract, before the Respondent subcontracts such work it must first change its HUB Subcontracting Plan in accordance with the provisions of Section 7 above .

10. UTHSC-H shall require a vendor to whom a contract has been awarded to report the identity and the amount paid to its subcontractors by submitting **a HUB Subcontracting Plan (HSP) Prime Contractor Progress Assessment Report (PAR)** with each requestas a condition for payment.

11. If UTHSC-H determines that the successful Respondent failed to implement an approved HUB Subcontracting Plan in good faith, UTHSC-H, in addition to any other remedies, may report nonperformance to the Texas Comptroller in accordance with 34 TAC, Section 20.14, (d) (13) related remedies of nonperformance to professional services firms, contractor, and vender implementation of the HUB Subcontracting Plan.

12. In the event of any conflict between this “Summary of Requirements” and the remainder of the HUB Policy, the remainder of the HUB Policy will control.

13. These requirements, including the attachments referred to above, may be downloaded over the Internet from [http](http://www.utsystem.edu/hub)[://www.u](http://www.utsystem.edu/hub)[t](http://www.utsystem.edu/hub)[s](http://www.utsystem.edu/hub)[ystem.edu/hub](http://www.utsystem.edu/hub) For additional information contact Shaun A. McGowan, Manager, HUB and Small Business Program, UTHSC-H, 713-500-4862

Subcontracting and Self Performing Requirements

HSP Quick Check List

Choose **only one** of the following options:

**Option One** -

* If you are not subcontracting any portion of the contract and will be fulfilling the entire contract with your own resources, complete the following sections:

1. Section 1 – Respondent and Requisition Information
2. Section 2A – No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources.
3. Section 3 – Self Performing Justification
4. Section 4 – Affirmation

**Option Two** -

* If all of your subcontracting opportunities will be performed using only HUB vendors, complete the following sections:
  + 1. Section 1 - Respondent and Requisition Information
    2. Section 2A – Yes, I will be subcontracting portions of the contract
    3. Section 2B – List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to HUB vendors
    4. Section 2C – Yes
    5. Section 4 – Affirmation
    6. Good Faith Effort (Attachment A) – Complete this attachment for each subcontracting opportunity

**Option Three** -

* If you are subcontracting with HUB vendors and Non-HUB vendors, and the total percentage of subcontracting with HUB vendors meets or exceeds the HUB Goal the contracting agency identified in “Agency Special Instructions/Additional Requirements”, complete the following:

1. Section 1 - Respondent and Requisition Information
2. Section 2A – Yes, I will be subcontracting portions of the contract
3. Section 2B – List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to HUB vendors and Non HUB vendors
4. Section 2(C) – No
5. Section 2(D) – Yes
6. Section 4 – Affirmation
7. Good Faith Effort (Attachment A) – Complete this attachment for each subcontracting opportunity

**Option Four** -

* If you are subcontracting with HUB vendors and Non-HUB vendors (or only Non HUB vendors), and the total percentage of subcontracting with HUB vendors does not meet or exceed the HUB Goal the contracting agency identified in “Agency Special Instructions/Additional Requirements” , complete the following:
  + 1. Section 1 - Respondent and Requisition Information
    2. Section 2A – Yes, I will be subcontracting portions of the contract
    3. Section 2B – List all the portions of work you will subcontract, and indicated the percentage of the contract you expect to award to HUB vendors and Non HUB vendors
    4. Section 2C – No
    5. Section 2D – No
    6. Section 4 – Affirmation
    7. Good Faith Effort (Attachment B) – Complete this attachment for each subcontracting opportunity

(RESPONDENT’S BUSINESS LETTERHEAD)

Letter of Transmittal

Vendor Services

# Date

Shaun A. McGowan

Manager, HUB and Small Business Program

The University of Texas Health Science Center at Houston

1851 Crosspoint Avenue, Suite 1.160

Houston, TX 77054

Dear Mr. McGowan,

I am pleased to forward this HUB Subcontracting Plan as an integral part of our bid (proposal, offer, or other expression of interest) in connection with your invitation for bids (request for proposals, etc.) #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

I have read and understand UTHSC-H Policy on Utilization of Historically Underutilized Businesses (HUBs). HUB-LOI(s) is (are) enclosed totaling $\_\_\_\_\_\_\_\_\_. That amount is \_\_\_\_\_\_\_\_\_\_ percent of our total bid amount.

The HUB Subcontracting Plan represents a cumulative percentage of **\_\_\_\_\_\_\_\_\_** % for minority-owned HUBs and \_\_\_\_\_\_\_ % of woman-owned HUBs. When a HUB is owned by a minority woman, I have classified that HUB as minority-owned rather than woman-owned.

Sincerely,

(Vendors Signature)

(Vendors Printed Name)

(Vendors Printed Title)

(RESPONDENT’S BUSINESS LETTERHEAD)

# Date

Shaun A. McGowan

Manager, HUB Program

The University of Texas Health Science Center at Houston

1851 Cross Point Avenue, Suite 1.160

Houston, TX 77054

Dear Mr. McGowan:

I am pleased to forward this HUB Subcontracting Plan as an integral part of our bid (proposal, offer, or other expression of interest) in connection with your invitation for bids (request for proposals, etc.) #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

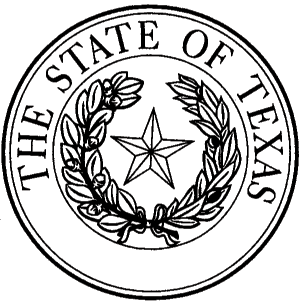
I have read and understand the UTHSC-H Policy on Utilization of Historically Underutilized Businesses (HUBs). The enclosed HUB-SOI expresses our intent to perform and/or supply all contracted goods or services with our employees and resources.

