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WOOD COUNTY AIRPORT-COLLINS FIELD
TxDOT SOLICITATION No.: RFQ-24ALMNOLA-00026

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Texas Department of Transportation
Aviation Division
Request for Qualifications (RFQ) for Professional Services

The Wood County, through its agent, the Texas Department of Transportation (TxDOT), intends to engage a qualified firm for professional services. This solicitation is subject to 49 U.S.C. §47107(a)(17) and will be administered in the same manner as a solicitation conducted under Chapter 2254, Subchapter A, of the Texas Government Code. TxDOT Aviation Division will solicit and receive qualification statements for professional services as described below:

Airport Sponsor: Wood County, Wood County Airport-Collins Field, TxDOT CSJ/Project No.: 24ALMNOLA. The TxDOT Project Manager is David Kirkpatrick.

Scope: Airport Layout Plan (ALP) with narrative.

1. Prepare an ALP with Narrative consistent with the most current FAA Advisory Circulars and Standard Operating Procedures;
2. Incorporate FAA AGIS requirements and data collection as needed, including an -18B obstruction survey, and upload data to the FAA's Airport Data and Information Portal.
3. Develop a Capital Improvement Plan, including a recommended phasing plan and financial overview that considers local, state, federal, and alternative funding sources;
4. Prepare/update the airport property map (Exhibit A) consistent with the most current FAA Advisory Circulars and Standard Operating Procedures;
5. Establish phased, attainable goals for airport improvements and development based on a forecast for aviation demand and current and future critical aircraft; and
6. Develop and adopt into local zoning airport height hazard protection and airport land use compatibility measures, including associated maps, to ensure the protection of the public investment in the airport; and
7. Per FAA SOP 8.00, review any existing RSA determinations and update as needed or complete a determination for any runway that does not have one. If an RSA study is needed, that study will be conducted as part of this planning effort. A list of follow-on projects or studies will be a deliverable of this task.

Subcontracting opportunities are not probable. Therefore, respondents are not required to submit an up to date “*HUB Subcontracting Plan (HSP)*” with their qualifications at the time of submission.

If during the term of the contract subcontractors are used in the delivery of services, the contractor will be required to complete a HSP to verify their intent to subcontract and show their good faith effort to contract with HUBs. In addition, the contractor will be required to submit monthly, a “*Prime Contractor Progress Assessment Report*” and “*HUB Subcontracting Plan (HSP) Progress Compliance Form - 2579*”, through the eGrants system.

A voluntary pre-submittal meeting is scheduled from **10:00 am – 12:00 Noon on November 15, 2023**, at Wood County Airport-Collins Field or Wood County, 311 County Road 2355, Mineola, Texas 75773. There will be an opportunity for interested firms to ask questions followed by an airport site visit.

To assist in your qualification statement preparation the criteria and most recent Airport Layout Plan are available online at <http://www.dot.state.tx.us/avn/avninfo/notice/consult/index.htm> by selecting “Wood County Airport-Collins Field.”

AVN-551 Preparation Instructions:

Interested firms shall utilize the latest version of Form AVN-551, titled “Qualifications for Aviation Planning Services”. The form may be requested from TxDOT, Aviation Division, 6230 E. Stassney Lane, Austin, Texas 78744, phone number, (800) 68-PILOT (74568). The form may be emailed by request or downloaded from the TxDOT website at <http://www.txdot.gov/inside-txdot/division/aviation/projects.htm>. The form may not be altered in any way and must not contain Quick Response (QR) codes or links. The form fields must be completed in black font, without changing the existing font size or color, and must not contain any bold or italicized words. If a firm is non-compliant, the submittal of AVN-551 will be deemed as non-responsive. Firms must carefully follow the instructions provided on each page of the form. Qualifications shall not exceed the number of pages in the AVN-551 template. The AVN-551 consists of eight pages of data plus one optional illustration page. A prime provider may only submit one AVN-551. If a prime provider submits more than one AVN-551 or submits a cover letter with the AVN-551, that provider will be disqualified. Responses to this solicitation WILL NOT BE ACCEPTED IN ANY OTHER FORMAT.

ATTENTION: To ensure utilization of the latest version of Form AVN-551, firms are encouraged to download Form AVN-551 from the TxDOT website as addressed above. Utilization of Form AVN-551 from a previous download may not be the exact same format. Form AVN-551 is a PDF Template.

The Form AVN-551 must be completed accurately to include the correct Airport Name and TxDOT Project ID number. The completed Form AVN-551 must be received in the TxDOT Aviation eGrants system no later than **November 30, 2023, 2:00 p.m. (CDST)**. Electronic facsimiles or forms sent by email or regular/overnight mail will not be accepted.

