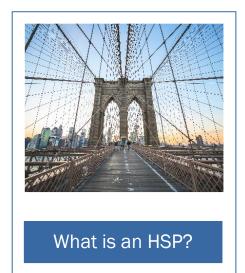
How to Modify an Approved HUB Subcontracting Plan 2023 PEPS Conference

Kimlinh Nguyen, *PEPS HOU Service Center Director* Angelina Adame, *Contract Specialist*



December 5, 2023

Modify an approved HUB Subcontracting Plan (HSP)





Why update the HSP?



What is the HSP?



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

> If you will be awarding all of the subcontracting work you have to offer under the contract to only Texas certified HUB vendors, complete:

Section 1 - Respondent and Requisition Information

Section 2 a. - Yes, I will be subcontracting portions of the contract.

Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors. Section 2 c. - Yes

Section 4 - Affirmation

GFE Method A (Attachment A) - Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.

If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract" in place for more than five (5) years meets or exceeds the HUB Goal the contracting agency identified in the "Agency Special Instructions/Additional Requirements", complete:

Section 1 - Respondent and Requisition Information

Section 2 a. - Yes, | will be subcontracting portions of the contract,

Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors and Non-HUB vendors.

Section 2 c. - No

Section 2 d. - Yes

Section 4 - Affirmation

GFE Method A (Attachment A) - Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.

If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors or only to Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract" in place for more than five (5) years does not meet or exceed the HUB Goal the contracting agency identified in the "Agency Special Instructions/Additional Requirements", complete:

Section 1 - Respondent and Requisition Information

Section 2 a. - Yes. I will be subcontracting portions of the contract.

Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas cartified 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 goods or service, to include under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewais or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.



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

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

The HUB Program promotes equal business opportunities for economically disadvantaged persons to contract with the State of Texas in accordance with the goals specified in the 2009 State of Texas Disparity Study. The statewide HUB goals defined in 34 Texas Administrative Code (TAC) \$20,284 are:

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

- - Agency Special Instructions/Additional Requirements - -

in accordance with 34 TAC §20,285(d)(1)(D)(iii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific NUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent does not have a continuous contract" in place for more than five (5) years shall qualify for meeting the HUB goal. This limitation is designed to encourage vendor rotation as recommended by the 2009 Texas Disparity Study.

SECTION 1: RESPONDENT AND REQUISITION INFORMATION

 Respondent (Company) Name: State of Texas VID #: Point of Contact: Phone #:

Fax #:

Bid Open Date:

(mmiddlyyyy)

E-mail Address:

b. Is your company a State of Texas certified HUB? □ - Yes □ - No

c. Requisition #:

Why is the change to HSP needed?

There is a change to the contract that impacts the HUB Goal.

- Business Changes
 - o Company name change
 - Business Acquisition, Merger, or Dissolvement
- Change in scope including work allocation by the State
- Change in contract value
- Other changes to the HSP

(Any changes to the HSP are required as stated in TAC 34 Part 1 Rule §20.285 (i))



- Updated HSP form
- Form 2580 Change Request Form
 - https://comptroller.texas.gov/
- Supplement Agreement



Form 258 (Rev. 09/20 Page 1 of



There are 4 options available to complete.....

HUB Subcontracting Plan (HSP) **QUICK CHECKLIST** While this HSP Quick Checklist is being provided to merely assist you in readily identifying the sections of the HSP form that you will need to complete, it is very important that you adhere to the instructions in the HSP form and instructions provided by the contracting agency. If you will be awarding all of the subcontracting work you have to offer under the contract to only Texas certified HUB vendors, complete:

- Section 1 Respondent and Requisition Information
- Section 2 a. Yes. I will be subcontracting portions of the contract.

Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors. Section 2 c. - Yes

- Section 4 Affirmation
- GFE Method A (Attachment A) Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.
- If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a continuous contract, in place for more than five (5) years meets or exceeds the HUB Goal the contracting agency identified in the "Agency Special Instructions/Additional Requirements", complete:
 - Section 1 Respondent and Requisition Information
 - Section 2 a. Yes, I will be subcontracting portions of the contract.

Section 2 b. - List all the portions of work you will subcontract, and indicate the percentage of the contract you expect to award to Texas certified HUB vendors.

and Non-HUB vendors.