Sincerely,

(Vendor Signature)

(Printed Name)

(Printed Title)

**HUB Subcontracting Plan (HSP)**

(Rev. 10/11)

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

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

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) §20.13 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,***
* ***32.7 percent for all special trade construction contracts,***
* ***23.6 percent for professional services contracts,***
* ***24.6 percent for all other services contracts, and***
* ***21 percent for commodities contracts*.**

**- - Agency Special Instructions/Additional Requirements - -**

|  |
| --- |
| In accordance with 34 TAC §20.14(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 contracts that have been in place for five years or less shall qualify for meeting the HUB goal. This limitation is designed to encourage vendor rotation as recommended by the 2009 Texas Disparity Study. |
| * ***11.2 percent for heavy construction other than building contracts,*** * ***21.1 percent for all building construction, including general contractors and operative builders contracts,*** * ***32.7 percent for all special trade construction contracts,*** * ***23.6 percent for professional services contracts,*** * ***24.6 percent for all other services contracts, and*** * ***21 percent for commodities contracts*.** * Proposers shall submit a completed HUB Subcontracting Plan (HSP) to be considered responsive. Failure to submit a completed HSP shall result in the bid, proposal or other expression of interest to be considered NON-responsive. * Proposers who intend to Self-Perform all of their work shall submit a HSP for Self-Performance. * HUB Subcontracting Plan (HSP) Prime Contractors Progress Assessment Report (PAR) shall be submitted with each request for payment as a condition of payment. * Please include two copies separate from your bid. * Submit HSP directly to:   **Shaun A. McGowan, Manager, HUB and Small Business Program – 1851 Crosspoint Avenue, Suite 1.160, Houston, TX 77054** |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **SECTION 1** | | **Respondent and Requisition Information** | | | | | | | | |
| **a.** | Respondent (Company) Name: | | | |  | State of Texas VID #: | | |  | |
|  | Point of Contact: | | |  | | Phone #: |  | | | |
|  | E-mail Address: | | |  | | Fax #: |  | | | |
| **b.** | Is your company a State of Texas certified HUB? - Yes - No | | | | | | | | | |
| **c.** | Requisition #: | |  | | | Bid Open Date: | | **/    /** | |  |

**(mm/dd/yyyy)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Enter your company’s name here: |  |  | Requisition #: |  |  |
|  |  |  |  |  |  |

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| **SECTION 2** | **Subcontracting Intentions** |

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

1. Check the appropriate box (Yes or No) that identifies your subcontracting intentions:

- ***Yes***, I will be subcontracting portions of the contract. (If ***Yes***, complete Item b, of this SECTION and continue to Item c of this SECTION.)

- ***No***, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources. (If ***No***, continue to SECTION 3.)

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item #** | **Subcontracting Opportunity Description** | **HUBs** | | **Non-HUBs** |
| **Percentage of the contract**  **expected to be subcontracted**  **to HUBs with which you have**  **had contracts in place for**  **five (5) years or less.** | **Percentage of the contract**  **expected to be subcontracted**  **to HUBs with which you have**  **had contracts in place for**  **more 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:** | **%** | **%** | **%** |

(Note: If you have more than fifteen subcontracting opportunities, a continuation sheet is available online at **http://window.state.tx.us/procurement/prog/hub/hub-subcontracting-plan/**)

**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.)

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

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Enter your company’s name here:  (Rev. 10/11) |  |  | Requisition #: |  |  |
|  |  |  |  |  |  |

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| **SECTION 2** | **Subcontracting Intentions (Continuation Sheet)** |

1. **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).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item #** | **Subcontracting Opportunity Description** | **HUBs** | | **Non-HUBs** |
| **Percentage of the contract**  **expected to be subcontracted**  **to HUBs with which you have**  **had contracts in place for**  **five (5) years or less.** | **Percentage of the contract**  **expected to be subcontracted**  **to HUBs with which you have**  **had contracts in place for**  **more than five (5) years.** | **Percentage of the contract**  **expected to be subcontracted**  **to non-HUBs .** |
|  |  | **%** | **%** | **%** |
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|  |  | **%** | **%** | **%** |
|  |  | **%** | **%** | **%** |
| **Aggregate percentages of the contract expected to be subcontracted:** | | **%** | **%** | **%** |

|  |  |
| --- | --- |
| **SECTION 3** | **Self Performing Justification (If you responded “*No*” to SECTION 2, Item a, you must complete this SECTION and continue to SECTION 4.)** |

Check the appropriate box (Yes or No) that indicates whether your response/proposal contains an explanation demonstrating how your company will fulfill the entire contract with its own resources.

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

**- No** (If ***No***, in the space provided below **explain how** your company will perform the entire contract with its own equipment, supplies, materials and/or employees.)

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| **SECTION 4** | **Affirmation** |

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

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Printed Name Title Date

|  |  |
| --- | --- |
| **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. |

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

(Rev. 10/11)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Enter your company’s name here: |  |  | Requisition #: |  |  |
|  |  |  |  |  |  |

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

|  |  |
| --- | --- |
| **SECTION A-1** | **Subcontracting Opportunity** |

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

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| --- | --- | --- | --- | --- |
| **Item #:** |  |  | **Description:** |  |

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| **SECTION A-2** | **Subcontractor Selection** |

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company Name** | **Texas**  **Certified HUB** | **VID #**  **(Required if Texas Certified HUB)** | **Approximate Dollar Amount** | **Expected Percentage**  **of Contract** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **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 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.