Firms that wish to submit a response to this solicitation must be a user in the TxDOT Aviation eGrants system no later than one business day before the solicitation due date. To request access to eGrants, please complete the Contact Us web form located at <http://txdot.gov/government/funding/egrants-2016/aviation.html>

An instructional video on how to respond to a solicitation in eGrants is available at <http://txdot.gov/government/funding/egrants-2016/aviation.html>

Step by step instructions on how to respond to a solicitation in eGrants will also be posted in the RFQ packet at <http://www.dot.state.tx.us/avn/avninfo/notice/consult/index.html>

The consultant selection committee will be composed of local government representatives. The final selection by the committee will generally be made following the completion of review of AVN-551s. The committee will review all AVN-551s and rate and rank each. The evaluation criteria for airport planning projects can be found at <http://www.txdot.gov/inside-txdot/division/aviation/projects.html> under Information for Consultants. All firms will be notified, and the top-rated firm will be contacted to begin fee negotiations. The selection committee does, however, reserve the right to conduct interviews for the top-rated firms if the committee deems it necessary. If interviews are conducted, selection will be made following interviews.

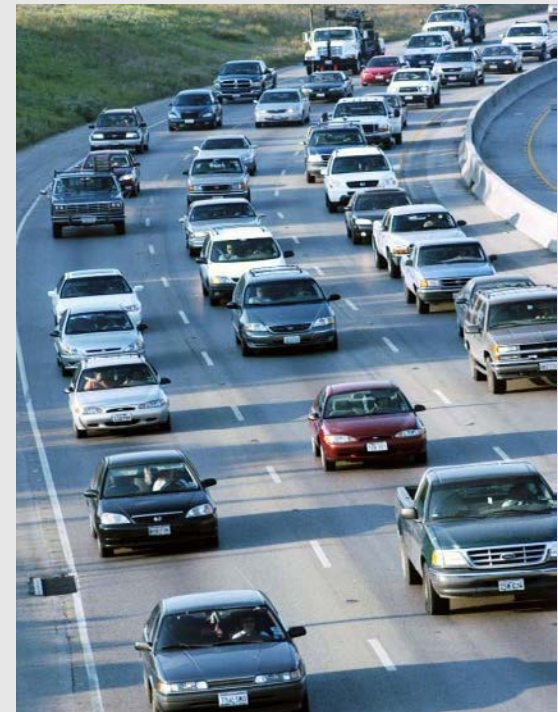
Please contact TxDOT Aviation for any technical or procedural questions at (800)68-PILOT (74568). For procedural questions, please contact Noemi Rios, Contract Specialist at 512-506-5947. For technical questions please contact David Kirkpatrick, Project Manager.

For questions regarding responding to this solicitation in eGrants, please contact the TxDOT Aviation help desk at (800)687-4568 or avn-egrantshelp@txdot.gov



HISTORICALLY UNDERUTILIZED BUSINESS (HUB) SUBCONTRACTING PLAN (HSP) COMPLETION

TxDOT HUB Program



HSP Completion: Method A - Using only HUBs

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

- Section 1 – Respondent and Requisition Information (Page 1);
- Section 2a – Yes, I will be subcontracting portions of the contract (Page 2);
- 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 (Page 2 and the continuation sheet as needed);
- Section 2c – Yes, I will be using only Texas certified HUBs to perform **all** of the subcontracting opportunities listed (Page 2);
- Section 4 – Affirmation that all information and supporting documentation submitted is true and correct (Page 3); and
- HSP GFE Method A (Attachment A) – Complete this attachment for each subcontracting opportunity listed in Section 2b (Page 1 of 1).

HSP Completion: Method A - Using only HUBs



HUB Subcontracting Plan (HSP) Rev. 2017

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)(ii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent **does not** have a **continuous contract**¹ 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 14 RESPONDENT AND REQUISITION INFORMATION

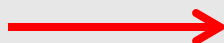
a. Respondent (Company) Name: _____ State of Texas VID #: _____
Point of Contact: _____ Phone #: _____
E-mail Address: _____ Fax #: _____

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

c. Requisition #: _____ Bid Open Date: _____
(mm/dd/yyyy)

Section 1: Respondent and Requisition Information

Complete all information requested.



Page 2

Enter your Company's name and the requisition #.
(Enter this information on each subsequent page.)

Section 2: Respondents Subcontracting Intentions

2a: ✓ Yes, I will be subcontracting portions of the contract.

2b: List all the portions of work you will be subcontracting to HUBs and the % of the contract you expect to award. (Aggregate percentage should not total 100%)

2c: ✓ Yes, if you will only be using HUBs to perform ALL subcontracting opportunities in 2a.

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

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including contracted staffing, goods and services will be subcontracted. Note: In accordance with 34 TAC §20.282, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

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

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

- No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If No, continue to SECTION 3 and SECTION 4.)

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

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract* in place for more than five (5) years.	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		%	%	%
2		%	%	%
3		%	%	%
4		%	%	%
5		%	%	%
6		%	%	%
7		%	%	%
8		%	%	%
9		%	%	%
10		%	%	%
11		%	%	%
12		%	%	%
13		%	%	%
14		%	%	%
15		%	%	%
Aggregate percentages of the contract expected to be subcontracted:		%	%	%

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

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

- No (If No, continue to Item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract* in place with for more than five (5) years, meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

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


*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

Move on to page 3, Section 4

HSP Completion: Method A - Using only HUBs

Page 3

Section 4: Affirmation

Read, sign and date to affirm the information you provided is true and correct. 