- Section 2 c. No
- Section 2 d. Yes

Section 4 - Affirmation

GFE Method A (Attachment A) - Complete an Attachment A for each of the subcontracting opportunities you listed in Section 2 b.

If you will be subcontracting any portion of the contract to Texas certified HUB vendors and Non-HUB vendors or only to Non-HUB vendors, and the aggregate percentage of all the subcontracting work you will be awarding to the Texas certified HUB vendors with which you do not have a communus commant, in place for more than five (5) years does not meet or exceed the HUB Goal the contracting agency Identified in the "Agency Special Instructional/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 goods or service, to include under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new contracts.

HUB Subcontracting Plan (HSP)

In accordance with Texas GoVI 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 Undervalized Businesses (HUBs) must comprete and submit this State of Texas HUB Subcontracting Plan (HSP) with their response to her built previous (Calaban).

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

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

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

-- Agency Special Instructions/Additional Requirements --

In accordance will be TAC 500 255(d)(1(b)(d)), a regionment (prime contraction may demonstrate good faith effort to utilize Trais accent HMBs for to subcontracting optimities if the focus value of the response for subcontracting with Trais accent for MBS mests or extensions the statework HMB goal or the agency specific HMB goal, whichever is higher. When a responser uses this method to demonstrate good faith effort, the responser must be fort to utilize Trais accent for the trais of the responser must be trained with a first accent for the second se

| ECTION 1: RE | SPONDENT AND REGUISITION INFORMATION | |
|--|--|---|
| | SPONDENT AND REQUISITION INFORMATION (Company) Name: ENGINEERING SOLUTIONS, LLC | State of Texas VID #: 12315678910 |
| a. Respondent | | State of Texas VID #: <u>12315678910</u> Phone #: 123-456-7890 |
| a. Respondent Point of Cont | (Company) Name: ENGINEERING SOLUTIONS, LLC | |
| a. Respondent Point of Cont E-mail Addre | (Company) Name: ENGINEERING SOLUTIONS, LLC act: John Doe, P.E. | |

1

SECTION 1: RESPONDENT AND REQUISITION INFORMATION

| a. | Respondent (Com | pany) Name: ENGINEERING SOLUTIONS, LLC | State of Texas VID # | 12315678910 |
|----|-------------------|--|----------------------|--------------|
| | Point of Contact: | John Doe, P.E. | Phone #: 123-4 | 56-7890 |
| | E-mail Address: | JohnDoe@engineering.com | Fax #: | |
| b. | Is your company. | owner of Texas certified HUB? 7 - Yes - No | | |
| * | Requisition #: 6 | 01CT000009999 | Bid Open Date: | 6/3/2021 |
| | | | | (mm/ddlyyyy) |
| | | | | |
| | | | | |

Rev. 2/17

Enter your company's name here: ENGINEERING SOLUTIONS, LLC

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

Rev 2017

Requisition #: 601CT0000009999

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 fulfiling the entire contract with my own resources, including employees, goods and services. (# 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).

| | | HL | l8s | Non-HUBs |
|--------|---|--|---|--|
| item # | Subcontracting Opportunity Description | Percentage of the contract expected to be sobcontracted to HUBs with which you do not have a continuous contract ¹ in place for more than five (5) years. | Percentage of the contract expected to be subcontracted to HUBs with which you have a continuous contract [®] in place for more than five (5) years- | Percentage of the contract expected to be subcontracted to non-HUBs. |
| 1 | 15.1.1 Right of Way Surveys | 15 % | % | % |
| 2 | 15.2.1 Design Survey | 5% | % | 5% |
| 3 | 15.3.1 Aerial Photogrammetry | 2 % | % | % |
| 4 | 15.3.2 Terrestrial Photogrammetry | 3 % | % | 6% |
| 5 | 15.3.3 Terrestrial LiDAR | 5 | 5 | 5% |
| 6 | 15.3.4 Mobile and Airborne LiDAR | 2.5% | 5 | 2.5% |
| 7 | 15.3.5 Horizontal and Vertical Control | 3% | 5 | % |
| 8 | 15.5.1 State Land Surveying | * | % | 1% |
| 9 | | * | % | % |
| 10 | | * | % | % |
| 11 | | % | % | % |
| 12 | | * | % | % |
| 13 | | * | % | % |
| 14 | | 5 | % | % |
| 15 | | \$ | 5 | * |
| | Aggregate percentages of the contract expected to be subcontracted: | 30.5 % | % | 19.5% |