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

(Rev. 10/11)

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| --- | --- | --- | --- | --- | --- |
| Enter your company’s name here: |  |  | Requisition #: |  |  |
|  |  |  |  |  |  |

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

|  |  |
| --- | --- |
| **SECTION B-1** | **Subcontracting Opportunity** |

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item #:** |  |  | **Description:** |  |

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| **SECTION B-2** | **Mentor Protégé Program** |

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

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

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

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

|  |  |
| --- | --- |
| **SECTION B-3** | **Notification Of Subcontracting Opportunity** |

When completing this section you MUST comply with items a, b, c and d, thereby demonstrating your Good Faith Effort of having notified Texas certified HUBs and minority or women trade organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plans and specifications, bonding and insurance requirements, required qualifications, and identify a contact person.

When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUB Subcontracting Opportunity Notice form, which is also available online at [**http://www.window.state.tx.us/procurement/prog/hub/hub-subcontracting-plan/**](http://www.window.state.tx.us/procurement/prog/hub/hub-subcontracting-plan/)

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs and minority or women trade organizations or development centers.

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

|  |  |  |  |
| --- | --- | --- | --- |
| **Company Name** | **VID #** | **Date Notice Sent**  **(mm/dd/yyyy)** | **Did the HUB Respond?** |
|  |  | **/    /** | - **Yes**  - **No** |
|  |  | **/    /** | - **Yes**  - **No** |
|  |  | **/    /** | - **Yes**  - **No** |

1. Provide written notif*i*cation of the subcontracting opportunity you listed in SECTION B-1 to minority or women trade organizations or development centers to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting opportunity notice to minority or women trade organizations or development centers at least seven (7) working days prior to submitting your bid response to the contracting agency.

A list of trade organizations and development centers that have expressed an interest in receiving notices of subcontracting opportunities is available on the Statewide HUB Program’s webpage at **http://www.window.state.tx.us/procurement/prog/hub/mwb-links-1/**

1. Enter the name of the minority or women trade organizations or development centers you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the date when you sent notice to it and indicate if it accepted or rejected your notice.

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

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

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| Enter your company’s name here: |  |  | Requisition #: |  |  |
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| **SECTION B-4** | **Subcontractor Selection** |

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Company Name** | **Texas**  **Certified HUB** | **VID #**  **(Required if Texas Certified HUB)** | **Approximate Dollar Amount** | **Expected Percentage**  **of Contract** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |
|  | - **Yes**  - **No** |  | **$** | **%** |

1. 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):

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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 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.