Move on to “HSP Good Faith Effort – Method A (Attachment A)”

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

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

SECTION 4: AFFIRMATION

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

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

Signature	Printed Name	Title	Date <small>(mm/dd/yyyy)</small>
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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.

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HSP Completion: Method A - Using only HUBs

HSP Good Faith Effort – Method A (Attachment A)
Complete this form for each subcontracting opportunity listed in Section 2(b) of the HSP.

Section A-1

List the information requested for the subcontracting opportunity.

Section A-2

Provide all information requested.

HSP Good Faith Effort - Method A (Attachment A)

Rev. 2/17

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

IMPORTANT: If you responded "Yes" to SECTION 2, Items c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed in SECTION 2, item b of the completed HSP form. You may photo-copy this page or download the form at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcourt-plan-qfe-achm-a.pdf>

SECTION A-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: _____ Description: _____

SECTION A-2: SUBCONTRACTOR SELECTION

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

Company Name	Texas certified HUB	Texas VID or federal EIN <small>Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank.</small>	Approximate Dollar Amount	Expected Percentage of Contract
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
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	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> 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 Completion: Method A – Meeting TxDOT’s HUB Goal

If you are subcontracting with HUBs and Non-HUBs, and you meet or exceed the aggregate percentage (HUB Goal) of subcontracting with HUBs in which you do not have a continuous contract in place for more than five (5) years, complete the following:


- Section 1 – Respondent and Requisition Information (Page 1);
- Section 2a – Yes, I will be subcontracting portions of the contract (Page 2);
- 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 (Page 2 and the continuation sheet as needed);
- Section 2c – No, I will not be using only Texas certified HUBs to perform **all** of the subcontracting opportunities listed (Page 2);
- Section 2d – Yes, the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs, which you have do NOT have a continuous contract in place for five (5) years or more, meets or exceeds the HUB goal in the solicitation (Page 2)
- Section 4 – Affirmation that all information and supporting documentation submitted is true and correct (Page 3); and
- HSP GFE Method A (Attachment A) – Complete this attachment for each subcontracting opportunity listed in 2b (Page 1 of 1).

HSP Completion: Method A – Meeting TxDOT’s HUB Goal

Section 1: Respondent and Requisition Information

Complete all information requested. 

Rev. 2/17



HUB Subcontracting Plan (HSP)

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)(ii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent **does not** have a **continuous contract**¹ 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

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)

1

HSP Completion: Method A – Meeting TxDOT’s HUB Goal

Page 2

Enter your Company’s name and the requisition #.
(Enter this information on each subsequent page.)

Section 2: Respondent Subcontracting Intentions

2a: ✓ Yes, I will be subcontracting portions of the contract.

2b: List all the portions of work you will be subcontracting to HUBs and the Non-HUBs % of the contract you expect to award.

NOTE: Must meet or exceed HUB goal using HUBs with which you do not have a continuous contract in place for more than five (5) years.

2c: ✓ No, to indicate you will NOT be only using HUBs.

2d: ✓ Yes, indicating you do NOT have a continuous contract in place for 5 or more years

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

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including contracted staffing, goods and services will be subcontracted. Note: In accordance with 34 TAC §20.282, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

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

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

- No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If No, continue to SECTION 3 and SECTION 4.)

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

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you <u>do not</u> 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 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		%	%	%
2		%	%	%
3		%	%	%
4		%	%	%
5		%	%	%
6		%	%	%
7		%	%	%
8		%	%	%
9		%	%	%
10		%	%	%
11		%	%	%
12		%	%	%
13		%	%	%
14		%	%	%
15		%	%	%
Aggregate percentages of the contract expected to be subcontracted:		%	%	%

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

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

- No (If No, continue to Item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract in place with for more than five (5) years, meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

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

"Continuous Contract": Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

2

HSP Completion: Method A – Meeting TxDOT’s HUB Goal

Section 4: Affirmation

Read, sign and date to affirm the information you provided is true and correct.

Move on to “HSP Good Faith Effort – Method A (Attachment A)”

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

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

SECTION 4: AFFIRMATION

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

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

Signature	Printed Name	Title	Date <small>(mm/dd/yyyy)</small>
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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.

3

HSP Completion: Method A – Meeting TxDOT’s HUB Goal

HSP Good Faith Effort – Method A (Attachment A)

Complete this form for each subcontracting opportunity listed in Section 2(b) of the HSP.

Section A-1

List the information requested for the subcontracting opportunity.

Section A-2

Provide all information requested.