(Note: If you have more than fifteen subcontracting opportunities, a continuation sheet is available online at https://www.comptroller.texes.gov/purchasing/vendpr/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 subcontracting opportunities you listed.)
- No (If No, continue to Item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with <u>Texas certified HUBs</u> with mich you <u>do not</u> have a <u>continuous contract</u> in place with for <u>more than five (S) years</u>, <u>meets or exceeds</u> the HUB goal the contracting agency identified in page in the <u>Texans peedeal Instructions(Additional Requirements</u>.⁴

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.)

<u>Continuous Context</u>: Any solitoping written agreement (including any reveales) that an exercited) between a prime contextors and pool. The threadwark when the HUB evolution of the private the prime contextors of the pools of a write is used the time contextor for a pool point of the time point contexts that run econoursetly or overlap one another for different periods of time are contablered by CPA to be individual contexts rule pools merveal or extensions to the original context. In such adattors the prime contexts for HUB vendor are entering (have entered) into "rew" contexts. Enter your company's name here: ENGINEERING SOLUTIONS, LLC

Requisition #: 601CT0000009999

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

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

- No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If No, continue to SECTION 3 and SECTION 4.)
- b. List all the portions of work (subcontracting opportunities) you will subcontract. Also, based on the total value of the contract, identify the percentages of the contract you expect to award to Texas certified HUBs, and the percentage of the contract you expect to award to vendors that are not a Texas certified HUB (i.e., Non-HUB).

| | | HU | Bs | Non-HUBs |
|--------|--|--|--|--|
| ltem # | Subcontracting Opportunity Description | Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract ¹ in place for more than five (5) years- | Percentage of the contract expected to be subcontracted to HUBs with which you have a <u>continuous contract</u> [®] in place for more than five (5) years- | Percentage of the contract expected to be subcontracted to non-HUBs. |
| 1 | 15.1.1 Right of Way Surveys | 15 % | % | % |
| 2 | 15.2.1 Design Survey | 5% | % | 5% |

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)^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 box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with <u>Texas certified HUBs</u> with which you <u>do not</u> have a <u>continuous</u> contractⁱ 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 1 in the 'Agency Special Instructions/Additional Requirements.¹

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.)

Original

Revised

| | | HU | Bs | Non-HUBs | | | HU | lBs | Non-HUBs |
|--------|---|--|--|--|--------|---|---|--|--|
| ltem # | Subcontracting Opportunity Description | Percentage of the contract expected to be subcontracted to HUBs with which you <u>do not</u> have a <u>continuous contract</u> ⁴ in place for <u>more than five (5) years</u> . | Percentage of the contract expected to be subcontracted to HUBs with which you have a <u>continuous contract</u> ⁺ in place for <u>more than five (5) years</u> . | Percentage of the contract expected to be subcontracted to non-HUBs. | Item i | | Percentage of the contract expected to be subcontracted to HUBs with which you <u>do not</u> have a c <u>ontinuous contract</u> [*] in place for <u>more than five (5) years</u> . | Percentage of the contract expected to be subcontracted to HUBs with which you have a <u>continuous contract</u> [*] in place for <u>more than five (5) years</u> . | Percentage of the contract expected to be subcontracted to non-HUBs. |
| 1 | 15.1.1 Right of Way Surveys | 15 % | % | % | 1 | 15.1.1 Right of Way Surveys | 15 % | % | % |
| 2 | 15.2.1 Design Survey | 5 % | % | 5% | 2 | 15.2.1 Design Survey | 5 % | % | 5% |
| 3 | 15.3.1 Aerial Photogrammetry | 10 % | % | % | 3 | 15.3.1 Aerial Photogrammetry | 2 % | % | % |
| 4 | 15.3.2 Terrestrial Photogrammetry | 6 % | % | 6% | 4 | 15.3.2 Terrestrial Photogrammetry | 3 % | % | 6% |
| 5 | 15.3.3 Terrestrial LiDAR | % | % | 5% | 5 | 15.3.3 Terrestrial LiDAR | % | % | 5% |
| 6 | 15.3.4 Mobile and Airborne LiDAR | 2.5 % | % | 2.5% | 6 | 15.3.4 Mobile and Airborne LiDAR | 2.5 % | % | 2.5% |
| 7 | 15.3.5 Horizontal and Vertical Control | 3 % | % | % | 7 | 15.3.5 Horizontal and Vertical Control | 3 % | % | % |
| 8 | 15.5.1 State Land Surveying | % | % | 1% | 8 | 15.5.1 State Land Surveying | % | % | 1% |
| 9 | | % | % | % | 9 | | % | % | % |
| 10 | | % | % | % | 10 | | % | % | % |
| 11 | | % | % | % | 11 | | % | % | % |
| 12 | | % | % | % | 12 | | % | % | % |
| 13 | | % | % | % | 13 | | % | % | % |
| 14 | | % | % | % | 14 | | % | % | % |
| 15 | | 04 | % | % | 15 | | % | % | % |
| < | Aggregate percentages of the contract expected to be subcontracted: | 41.5 % | % | 19.5% | | Aggregate percentages of the contract expected to be subcontracted: | 30.5 % | % | 19.5 % |
| | | • | | | | | · | • | |