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| **sealxlgHUB Subcontracting Plan (HSP)** | | | | | | | | | | | | | |
| **Prime Contractor Progress Assessment Report** | | | | | | | | | | | | | |
| ***This form must be completed and submitted to the contracting agency each month to document compliance with your HSP.*** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Contract/Requisition Number:** | | |  |  | **Date of Award:** | |  | | **Object Code:** | | |  | |
|  |  |  |  |  |  | | (mm/dd/yyyy) | |  | | | (Agency Use Only) | |
| **Contracting Agency/University Name:** | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Contractor (Company) Name:** | | |  | | | | **State of Texas VID #:** | |  | | | | |
|  | | | | | | | | | | | | | |
| **Point of Contact:** | | |  | | | | **Phone #:** | |  | | | | |
|  |  |  |  |  |  | | | |  | | |  | |
| **Reporting (Month) Period:** | | |  | **Total Amount Paid this Reporting Period to Contractor:** | | | | | $ - | | | | |
|  |  |  |  | | | |  | |  | | |  | |
| ***Report HUB and Non-HUB subcontractor information*** | | | | | | | | | | | | | |
| **Subcontractor’s Name** | | | **Subcontractor’s VID or HUB Certificate Number** | **\*Texas Certified HUB? (Yes or No)** | **Total Contract $ Amount from HSP with Subcontractor** | | **Total $ Amount Paid This Reporting Period to Subcontractor** | | **Total Contract $ Amount Paid to Date to Subcontractor** | | | **Object Code** (Agency Use Only) | |
|  | | |  |  | $ - | | $ - | | $ - | | |  | |
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| **TOTALS:** | | | |  | $ - | | $ - | | $ - | | |  | |
| **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Printed Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | Rev. 10/07 | |
| **TEXAS MINORITY ORGANIZATIONS AND CONTACT LIST** | | | | | | |  | |  | |  |  | |  | |  |
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| ***Texas Association of Mexican American Chambers of Commerce*** | | | | | | | | |  | |  |  | |  | |  |
| **Chamber** | | | | | | | **Address** | | **City** | | **Zip** | **Phone** | | **Fax** | | **Email** |
| Camara de Comericio Hispana de Amarillo | | | | | | | P.O. Box 1861 | | Amarillo | | 79105 | 806-379-8800 | | 806-376-7873 | | [cacha@cacha.org](mailto:cacha@cacha.org) |
| Arlington Hispanic Chamber of Commerce | | | | | | | P.O. Box 2200 | | Arlington | | 76004 | 817-461-8815 | | 817-795-9499 | | [info@hispanic-chamber.org](mailto:info@hispanic-chamber.org) |
| Greater Austin Hispanic Chamber of Commerce | | | | | | | 3000 S. IH 35, Ste 305 | | Austin | | 78704 | 512-476-7502 | | 512-476-6417 | | [member@hispanicaustin.com](mailto:member@hispanicaustin.com) |
| Hispanic Chamber of Commerce of Greater Baytown | | | | | | | P.O. Box 815 | | Baytown | | 77522 | 281-422-6908 | | 281-486-4802 | | [www.baytownhcc.com](http://www.baytownhcc.com/) |
| Bee County Area Hispanic Chamber of Commerce | | | | | | | 1400 W. Corpus Christi, Ste 15 | | Beeville | | 78102 | 361-362-6010 | | 361-362-6019 | |  |
| Corpus Christi Hispanic Chamber of Commerce | | | | | | | P.O. Box 5523 | | Corpus Christi | | 78465 | 361-887-7408 | | 361-888-9473 | | [www.cchispanicchamber.org](http://www.cchispanicchamber.org/) |
| Greater Dallas Hispanic Chamber of Commerce | | | | | | | 4622 Maple Ave, Ste 207 | | Dallas | | 75219 | 217-521-6007 | | 214-520-1687 | | [www.gdhcc.com](http://www.gdhcc.com/) |
| Denton Hispanic Chamber of Commerce | | | | | | | 2412 Old North Rd., Ste 104 | | Denton | | 76205 | 940-484-0036 | | 940-483-1939 | |  |
| Eagle Pass Hispanic Chamber of Commerce | | | | | | | P.O. Box 3040 | | Eagle Pass | | 78852 | 830-757-2704 | | 830-757-2703 | |  |
| Edinburg Hispanic Chamber of Commerce | | | | | | | P.O. Box 4073 | | Edinburg | | 78540 | 956-383-5163 | | 956-383-720 | |  |
| El Paso Hispanic Chamber of Commerce | | | | | | | 201 E. Main Ste 100 | | El Paso | | 79901 | 915-566-4066 | | 915-566-9714 | | [cindyramosdavidson@ephcc.org](mailto:cindyramosdavidson@ephcc.org) |
| Fort Stockton Hispanic Chamber of Commerce | | | | | | | 106 N. Main | | Fort Stockton | | 79735 | 915-336-8536 | | 915-336-2152 | | [cashexpress@ftstockton.net](mailto:cashexpress@ftstockton.net) |
| Fort Worth Hispanic Chamber of Commerce | | | | | | | 1327 N. Main | | Fort Worth | | 76106 | 817-625-5411 | | 817-625-1405 | | [www.fwhcc.org](http://www.fwhcc.org/) |
| Grand Prairie Hispanic Chamber of Commerce | | | | | | | 114 NE 4th St. | | Grand Prairie | | 75050 | 972-642-2621 | | 972-642-4116 | | [gphcc@aol.com](mailto:gphcc@aol.com) |
| Harlingen Hispanic Chamber of Commerce | | | | | | | P.O. Box 530967 | | Harlingen | | 78553 | 956-421-2400 | | 956-364-1879 | | [hhcoc@xanadu2.net](mailto:hhcoc@xanadu2.net) |
| Houston Hispanic Chamber of Commerce | | | | | | | 2900 Woodridge Dr. Ste 312 | | Houston | | 77087 | 713-644-7070 | | 716-644-7377 | | [www.houstonhispanicchamber.com](http://www.houstonhispanicchamber.com/) |
| Kleberg County Hispanic Chamber of Commerce | | | | | | | 20 N. 5th St. | | Kingsville | | 78363 | 361-592-2708 | | 361-592-8540 | |  |