HSP Good Faith Effort - Method A (Attachment A)

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

IMPORTANT: If you responded "Yes" to SECTION 2, Items c or d of the completed HSP form, you must submit a completed "HSP Good Faith Effort - Method A (Attachment A)" for **each** of the subcontracting opportunities you listed in SECTION 2, item b of the completed HSP form. You may photo-copy this page or download the form at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-sbcont-plan-qfe-achm-a.pdf>

SECTION A-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: _____ Description: _____

SECTION A-2: SUBCONTRACTOR SELECTION

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

Company Name	Texas certified HUB	Texas VID or federal EIN <small>(do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank.)</small>	Approximate Dollar Amount	Expected Percentage of Contract
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
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	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	%
	<input type="checkbox"/> Yes <input type="checkbox"/> 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 Completion: Method B - by Solicitation/Notification

If you are subcontracting with HUBs and Non-HUBs, and you do not meet or exceed the aggregate percentage (HUB Goal) of subcontracting with HUBs, complete the following :

- Section 1 – Respondent and Requisition Information (Page 1);
- Section 2a – Yes, I will be subcontracting portions of the contract (Page 2);
- 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 (Page 2 and the continuation sheet as needed);
- Section 2c – No, I will not be using only Texas certified HUBs to perform **all** of the subcontracting opportunities listed (Page 2);
- Section 2d – No, the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs, which you have a continuous contract in place for five (5) years or less, does not meet or exceed the HUB goal in the solicitation (Page 2)
- Section 4 – Affirmation that all information and supporting documentation submitted is true and correct (Page 3); and,
- HSP GFE Method B (Attachment B) – Complete this attachment for each subcontracting opportunity (Page 1 of 1).

HSP Completion: Method B - by Solicitation/Notification

Page 1

Section 1: Respondent and Requisition Information
Complete all information requested.



HUB Subcontracting Plan (HSP) Rev. 2/17

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)(ii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent **does not** have a **continuous contract**¹ 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

- 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)

HSP Completion: Method B - by Solicitation/Notification

Page 2

Enter your Company's name and the requisition #.
(Enter this information on each subsequent page.)

Section 2: Respondents Subcontracting Intentions

2a: ✓ Yes, I will be subcontracting portions of the contract.

2b: List all the portions of work you will be subcontracting to HUBs and Non-HUBs and the % of the contract you expect to award.

2c: ✓ No, to indicate you will NOT be only using HUBs.

2d: ✓ No, indicating you do have a continuous contract in place for 5 or more years

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

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including contracted staffing, goods and services will be subcontracted. Note: In accordance with 34 TAC §20.282, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

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

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

- No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If No, continue to SECTION 3 and SECTION 4.)

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

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you do not have a continuous contract* in place for more than five (5) years.	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		%	%	%
2		%	%	%
3		%	%	%
4		%	%	%
5		%	%	%
6		%	%	%
7		%	%	%
8		%	%	%
9		%	%	%
10		%	%	%
11		%	%	%
12		%	%	%
13		%	%	%
14		%	%	%
15		%	%	%
Aggregate percentages of the contract expected to be subcontracted:		%	%	%

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

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

- No (If No, continue to Item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract* in place with for more than five (5) years, meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

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

*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

HSP Completion: Method B - by Solicitation/Notification

Affirmation
Page 3, Section 4

Read, sign and date to affirm the information
you provided is true and correct.

Move on to “HSP Good Faith Effort – Method B
(Attachment B)”

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

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

SECTION 4: AFFIRMATION

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

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

Signature	Printed Name	Title	Date (mm/dd/yyyy)
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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.

3

HSP Completion: Method B - by Solicitation/Notification

HSP Good Faith Effort – Method B (Attachment B),
Page 1 of 2

Complete this form for each subcontracting opportunity listed in Section 2(b) of the HSP.

Section B-1: Subcontracting Opportunity
Complete the information requested.

Section B-2 : Mentor Protégé Program
If you are using your HUB Protégé, mark Yes and continue to Section B-4. *HSP Good Faith Effort – Method B (Attachment B), Page 2 of 2* **IF YOU MARK NO, CONTINUE TO SECTION B-3 and SECTION B-4**

HSP Good Faith Effort - Method B (Attachment B)
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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 <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-shoot-plan-ofc-achm-b.pdf>.

SECTION B-1: SUBCONTRACTING OPPORTUNITY
Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

Item Number: _____ Description: _____

SECTION B-2: MENTOR PROTÉGÉ PROGRAM
If respondent is participating as a Mentor in a State of Texas Mentor Protégé Program, submitting its Protégé (Protégé must be a State of Texas certified HUB) as a subcontractor to perform the subcontracting opportunity listed in SECTION B-1, constitutes a good faith effort to subcontract with a Texas certified HUB towards that specific portion of work.

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

- Yes (If Yes, continue to SECTION B-4.)
 - No / Not Applicable (If No or Not Applicable, continue to SECTION B-3 and SECTION B-4.)

SECTION B-3: NOTIFICATION OF SUBCONTRACTING OPPORTUNITY
When completing this section you **MUST** comply with items **a, b, c and d**, thereby demonstrating your Good Faith Effort of having notified Texas certified HUBs and trade organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plans and specifications, bonding and insurance requirements, required qualifications, and identify a contact person. When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUB Subcontracting Opportunity Notice form, which is also available online at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/HUBSubcontractingOpportunityNotificationForm.pdf>.