Enter your company's name here: ENGINEERING SOLUTIONS, LLC

EECTION 3: SELF PERFORMING JUSTIFICATION of you responded "No' to SECTION 2, tem a, you must complete the SECTION and continue to SECTION 4, if you responded "No' to SECTION 2, item 3, in the space provided below explain how your company will perform the entire contract with its can employees, supplies, materials and/or explored.

Requisition #: 601CT000009999

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 <u>awarded any portion of the requisition</u>:

- 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 Inters: New complete lease source) have a submit of the subcontractors (HUBs and Non-HUBs).
- The responsent must seek approal from the contracting agency prior to making any modifications to its HSP, including the hinge of additions of the destination of the desti
- 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 starting and other resources.

| John M. Des | JOHN M. DOE | President | 5/30/2023 |
|-------------|--------------|-----------|-----------|
| 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.

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, <u>if awarded any portion of the requisition:</u>

- The respondent will provide notice as soon as practical to all the subcontractors (HUSS and Non-HUS) of their selection as a subcontractor for the avanted contract. The notice must specify at a minimum the contracting agency's name and is point of contract for the contract, the contract and number, the subcontracting opportunity mey (the subcontractory) will perform, the approximate dollar value of the subcontracting opportunity and the expected percentage the subcontract that the subcontracting opportunity represents. A copy of the notice required by this section must also be provided to the contract or guide the number of using days and the contract.
- 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.complete/teas.out/contractanidocs/mb-forms/SporsesSassment/Report/form.its).
- The respondent must seek approval from the contracting agency prior to making any modifications to its HSP, including the thing of additional or different subcontractors and he terminisation of a subcontractor the respondent including in Its HSP is modified without the contracting agency 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 contraction.
- The respondent must, upon request, allow the contracting agency to perform on-site reviews of the company's headquarters and/or work-site reprice are being performed and must provide documentation regarding staffing and other resources.

| Joke M. Des | JOHN M. DOE |
|-------------|--------------|
| Signature | Printed Name |

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 issed in SECTION 2, Item b.

President

Title

5/30/2023

Date

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)

Enter your company's name here: ENGINEERING SOLUTIONS, LLC

Requisition #: 601CT0000009999

Rev. 2/17

IMPORTANT: If you responded "Yes' to SECTION 2, Items c or d of the completed HSP form, you must submit a completed HSP Good Failth Ethot -Method A (Attachment A)" for sage of the subcontracting opportunities you listed in SECTION 2, Item 16 of the completed HSP form. You may photo-copy this page or download the form at <u>https://www.completel.ethod.org/output/catigndoc.org/output/catigndoc.org</u>).