| Laredo Chamber of Commerce | | | | | | | P.O. Box 790 | | Laredo | | 78402 | 956-722-9895 | | 956-791-4503 | | [www.laredochamber.com](http://www.laredochamber.com/) |
| Caldwell County Hispanic Chamber of Commerce | | | | | | | P.O. Box 147 | | Lockhart | | 78644 | 512-507-9562 | | 512-357-1472 | | [www.lockharthispanicchamber.org](http://www.lockharthispanicchamber.org/) |
| Lubbock Hispanic Chamber of Commerce | | | | | | | 1302 Main, Ste 102 | | Lubbock | | 79401 | 806-762-5059 | | 806-763-2124 | | [www.lubbockhispanic.org](http://www.lubbockhispanic.org/) |
| McAllen Hispanic Chamber of Commerce | | | | | | | P.O. Box 721025 | | McAllen | | 78504 | 956-928-0060 | | 956-928-0073 | | [www.mhcc.net](http://www.mhcc.net/) |
| Midland Hispanic Chamber of Commerce | | | | | | | 208 S. Marienfield Ste 100 | | Midland | | 79701 | 432-682-2960 | | 432-687-3972 | | [www.midlandhcc.com](http://www.midlandhcc.com/) |
| Greater Hispanic Chamber of Commerce of Comal County | | | | | | | 205 Mahan Circle | | New Braunfels | | 78130 | 512-428-1729 | | 512-912-8499 | |  |
| Mexican American Network of Odessa (MANO) | | | | | | | P.O. Box 2309 | | Odessa | | 79760 | 432-335-0250 | | 432-337-6266 | | [manoinc@nwol.net](mailto:manoinc@nwol.net) |
| Greater Pleasanton-Atascosa Hispanic Chamber of Commerce | | | | | | | Rt. 1, Box 55JF | | Pleasanton | | 78064 | 210-824-9096 | | 210-822-3636 | |  |
| Golden Triangle Hispanic Chamber of Commerce | | | | | | | 3046 Procter St | | Port Arthur | | 78642 | 409-983-1169 | | 409-983-2329 | | [www.gthcc.org](http://www.gthcc.org/) |
| Rio Grande City Chamber of Commerce | | | | | | | P.O. Box 2 | | Rio Grande City | | 78582 | 956-487-3024 | | 956-716-8560 | |  |
| San Antonio Hispanic Chamber of Commerce | | | | | | | 318 W. Houston Ste 300 | | San Antonio | | 78205 | 210-225-0462 | | 210-225-2485 | | [www.sahcc.org](http://www.sahcc.org/) |
| San Marcos Hispanic Chamber of Commerce | | | | | | | P.O. Box 1051 | | San Marcos | | 78667 | 512-353-1103 | | 512-353-2175 | | [www.sanmarcoshispanic.com](http://www.sanmarcoshispanic.com/) |
| Seguin-Guadalupe County Hispanic Chamber of Com | | | | | | | P.O. Box 1154 | | Seguin | | 78155 | 830-372-3151 | | 830-372-3151 | | [shcc@axs4u.net](mailto:shcc@axs4u.net) |
| Greater Victoria Hispanic Chamber of Commerce | | | | | | | 221 S. Main | | Victoria | | 77901 | 361-575-7100 | | 361-575-7100 | |  |
| Cen-Tex Hispanic Chamber of Commerce | | | | | | | 501 Franklin Ste 806 | | Waco | | 76710 | 254-754-720 | | 254-754-3456 | | [www.wacohispanicchamber.com](http://www.wacohispanicchamber.com/) |
|  | | | | | | |  | |  | |  |  | |  | |  |
| ***Texas Black Chambers of Commerce*** | | | | | | |  | |  | |  |  | |  | |  |
| **Chamber** | | | | | | | **Address** | | **City** | | **ZIP** | **Phone** | | **Fax** | | **Email** |
| Abilene Black Chamber of Commerce | | | | | | | P.O. Box 3572 | | Abilene | | 79604 | 915-673-4741 | | 915-673-4743 | | [blackcha@camalott.com](mailto:blackcha@camalott.com) |
| Acres Home Citizens Chamber of Commerce | | | | | | | 6130 Wheatley St. | | Houston | | 77091 | 713-692-7003 | | 713-692-1183 | | [aframnews@pdq.net](mailto:aframnews@pdq.net) |
| ***Texas Black Chambers of Commerce con't*** | | | | | | |  | |  | |  |  | |  | |  |
| **Chamber** | | | | | | | **Address** | | **City** | | **ZIP** | **Phone** | | **Fax** | | **Email** |
| African American Chamber of Commerce of San Antonio | | | | | | | 1717 N Loop 1604 East, Ste 220 | | San Antonio | | 78232 | 210-490-1624 | | 210-490-5294 | | [blackchamber@aol.com](mailto:blackchamber@aol.com) |
| African American Chamber of Commerce of Victoria | | | | | | | 1501 E. Mockingbird, Ste 104 | | Victoria | | 77904 | 361-575-2061 | | 361-570-3696 | | [info@aaccv.com](mailto:info@aaccv.com) |
| Alamo City Chamber of Commerce | | | | | | | 600 Hemisfair Plaza Way, #406-10 | | San Antonio | | 78205 | 210-226-9055 | | 210-226-0524 | | [info@alamocitychamber.org](mailto:info@alamocitychamber.org) |
| Atlanta Negro Chamber of Commerce | | | | | | | P.O. Box 194 | | Atlanta | | 75551 | 903-796-9647 | | Call First | |  |
| Black Chamber of Commerce of Permian Basin | | | | | | | P.O. Box 1006 | | Odessa | | 79760 | 915-332-5812 | | 915-333-7858 | |  |
| Capitol City African American Chamber of Commerce | | | | | | | 5407 N. IH 35, Ste 304 | | Austin | | 78723 | 512-459-1181 | | 512-459-1183 | |  |
| Central Texas African American Chamber of Commerce | | | | | | | P.O. Box 2516 | | Harker Heights | | 76548 | 254-698-7477 | | 254-698-5991 | | [mnch@vvm.com](mailto:mnch@vvm.com) |
| Corpus Christi Black Chamber of Commerce | | | | | | | 5658 Bear Lane | | Corpus Christi | | 78408 | 361-298-2712 | | 361-289-3006 | | [tshadow@davlin.net](mailto:tshadow@davlin.net) |
| Dallas Black Chamber of Commerce | | | | | | | 2838 Martin Luther King Jr. Blvd | | Dallas | | 75216 | 214-421-5200 | | 214-421-5510 | | [rgates@dbcc.org](mailto:rgates@dbcc.org) |
| Denton Black Chamber of Commerce | | | | | | | 602 S. Elm | | Denton | | 76201 | 972-434-3811 | | 940-382-9695 | | [info@dentonblackchamber.org](mailto:info@dentonblackchamber.org) |
| El Paso Black Chamber of Commerce | | | | | | | 109 N. Oregon, Ste 212 | | El Paso | | 79901 | 915-534-0570 | | 915-534-0561 | |  |