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs and trade organizations or development centers. Also, be mindful that a working day is considered a normal business day of a state agency, not including weekends, federal or state holidays, or days the agency is declared closed by its executive officer. The initial day the subcontracting opportunity notice is sent/provided to the HUBs and to the trade organizations or development centers is considered to be "day zero" and does not count as one of the seven (7) working days.

a. Provide written notification of the subcontracting opportunity you listed in SECTION B-1, to three (3) or more Texas certified HUBs. Unless the contracting agency specified a different time period, you must allow the HUBs at **least seven (7) working days** to respond to the notice prior to your submitting your bid response to the contracting agency. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://mycpa.cpa.state.tx.us/txasscmblsearch/index.jsp>. HUB status code "A" signifies that the company is a Texas certified HUB.

b. List the **three (3) Texas certified HUBs** you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the company's Texas Vendor Identification (VID) Number, the date you sent notice to that company, and indicate whether it was responsive or non-responsive to your subcontracting opportunity notice.

Company Name	Texas VID <small>(Do not enter Social Security Numbers.)</small>	Date Notice Sent <small>(mm/dd/yyyy)</small>	Did the HUB Respond? <input type="checkbox"/> - Yes <input type="checkbox"/> - No <input type="checkbox"/> - Yes <input type="checkbox"/> - No <input type="checkbox"/> - Yes <input type="checkbox"/> - No

c. Provide written notification of the subcontracting opportunity you listed in SECTION B-1 to **two (2)** or more trade organizations or development centers in Texas to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting opportunity notice to trade organizations or development centers at **least seven (7) working days** prior to submitting your bid response to the contracting agency. A list of trade organizations and development centers that have expressed an interest in receiving notices of subcontracting opportunities is available on the Statewide HUB Program's webpage at <https://www.comptroller.texas.gov/purchasing/vendorhub/resources.php>.

d. List **two (2) trade organizations or development centers** you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the date when you sent notice to it and indicate if it accepted or rejected your notice.

Trade Organizations or Development Centers	Date Notice Sent <small>(mm/dd/yyyy)</small>	Was the Notice Accepted? <input type="checkbox"/> - Yes <input type="checkbox"/> - No <input type="checkbox"/> - Yes <input type="checkbox"/> - No

Page 1 of 2
(Attachment B)

HSP Completion: Method B - by Solicitation/Notification

HSP Good Faith Effort - Method B (Attachment B)

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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 <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/hub-shoot-plan-ofe-achm-b.pdf>.

SECTION B-1: SUBCONTRACTING OPPORTUNITY

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

Item Number: _____ Description: _____

SECTION B-2: MENTOR PROTÉGÉ PROGRAM

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

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

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

- No / Not Applicable (If No or Not Applicable, continue to SECTION B-3 and SECTION B-4.)

SECTION B-3: NOTIFICATION OF SUBCONTRACTING OPPORTUNITY

When completing this section you **MUST** comply with items **a, b, c and d**, thereby demonstrating your Good Faith Effort of having notified Texas certified HUBs and trade organizations or development centers about the subcontracting opportunity you listed in SECTION B-1. Your notice should include the scope of work, information regarding the location to review plans and specifications, bonding and insurance requirements, required qualifications, and identify a contact person. When sending notice of your subcontracting opportunity, you are encouraged to use the attached HUB Subcontracting Opportunity Notice form, which is also available online at <https://www.comptroller.texas.gov/purchasing/docs/hub-forms/HUBSubcontractingOpportunityNotificationForm.pdf>.

Retain supporting documentation (i.e., certified letter, fax, e-mail) demonstrating evidence of your good faith effort to notify the Texas certified HUBs and trade organizations or development centers. Also, be mindful that a working day is considered a normal business day of a state agency, not including weekends, federal or state holidays, or days the agency is declared closed by its executive officer. The initial day the subcontracting opportunity notice is sent/provided to the HUBs and to the trade organizations or development centers is considered to be "day zero" and does not count as one of the seven (7) working days.

a. Provide written notification of the subcontracting opportunity you listed in SECTION B-1, to three (3) or more Texas certified HUBs. Unless the contracting agency specified a different time period, you must allow the HUBs at **least seven (7) working days** to respond to the notice prior to you submitting your bid response to the contracting agency. When searching for Texas certified HUBs and verifying their HUB status, ensure that you use the State of Texas' Centralized Master Bidders List (CMBL) - Historically Underutilized Business (HUB) Directory Search located at <http://mycpa.cpa.state.tx.us/posscmblistsearch/index.jsp>. HUB status code "A" signifies that the company is a Texas certified HUB.

b. List the **three (3) Texas certified HUBs** you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the company's Texas Vendor Identification (VID) Number, the date you sent notice to that company, and indicate whether it was responsive or non-responsive to your subcontracting opportunity notice.