SECTION A-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: 1 Description: 15.1.1 Right of Way Surveys

SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontraction(s) you selected to perform the subcontracting apportunity you issing above in SECTION A-1. Also iselfly whether they are a Taxas certified HUB and their Taxas Vendor Identification (VID) Number or Iederal Employer Identification Number (EIN), the approximate dollar value of text to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUB sand verifying their HUB status, ensure that use the State of Texas' Centralized Master Bidders List (CMRU) - Historically Undentified Business (HUB) Directory Search located at http://mccore.com.text.ensureMaster Bidders List (CMRU) - Historically Undentified Business (HUB) Directory Search located at http://mccore.com.text.enst.enst.endfeb HUB.

| Company Name | Texas cert | Ified 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 |
|---------------------------|------------|-----------|--|------------------------------|---------------------------------------|
| THE LAND SURVEYORS, INC. | 🖓 - Yes | - No | 171717170000 | \$ \$100,000.00 | 5% |
| Roadway Engineering, Inc. | 🛛 - Yes | - No | 121212121200 | \$ \$40,000.00 | 2 % |
| ABC Engineering, LLC | - Yes | 🖓 - No | 123451234500 | \$ 160,000.00 | 8% |
| | - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | * |
| | 🗆 - Yes | - No | | \$ | * |
| | 🗌 - Yes | - No | | \$ | * |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yee | - No | | \$ | 8 |
| | 🗌 - Yee | - No | | \$ | * |
| | 🗆 - Yee | D- No | | \$ | * |
| | 🗌 - Yes | D- No | | \$ | * |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | * |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | 8 |
| | - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | 8 |
| | 🗆 - Yes | - No | | \$ | * |

REMINDER: As species in SECTON 4 of the completed HSP tem, <u>is you inspondent</u>) are available and <u>production</u> of the required to provide notice as to an aproxicial voig it is exonantosic, highlings and Nac-HSI of the relations as a functionation. The notice material special at a minimum the contracting agency's name and tapolet of contact: the two contact, the contract award number, the subconstancing opportunity represents. A cory of the outpact of the subconstance in types approximation and the special provided to the contract of the subconstancing opportunity represents. A cory of the notice required by this section must also be provided to the contract ding agency's point of contact for the contract of <u>number</u>.

Page 1 of 1 (Attachment A)

SECTION A-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: 1 Description: 15.1.1 Right of Way Surveys

SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at http://www.centralized.ce.totale.com/anal.ec.total

| Company Name | Texas cert | Ified 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 |
|---------------------------|------------|-----------|--|------------------------------|---------------------------------------|
| THE LAND SURVEYORS, INC. | 🗸 - Yes | - No | 171717170000 | \$ \$100,000.00 | 5% |
| Roadway Engineering, Inc. | 🛛 - Yes | 🗆 - No | 121212121200 | \$ \$40,000.00 | 2 % |
| ABC Engineering, LLC | - Yes | 🗸 - No | 123451234500 | \$ 160,000.00 | 8 % |
| | I Voo | | | t | ٩ |

Original

SECTION A-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: 1 Description: 15.1.1 Right of Way Surveys

SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at http://mcca.ga.state.tx.usfbasscribbesarch/index.ips. HUB status code "A" signifies that the company is a Texas certified HUB.

| Company Name | Texas certified HUB | Texas VID or federal EIN Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank. | Approximate Dollar Amount | Expected Percentage of Contract |
|---------------------------|---------------------|--|------------------------------|---------------------------------------|
| The Land Surveyors, Inc. | 🛛 - Yes 🛛 - No | 1742273292900 | \$ \$100,000.00 | 5 % |
| Roadway Engineering, Inc. | 🗹 - Yes 🛛 🗌 - No | 1261212981200 | \$ \$200,000.00 | 10 % |

Revised

SECTION A-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: 1 Description: 15.1.1 Right of Way Surveys

SECTION A-2: SUBCONTRACTOR SELECTION

List the subcontractor(s) you selected to perform the subcontracting opportunity you listed above in SECTION A-1. Also identify whether they are a Texas certified HUB and their Texas Vendor Identification (VID) Number or federal Employer Identification Number (EIN), the approximate dollar value of the work to be subcontracted, and the expected percentage of work to be subcontracted. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMEU) - historically Underutilized Business (HUB) Directory Search located at http://myca.ce.state.tx.us/tpasscmblsearch/index.ip. HUB status code "A" signifies that the company is a Texas certified HUB.

| Company Name | Texas certified HUB | Texas VID or federal EIN Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank. | Approximate Dollar Amount | Expected Percentage of Contract |
|---------------------------|---------------------|--|------------------------------|---------------------------------------|
| THE LAND SURVEYORS, INC. | 🛛 - Yes 🛛 - No | 171717170000 | \$ \$100,000.00 | 5 % |
| Roadway Engineering, Inc. | 🗹 - Yes 🛛 - No | 121212121200 | \$ \$40,000.00 | 2 % |
| ABC Engineering, LLC | 🗖 - Yes 🛛 🖉 - No | 123451234500 | \$160,000.00 | 8 % |
| | | | | |