| Ennis Negro Chamber of Commerce | | | | | | | P.O. Box 1036 | | Ennis | | 75120 | 972-878-0068 | | Call First | |  |
| Fort Worth Metropolitan Black Chamber of Commerce | | | | | | | 1150 S. Freeway, Rm 211 | | Fort Worth | | 76140 | 817-870-6538 | | 817-332-6438 | | [info@metrobcc.com](mailto:info@metrobcc.com) |
| Heart of Texas Black Chamber of Commerce | | | | | | | P.O. Box 1485 | | Waco | | 76703 | 254-799-6923 | | 254-412-0988 | |  |
| Houston Citizens Chamber of Commerce | | | | | | | 2808 Wheeler | | Houston | | 77004 | 713-522-9745 | | 713-522-5965 | |  |
| Longview Metro Black Chamber of Commerce | | | | | | | 303 Webb | | Daingerfield | | 75638 | 903-645-3932 | | 903-645-7565 | |  |
| Lubbock Black Chamber of Entrepreneurs, Inc | | | | | | | P.O. Box 205 | | Lubbock | | 74408 | 806-763-0144 | | 806-762-1125 | |  |
| Midland Black Chamber of Entrepreneurs, Inc. | | | | | | | P.O. Box 50473 | | Midland | | 79710 | 915-682-2864 | | 915-684-6422 | | [mbce@swbell.net](mailto:mbce@swbell.net) |
| National Assoc. of African American Chambers of Commerce | | | | | | | P.O. Box 763926 | | Dallas | | 75376 | 214-871-3060 | | 214-871-3020 | | [naaacc@mail.com](mailto:naaacc@mail.com) |
| Praire View Chamber of Commerce | | | | | | | P.O. Box 2875 | | Prairie View | | 77446 | 936-931-5875 | | 936-931-1082 | | [gdarby@swbellnet](mailto:gdarby@swbellnet) |
| Texarkana Black Chamber of Commerce | | | | | | | 600 Sowell Lane | | Texarkana | | 75505 | 903-831-3969 | | 903-832-6729 | | [tbcc@cableone.net](mailto:tbcc@cableone.net) |
| Tyler Metropolitan Chamber of Commerce | | | | | | | 100 E. Ferguson, St 1013 | | Tyler | | 75702 | 903-593-9538 | | 903-593-9058 | | [tylermetro@aol.com](mailto:tylermetro@aol.com) |
|  | | | | | | |  | |  | |  |  | |  | |  |
| ***Associated General Contractors*** | | | | | | |  | |  | |  |  | |  | |  |
| **Chapter** | | | | | | | **Address** | | **City** | | **ZIP** | **Phone** | | **Fax** | | **Email** |
| Abilene AGC | | | | | | | 1326 G South 14th | | Abilene | | 79602 | 325-676-7447 | | 325-676-0107 | | [wtagc@wtagc.org](mailto:wtagc@wtagc.org) |
|  | | | | | | | P.O. Box 5365 | | Abilene | | 79608 |  | |  | |  |
| Lubbock AGC | | | | | | | 3004 B 50th St. | | Lubbock | | 79413 | 806-797-8898 | | 806-796-7115 | | [lubbockagc@nts-online.net](mailto:lubbockagc@nts-online.net) |
|  | | | | | | | P.O. Box 6265 | | Lubbock | | 79493 |  | |  | |  |
| Midland AGC | | | | | | | 1030 Andrews Hwy, 105 | | Midland | | 79701 | 432-520-2220 | | 432-520-2226 | | [midlandagc@apex2000.net](mailto:midlandagc@apex2000.net) |
|  | | | | | | | P.O. Box 7433 | | Midland | | 79708 |  | |  | |  |
| Wichita Falls AGC | | | | | | | 3100 Seymour Hwy., 214 | | Wichita Falls | | 76301 | 940-322-0100 | | 940-322-2344 | | [wfagc@wf.net](mailto:wfagc@wf.net) |
|  | | | | | | | P.O. Box 3434 | | Wichita Falls | | 76301 |  | |  | |  |
| Austin AGC | | | | | | | 609 South Lamar Blvd | | Austin | | 78704 | 512-442-7887 | | 512-442-3503 | | [philt@agcaustin.org](mailto:philt@agcaustin.org) |
| Houston AGC | | | | | | | 3825 Dacoma St | | Houston | | 77092 | 713-843-3700 | | 713-843-3701 | | [jerry.n@agchouston.org](mailto:jerry.n@agchouston.org) |
|  | | | | | | | P.O. Box 662 | | Houston | | 77091 |  | |  | |  |
| QUOIN a Chapter of AGC | | | | | | | 2011 Stemmons Fwy | | Dallas | | 75229 | 972-647-0697 | | 972-247-1930 | | [quoin@quoin.org](mailto:quoin@quoin.org) |
| Rio Grande Valley AGC | | | | | | | P.O. Box 391 | | Harlingen | | 78551 | 956-423-4091 | | 956-423-0174 | | [vaughn@rgvagc.org](mailto:vaughn@rgvagc.org) |
| San Antonio AGC | | | | | | | 10806 Gulfdale | | San Antonio | | 78216 | 210-349-4921 | | 210-349-4017 | | [mcmurry@sanantonioagc.org](mailto:mcmurry@sanantonioagc.org) |
| El Paso AGC | | | | | | | 4625 Ripley Dr. | | El Paso | | 79922 | 915-585-1533 | | 915-585-1622 | |  |
|  | | | | | | |  | |  | |  |  | |  | |  |
| ***Other Minority Organizations*** | | | | | | |  | |  | |  |  | |  | |  |
| **Name** | | | | | | | **Address** | | **City** | | **ZIP** | **Phone** | | **Fax** | | **Email** |
| Tarrant County Asian American Chamber of Commerce | | | | | | |  | | Arlington | |  | 817-212-2690 | |  | | [tcaacc@tcaacc.org](mailto:tcaacc@tcaacc.org) |
| Women's Business Council | | | | | | |  | | Arlington | |  | 817-299-0566 | | 817-299-0949 | | [ementhe@wbcsouthwest.org](mailto:ementhe@wbcsouthwest.org) |
| Pan Asian American Chamber of Commerce Southwest | | | | | | |  | | Arlington | |  | 817-543-4299 | | 817-469-9485 | | [gmcdermott@uspaacc-sw.com](mailto:gmcdermott@uspaacc-sw.com) |
| Austin Asian American Chamber of Commerce | | | | | | | 8711 Burnet Rd., Ste A-15 | | Austin | | 78757 | 512-407-8240 | | 512-407-8233 | |  |
| The Woman's Chamber of Commerce of Texas | | | | | | | P.O. Box 26051 | | Austin | | 78755 | 512-338-0839 | | 512-338-1614 | |  |
| Asian Construction Trades Association | | | | | | | 4100 Ed Bluestein | | Austin | | 78721 | 512-926-5400 | | 512-926-5410 | |  |
| Austin Black Contractors Association | | | | | | | 6448 Highway 290 East, Suite E107 | | Austin | | 78723 | 512-927-8290 | | 512-467-9808 | |  |
