

SUBCONTRACTOR/SUPPLIER UTILIZATION PLAN

SOLICITATION NAME: Trailer Parts and Service A364a-11

RESPONDENT NAME:

SOLICITATION API: None

API REQUIREMENTS:

None

Section 1. Enter Respondent's (Prime) proposed contract participation level. Leave blank for revenue generating contracts.

Section 2. List ALL subcontractors / suppliers that will be utilized for the entire contract period, excluding possible extensions and renewals. Use additional sheets if necessary.

	PARTICIPATION DOLLAR AMOUNT	% LEVEL OF PARTICIPATION	CERTIFICATION TYPE AND NUMBER	TYPE OF WORK TO BE PERFORMED (BY NIGP CODE)
SECTION 1. PRIME				
Name:	\$	%	#:	
SECTION 2. SUBCONTRACTOR(s):				
1. Name:	\$	%	#:	
2. Name:	\$	%	#:	
3. Name:	\$	%	#:	
4. Name:	\$	%	#:	
5. Name:	\$	%	#:	
6. Name:	\$	%	#:	
Total Prime Participation:	\$	%	#:	
Total Sub Participation:	\$	%	#:	
Total Prime & Sub Participation:	\$	%	#:	
Total Certified Sub Participation:	\$	%	#:	

If a business is not certified, please call the Small Business Program Office at (210) 207-3900 for information and details on how subcontractors and suppliers may obtain certification.

Does your proposed plan meet the requirements associated with the API applied to this solicitation?

YES NO

I HEREBY AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I FURTHER UNDERSTAND AND AGREE THAT, IF AWARDED THE CONTRACT, THIS DOCUMENT SHALL BE ATTACHED THERETO AND BECOME A BINDING PART OF THE CONTRACT.

SIGNATURE OF AUTHORIZED AGENT

TITLE

DATE

PHONE

FOR CITY USE

Action Taken: Approved _____ Denied _____

DIRECTOR
INTERNATIONAL AND ECONOMIC DEVELOPMENT