Required Documents - Form 2580

| Tean Disarcent at Tungardalan | HUB Subcontrac Change Rec | | | Form 2680 (Rev. 08/20) Page 1 of 1 |
|---|---|--|---|--|
| Contractor Name: Engineering Solution | ns, LLC | Contract Number: | | |
| ection I (to be completed by prime of | ontractor) | | | |
| Complete if requesting approval to make | any changes in subcont | acting opportunities and/or | subcontractors. | |
| at any time during the term of the contr roposed changes must be received in w the contract. The prime contractor must of hange request in order to substitute/ado riginal HSP. | writing for prior review and comply with provisions of | approval by TxDOT before the contract relating to dev | the changes will be eloping and submitti | e effective under ing a HSP |
| When initiating a change to an HSP, the ubmitting a revised HSP. | prime contractor is requi | red to meet the good faith e | ffort provisions of th | e HSP by |
| n the space below, please provide a det why the change is being made. (Attach a he requirements of the HSP when makir | revised HSP that shows | | | |
| Explanation for any item marked "No". | | | | |
| | | | | |
| | | • | | |
| Prime Contractor Representative Nan | | _ | Date | Contact/Help |
| | ne Signa | _ | | Contact/Help |
| Prime Contractor Representative Nan lection II (to be completed by TxDOT) have reviewed and approved the prime | ne Signa | E | Submit by E-mail | |
| ection II (to be completed by TxDOT) | ne Signa | E | Submit by E-mail | |
| ection II (to be completed by TxDOT) have reviewed and approved the prime | ne Signa | E | Submit by E-mail | |
| ection II (to be completed by TxDOT) have reviewed and approved the prime | ne Signa | E | Submit by E-mail | |
| ection II (to be completed by TxDOT) have reviewed and approved the prime | ne Signa | E | iubmit by E-mail | |
| lection II (to be completed by TxDOT) have reviewed and approved the prime Comments | ne Signa contractor's explanation | of changes and revised HS | Submit by E-mail P based on the HSF | ² requirements. |

When initiating a change to an HSP, the prime contractor is required to meet the good faith effort provisions of the HSP by submitting a revised HSP.

In the space below, please provide a detailed explanation indicating the change that will be made to the HSP, and why the change is being made. (Attach a revised HSP that shows the prime contractor made a good faith effort to meet the requirements of the HSP when making a change.)

Explanation for any item marked "No".

Required Documents - Form 2580

| There are a second and a second are a second | HUB Subcontracting Pla Change Request Fo | | Form 2580 (Rev. 09/20) Page 1 of 1 |
|--|--|--|--|
| Contractor Name: Engineering Solutions, | , LLC Contrac | t Number: 36-xIDPxxxx | |
| Section I (to be completed by prime cont | tractor) | | |
| Complete if requesting approval to make ar | ny changes in subcontracting opp | ortunities and/or subcontractors. | |
| If at any time during the term of the contract proposed changes must be received in writ the contract. The prime contractor must cor change request in order to substitute/add a original HSP. | ting for prior review and approval mply with provisions of the contra | by TxDOT before the changes wi ct relating to developing and subr | I be effective under mitting a HSP |
| When initiating a change to an HSP, the pri submitting a revised HSP. | ime contractor is required to mee | t the good faith effort provisions o | f the HSP by |
| In the space below, please provide a detail why the change is being made. (Attach a re the requirements of the HSP when making | evised HSP that shows the prime | | |
| Explanation for any item marked "No". | | | |
| Additionally, this supplement changes the and sanitary design and coordination, and coordination effort. The scope changes inc additional reduction in overall HUB particip | extension of time with an end da crease project duration and assoc | te at Jan/2025 requiring additiona iated management and coordinat | I management and |
| Prime Contractor Representative Name | Signature | Da | ie |
| Section II (to be completed by TxDOT) I have reviewed and approved the prime co Comments | ontractor's explanation of change | s and revised HSP based on the H | HSP requirements. |
| | | | |
| District/Division Representative | Signature | - Date | |