| Hispanic Contractors Association of Austin | | | | | | | 4100 Ed Bluestein | | Austin | | 78721 | 512-929-3363 | | 512-929-3368 | |  |
| National Association of Women in Construction | | | | | | | 14101 W. Hwy 290 | | Austin | | 78737 | 512-922-5395 | |  | | [bross@qnsi.net](mailto:bross@qnsi.net) |
| Greater Dallas Asian American Chamber of Commerce | | | | | | | 2071 Harry Hines Blvd, #115 | | Dallas | | 75229 | 972-241-8250 | | 972-241-8270 | | [chott@gdaacc.com](mailto:chott@gdaacc.com) |
| Greater Dallas Korean Chamber of Commerce | | | | | | |  | | Dallas | |  | 972-484-5115 | | 972-481-9603 | | [admin@koreanchamber.org](mailto:admin@koreanchamber.org) |
| Hispanic Contractors of DFW | | | | | | | 2818 Ruder St | | Dallas | | 75212 | 214-954-1088 | | 214-954-1098 | |  |
| Black Contractors Association | | | | | | |  | | Dallas | |  | 214-260-9357 | |  | | [info@bcadallas.org](mailto:info@bcadallas.org) |
| DFW Minority Business Development | | | | | | |  | | Dallas | |  | 214-688-1612 | | 214-688-1753 | | [lcrawford@dmbdc.com](mailto:lcrawford@dmbdc.com) |
| African Chamber of Commerce of DFW | | | | | | |  | | Dallas | |  | 214-421-6155 | | 214-421-6158 | | [accdfw@juno.com](mailto:accdfw@juno.com) |
| DFW Minority Business Development Council | | | | | | |  | | Dallas | |  | 214-630-0747 | | 214-637-2241 | | [Bill@dfwmbdc.com](mailto:Bill@dfwmbdc.com) |
| Fort Worth Women's Business Center | | | | | | |  | | Fort Worth | |  | 817-871-6006 | | 817-871-6031 | | [mtippen@fwbac.com](mailto:mtippen@fwbac.com) |
| Taiwanese Chamber of Commerce of DFW | | | | | | |  | | Fort Worth | |  | 817-261-6668 | |  | |  |
| Odessa Plan Room | | | | | | | 2706 Henderson Ave | | Odessa | | 79764 | 432-337-0912 | | 432-580-0910 | |  |
| El Paso Community College Contract Opportunities Ctr | | | | | | |  | | El Paso | |  | 915-831-7747 | | 915-831-7755 | | [pabloa@epcc.edu](mailto:pabloa@epcc.edu) |
| Hispanic Contractors de San Antonio | | | | | | | 4047 Naco Perrin, Ste 201-B | | San Antonio | | 78217 | 210-444-1100 | | 210-444-1101 | | [info@hcsa.com](mailto:info@hcsa.com) |
| Alamo Asian American Chamber of Commerce | | | | | | | 12758 Cimarron Path, Ste 118 | | San Antonio | | 78249 | 210-641-6003 | | 210-641-8279 | | [echan@unitech.com](mailto:echan@unitech.com) |
| Chamber of Commerce | | | | | | |  | | Tyler | |  | 903-593-2004 | |  | | [tgm@tedc.org](mailto:tgm@tedc.org) |
| Concho Valley Plan Room | | | | | | | 818 N. Bell | | San Angelo | | 76905 | 325-655-3539 | | 325-653-3757 | |  |
| Central South Texas Minority Business Council | | | | | | | 912 Bastrop Hwy. Ste 101 | | Austin | | 78741 | 512-386-8766 | | 512-386-8988 | | [dinah@cstmbc.org](mailto:dinah@cstmbc.org) |
| Texas Association of Mexican American Chambers of Commerce | | | | | | |  | | Austin | |  | 512-444-5727 | | 512-444-4929 | | [carlosm@tamacc.org](mailto:carlosm@tamacc.org) |
| American Indian Chamber of Commerce of Texas | | | | | | | 10425 Olympic Drive | | Dallas | | 75220 | 214-352-6005 | | 214-357-9435 | |  |
| American Indian Chamber of Commerce of Texas | | | | | | | 1205 Country Club Lane | | Fort Worth | | 76112 | 817-429-2323 | | 817-451-3575 | |  |
|  | | | | | | |  | |  | |  |  | |  | |  |
| ***Selected List of HUB Resources on Web*** | | | | | | |  | |  | |  |  | |  | |  |
| **Agency/Organization** | | | | | | | **Resource** | | **Web Site** | |  |  | |  | |  |
| Texas Association of African American Chambers of Commerce: | | | | | | | Listing of African American chambers in Texas | | [http://www.taaacc.org](http://www.taaacc.org/) | | | | |  | |  |
| Texas Association of Mexican American Chambers of Commerce: | | | | | | | Listing of Hispanic Chambers in Texas | | <http://www.tamacc.org/chambers/index.html> | | | | |  | |  |
| Texas Women’s Chamber of Commerce: | | | | | | | Database of selected women owned businesses | | [www.womenschambertexas.com](http://www.womenschambertexas.com/) | | | | |  | |  |
| Texas Asian Chamber of Commerce: | | | | | | | Database of selected Asian owned businesses | | [www.txasianchamber.org](http://www.txasianchamber.org/) | | | | |  | |  |
| Greater Dallas Asian American Chamber of Commerce: | | | | | | | Database of selected Asian owned businesses | | [www.gdaacc.com](http://www.gdaacc.com/) | | | | |  | |  |
| Austin Asian-American Chamber of Commerce | | | | | | | Database of selected Asian owned businesses | | [www.austinaacc.org](http://www.austinaacc.org/) | | | | |  | |  |
| Tarrant County Asian American Chamber of Commerce: | | | | | | | Database of selected Asian owned businesses | | [www.tcaacc.org](http://www.tcaacc.org/) | | | | |  | |  |
| (Houston) Asian Chamber of Commerce: | | | | | | | Database of selected Asian owned businesses | | [www.asianchamber-hou.org](http://www.asianchamber-hou.org/) | | | | |  | |  |
| U. S. Department of Commerce Minority Business Development Agency | | | | | | | Listing of minority business development centers | | <http://www.mbda.gov/?section_id=1&parent_bucket_id=151&content_id=2267> | | | | | | | |
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**HUB Subcontracting Opportunity Notification Form**