Company Name	Texas VID <small>(Do not enter Social Security Numbers)</small>	Date Notice Sent <small>(mm/dd/yyyy)</small>	Did the HUB Respond? <input type="checkbox"/> - Yes <input type="checkbox"/> - No
			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
			<input type="checkbox"/> - Yes <input type="checkbox"/> - No
			<input type="checkbox"/> - Yes <input type="checkbox"/> - No

c. Provide written notification of the subcontracting opportunity you listed in SECTION B-1 to **two (2)** or more trade organizations or development centers in Texas to assist in identifying potential HUBs by disseminating the subcontracting opportunity to their members/participants. Unless the contracting agency specified a different time period, you must provide your subcontracting opportunity notice to trade organizations or development centers at **least seven (7) working days** prior to submitting your bid response to the contracting agency. A list of trade organizations and development centers that have expressed an interest in receiving notices of subcontracting opportunities is available on the Statewide HUB Program's webpage at <https://www.comptroller.texas.gov/purchasing/vendorhub/resources.php>.

d. List **two (2) trade organizations or development centers** you notified regarding the subcontracting opportunity you listed in SECTION B-1. Include the date when you sent notice to it and indicate if it accepted or rejected your notice.

Trade Organizations or Development Centers	Date Notice Sent <small>(mm/dd/yyyy)</small>	Was the Notice Accepted? <input type="checkbox"/> - Yes <input type="checkbox"/> - No
		<input type="checkbox"/> - Yes <input type="checkbox"/> - No
		<input type="checkbox"/> - Yes <input type="checkbox"/> - No

Section B-3: Notification of Subcontracting Opportunity

You must comply with Items a, b, c and d.

Retain documentation demonstrating evidence of your good faith effort. You are encouraged to use the Notification Form located at the link provided or included.

a. Allow the HUBs at least seven (7) working days to respond.

The initial day notice is sent is considered "day zero" and does not count as one of the seven (7) working days.

b. List 3 HUBs contacted for subcontracting opportunities.

c. provide your subcontracting opportunity notice to trade organizations or development centers at least seven (7) working days prior to submitting your bid response


d. List two trade organizations contacted for these subcontracting opportunities

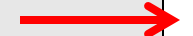
HSP Completion: Method B - by Solicitation/Notification

HSP God Faith Effort – Method B
(Attachment B), Page 2 of 2

Section B-4: Subcontractor Selection

a. Subcontracting opportunity information 

b. Enter each selected subcontractor and provide all the information requested. 

c. Provide written justification as to why a HUB was not selected for this subcontracting opportunity. 

HSP Good Faith Effort - Method B (Attachment B) Cont. Rev. 2/17

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

SECTION B-4: SUBCONTRACTOR SELECTION
Enter the item number and description of the subcontracting opportunity you listed in SECTION 2, Item b, of the completed HSP form for which you are completing the attachment.

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

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

Company Name	Texas certified HUB	Texas VID or federal EIN <small>Do not enter Social Security Numbers. If you do not know their VID / EIN, leave their VID / EIN field blank.</small>	Approximate Dollar Amount	Expected Percentage of Contract
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%
	<input type="checkbox"/> - Yes <input type="checkbox"/> - No		\$	%

c. If any of the subcontractors you have selected to perform the subcontracting opportunity you listed in SECTION B-1 is **not** a Texas certified HUB, provide written justification for your selection process (attach additional page if necessary):

REMINDER: As specified in SECTION 4 of the completed HSP form, if you (respondent) are awarded any portion of the requisition, you are required to provide notice as soon as practical to **all** the subcontractors (HUBs and Non-HUBs) of their selection as a subcontractor. The notice must specify at a minimum the contracting agency's name and its point of contact for the contract, the contract award number, the subcontracting opportunity ID (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.

Page 2 of 2
(Attachment B)

HSP Completion: Self-Performing

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

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

HSP Completion: Self-Performing

Page 1



HUB Subcontracting Plan (HSP) Rev. 2/17

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)(ii), a respondent (prime contractor) may demonstrate good faith effort to utilize Texas certified HUBs for its subcontracting opportunities if the total value of the respondent's subcontracts with Texas certified HUBs meets or exceeds the statewide HUB goal or the agency specific HUB goal, whichever is higher. When a respondent uses this method to demonstrate good faith effort, the respondent must identify the HUBs with which it will subcontract. If using existing contracts with Texas certified HUBs to satisfy this requirement, only the aggregate percentage of the contracts expected to be subcontracted to HUBs with which the respondent **does not** have a **continuous contract**¹ 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.

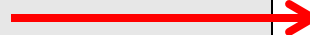
SECTION 14 RESPONDENT AND REQUISITION INFORMATION

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)

Section 1: Respondent and Requisition Information
Complete all information requested.



HSP Completion: Self-Performing

Page 2

Enter your Company's name and the requisition #.
(Enter this information on each subsequent page.)

Respondents Subcontracting Intentions

Section 2a: ✓ No, I will not be subcontracting any portion of the contract.