Engineering Solutions, LLC requests to reduce the total HUB percentage from 41.5% to 30.5%. The scope of the project has been changed, reducing the responsibilities of some of the Team HUB firms, The ABC Engineering, LLC has billed \$9,513.22 in fees as an active HUB but the remaining contract amount of \$19,648.30 will be billed after the HUB has been lost. Additionally, this supplement changes the scope to include additional railroad agreement and coordination, City of Texas water and sanitary design and coordination, and extension of time with an end date at Jan/2025 requiring additional management and coordination effort. The scope changes increase project duration and associated management and coordination efforts causing additional reduction in overall HUB participation. The new commitment goal = 30.5%

| Section II (to be completed by TxDC | <u>(TC</u> | | |
|-------------------------------------|--------------------------------|----------------------------|-------------------------------|
| have reviewed and approved the prin | ne contractor's explanation of | changes and revised HSP ba | ased on the HSP requirements. |
| Comments | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| District/Division Representative | Signature | Date | |
| District/Division Representative | | Date | Submit by E-mail |
| District/Division Representative | | Date | Submit by E-mail |

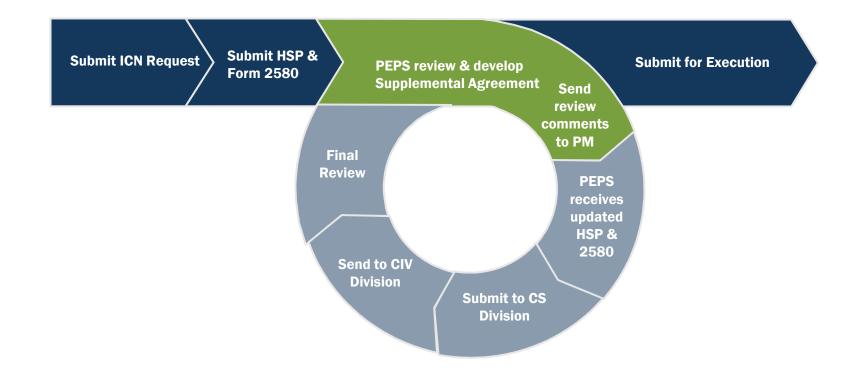
Required Documents - Supplemental Agreement (SA)

| | STATE OF TEXAS 6 Contract No |
|---|--|
| | STATE OF TEXAS § COUNTY OF TRAVIS § |
| | CONTRACT FOR ENGINEERING SERVICES |
| | SUPPLEMENTAL AGREEMENT NO |
| | THIS SUPPLEMENTAL AGREEMENT to contract for engineering services is made by and between the State of Texas acting by and through the Texas Department of Transportation, (the State), and (the Engineer), and becomes effective when fully executed by both parties. |
| | BACKGROUND |
| | The State and the Engineer executed a contract on concerning |
| | AGREEMENT |
| | The State and the Engineer agree that the contract is amended as follows: |
| | Attachment(Name of document) is deleted in its entirety and replaced with Attachment, which is attached to this supplemental agreement. |
| | Attachment (Name of document) is amended by adding Attachment, which is attached to this supplemental agreement. |
| | III. Exhibit H-1 is deleted in its entirety and is replaced with a new Exhibit H-1. |
| | IV. The maximum amount payable under this contract is increased by \$, from \$to |
| | \$ The increase in the maximum amount payable is for the purpose of funding the following additional work: |
| | V. The termination date is extended from to |
| | All other provisions are unchanged and remain in full force and effect. |
| I | Each party is signing this Supplemental Agreement on the date stated under that party's signature. |
| | THE ENGINEER THE STATE OF TEXAS |
| | (Signature) (Signature) |
| | (Printed Name) (Printed Name) |
| | (Title) (Title) |
| | (Date) (Date) |

2023 PEPS Conference

December 5, 2023 15

Process



Questions and Discussion

HEAD End The Streak of daily deaths on Texas roadways.

TxDOT.gov (Keyword: #EndTheStreakTX)

#EndTheStreakTX Toolkit

0





Kimlinh Nguyen, P.E.

PEPS Houston Service Center Director

Kimlinh.Nguyen@txdot.gov

(713)802-5799

Angelina Adame

Contract Specialist



Angelina.Adame@txdot.gov

(713)-802-5287