(Rev. 10/11)

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, §20.14 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, the respondent must provide notice of each of its subcontracting opportunities to minority/women trade organizations or development centers at least seven (7) working days prior to submitting its bid response to the contracting agency.

We respectfully request that vendors interested in bidding on the subcontracting opportunity identified in **Section C** 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** | | | |
| **Company Name:** |  |  | **State of Texas VID #:** |  |
| **Point-of-Contact:** |  |  | **Phone #:** |  |
| **E-mail Address:** |  |  | **Fax #:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section B** | **Contracting State Agency and Requisition Information** |  |  | |
| **Agency Name:** |  | | | |
| **Point-of-Contact:** |  |  | **Phone #:** |  |
| **Requisition #:** |  |  | **Bid Open Date:** |  |

|  |  |  |
| --- | --- | --- |
| **Section C** | **Subcontracting Opportunity Response Due Date, Description, Requirements and Related Information** | |
| **1.**  **Potential Subcontractor’s Bid Response Due Date:** | **Our firm must receive your bid response to this subcontracting opportunity no later** | |
| **than 5:00 P.M., Central Daylight Standard Time on:** |  |
|  | **(Date)** |
| **(Note: In accordance with 34 TAC §20.14, 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 to respond to the notice prior to submitting our bid response to the contracting agency. In addition, we must provide the same notice to minority/women trade organizations or development centers at least seven (7) working days prior to submitting our bid response to the contracting agency.)** | |
| **2.**  **Scope of Work:** |  | |
| **3.**  **Required Qualifications:** |  | |
| - **Not Applicable** |
| **4.**  **Bonding/Insurance Requirements:** |  | |
| - **Not Applicable** |
| **5.**  **Location to review plans/specifications:** |  | |

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**cid:3362484472_22646557**

**HUB and Federal Small Business Program**

**HUB Subcontracting Plan Options:**

* Participation by respondent in State’s Mentor Protégé Program applies as Good Faith Effort if Protégé is a Texas Certified HUB and Protégé is subcontractor selected to perform the subcontracting opportunity listed in Option 3, Section B-1 (Method B).
* Option 1 - (Method A) Section 2(c) of HSP: Respondent will subcontract with only HUB vendors. (No continuous contract exists with HUB exceeding 5-years in place.)
* Option 2 - (Method A) Section 2(d) of HSP: Respondent will subcontract with HUB and non-HUB vendors but the percentage subcontracted to the HUB **meets or exceeds the HUB Goal** the contracting agency identified in the “Agency Special Instructions/Additional Requirements.” (No continuous contract exists with HUB exceeding 5-years in place.)
* Option 3 - (Method B) Section B 1-4 of HSP: Respondent will subcontract with HUB and non-HUB vendors (or only non-HUB vendors), and the aggregate percentage of subcontracting with HUB vendors **does not meet or exceed** the HUB Goal the contracting agency identified in the “Agency Special Instructions/Additional Requirements”.
* Option 4 - Self-Performance – Section 3 of HSP

**Completing the Forms**

See separate attached HSP Quick Check List

**Possible Causes for Rejection will include:**

* Failure to provide 7 (seven) working days notice to HUBs
* Failure to properly notify HUBs and/or provide sufficient information to bid
* Failure to notify minimum of two trade organizations
* Failure to include supporting documentation of all Good Faith Efforts
* Telephone logs will not be accepted as documentation of good faith efforts; only fax, e-mail and written correspondence are acceptable.

**Following the Award**

* **NEW Notification of Award to Subcontractors:** Within ten (10) days following signing of the contract, contractor must notify in writing the subcontractors of their award (Section 4 Affirmation); copy of the notice must also be provided to the contracting agency’s point of contact for the contract.
* **Reporting – After Award:** Progress Assessment Reports (PARs) will be required monthly, by the 10th of the month, documenting payments to all subcontractors, HUB and non-HUB.

Resources for assistance with HSP’s, HUB Forms and/or Reports:

**HUB & Federal Small Business Program** **Fax** **713-500-4710**

**Shaun A. McGowan, Manager 713-500-4862** [**shaun.a.mcgowan@uth.tmc.edu**](mailto:shaun.a.mcgowan@uth.tmc.edu)