Move on to Page 3, Section 3

Rev. 2/17

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

SECTION 2: RESPONDENT'S SUBCONTRACTING INTENTIONS

After dividing the contract work into reasonable lots or portions to the extent consistent with prudent industry practices, and taking into consideration the scope of work to be performed under the proposed contract, including all potential subcontracting opportunities, the respondent must determine what portions of work, including contracted staffing, goods and services will be subcontracted. Note: In accordance with 34 TAC §20.282, a "Subcontractor" means a person who contracts with a prime contractor to work, to supply commodities, or to contribute toward completing work for a governmental entity.

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

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

- No, I will not be subcontracting any portion of the contract, and I will be fulfilling the entire contract with my own resources, including employees, goods and services. (If No, continue to SECTION 3 and SECTION 4.)

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

Item #	Subcontracting Opportunity Description	HUBs		Non-HUBs
		Percentage of the contract expected to be subcontracted to HUBs with which you <u>do not</u> have a continuous contract* 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		%	%	%
2		%	%	%
3		%	%	%
4		%	%	%
5		%	%	%
6		%	%	%
7		%	%	%
8		%	%	%
9		%	%	%
10		%	%	%
11		%	%	%
12		%	%	%
13		%	%	%
14		%	%	%
15		%	%	%
Aggregate percentages of the contract expected to be subcontracted:		%	%	%

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

c. Check the appropriate box (Yes or No) that indicates whether you will be using only Texas certified HUBs to perform all of the subcontracting opportunities you listed in SECTION 2, Item b.

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

- No (If No, continue to Item d, of this SECTION.)

d. Check the appropriate box (Yes or No) that indicates whether the aggregate expected percentage of the contract you will subcontract with Texas certified HUBs with which you do not have a continuous contract* in place with for more than five (5) years, meets or exceeds the HUB goal the contracting agency identified on page 1 in the "Agency Special Instructions/Additional Requirements."

- Yes (If Yes, continue to SECTION 4 and complete an "HSP Good Faith Effort - Method A (Attachment A)" for each of the subcontracting opportunities you listed.)

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

*Continuous Contract: Any existing written agreement (including any renewals that are exercised) between a prime contractor and a HUB vendor, where the HUB vendor provides the prime contractor with goods or service under the same contract for a specified period of time. The frequency the HUB vendor is utilized or paid during the term of the contract is not relevant to whether the contract is considered continuous. Two or more contracts that run concurrently or overlap one another for different periods of time are considered by CPA to be individual contracts rather than renewals or extensions to the original contract. In such situations the prime contractor and HUB vendor are entering (have entered) into "new" contracts.

HSP Completion: Self-Performing

Page 3

Section 3: Self Performing Justification

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

Section 4: Affirmation

Read, sign and date to affirm the information you provided is true and correct. →

Rev. 2/17

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

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

SECTION 4: AFFIRMATION

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

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

Signature	Printed Name	Title	Date (mm/dd/yyyy)

Reminder:

- ▶ If you responded "Yes" to SECTION 2, Items c or d, you must complete an "HSP Good Faith Effort - Method A (Attachment A)" for **each** of the subcontracting opportunities you listed in SECTION 2, Item b.
- ▶ If you responded "No" SECTION 2, Items c and d, you must complete an "HSP Good Faith Effort - Method B (Attachment B)" for **each** of the subcontracting opportunities you listed in SECTION 2, Item b.

3

For the most current HSP go to:

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

CONTACT INFORMATION

Texas Department of Transportation

Civil Rights Division

125 East 11th St.

Austin, TX 78701

(512) 416-4700

CIV_HUB@txdot.gov

www.txdot.gov



EVALUATION CRITERIA FOR AIRPORT PLANNING QUALIFICATIONS

The following criteria will generally be used in evaluating consultants submitting qualifications; however, the Consultant Selection Committee may develop additional consultant evaluation criteria and point values, if desired. The Consultant Selection Committee should assign points to be used for the Consultant Rating Sheet if they do not use the suggested point values. The TxDOT Project Manager can assist the Selection Committee in interpreting the criteria and establishing point values for each criterion, if necessary.

Suggested Point Values and Selection Criteria

- 1. Capability to perform all of the services required for this project and professional qualifications of key personnel assigned to this project relevant to the work to be performed. (25 points)**

Does the consultant have the necessary resources to perform all of the services required (e.g.: planning, surveying, CAD, etc.)? Who are the professionals that will be working on this project on a daily basis and how do their qualifications and experience with general aviation airport planning projects compare with other respondents? [Sources of information: Aviation Planning Team Form, Recent Relevant Airport Experience Form, Proposed Technical Approach Form, and possibly the Optional Summary.]
- 2. Recent experience, within the last ten years, in the development of airport plans comparable to the proposed project. (25 points)**

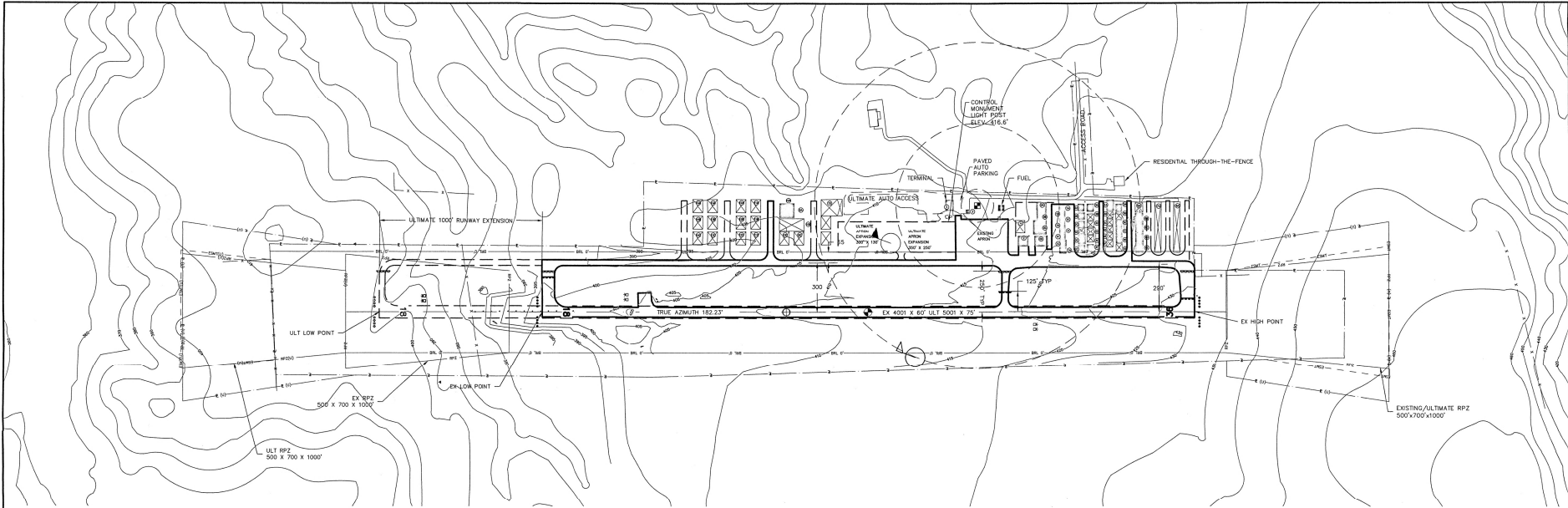
Does the consultant have direct experience developing general aviation airport plans similar to those proposed for this location? [Sources of information: Aviation Planning Team Form, Recent Relevant Airport Experience Form, and possibly the Optional Summary.]
- 3. Ability to meet the schedules and deadlines of this project and reputation for competence, timeliness, and quality of performance and work product. (25 points)**

Does the proposed planning team have sufficient time to devote to this project in order to meet the schedule submitted in the qualifications? Is the proposed schedule realistic? Does the consultant consistently meet contractual timetables? Has the work performed for other airports been satisfactory? [Sources of information: Aviation Planning Team Form, Recent Relevant Airport Experience Form, Project Schedule Form, possibly the Optional Summary, and reference check.]

4. Proposed Technical Approach and Schedule to Accomplish the Project. (25 points)

Does the consultant show specific understanding and familiarity with the particular requirements of this project and how to address them? Is the consultant familiar with relevant planning guidance? Is the schedule appropriate to accomplish the project?

[Sources of information: Proposed Technical Approach Form, Proposed Schedule Form, and possibly the Optional Summary.]

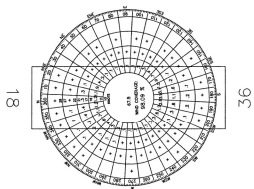


BUILDINGS / FACILITIES LEGEND			
EXISTING	ULTIMATE	ELEVATION	DESCRIPTION/OWNER
3	425	425	TERMINAL
4	441	441	MAINTENANCE HANGAR/AIRPORT
5	425	425	PAVING
6	430	430	FUTURE
7	436	436	WAYNE COLLIER
8	436	436	JOHN FOSTER
9	436	436	JOHN WELSON
10	437.4	437.4	CK ROBINSON
11	435	435	RON NELSON
12	435	435	EMMET HEARST
13	435	435	NATHAN WOODS
14	435	435	FORGE WOOD
15	435	435	JUSTIN BISHMAN
16	435	435	BOB THOMPSON
17	435	435	DREW LAWRENCE
18	435	435	MARK RICE
19	441.4	441.4	JM ORNBALTER
20	441.4	441.4	ROBERT SUGGERTH
21	441	441	FUTURE
22	441	441	MIKE FILL
23	438	438	JAMES SWANSON
24	440	440	MARCO BLAZO
25	440	440	FUTURE
26	440	440	FUTURE
27	440	440	FUTURE
28	440	440	FUTURE
29	440	440	FUTURE
30	440	440	FUTURE
31	440	440	FUTURE
32	440	440	FUTURE
33	440	440	FUTURE
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37	440	440	FUTURE
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68	440	440	FUTURE
69	440	440	FUTURE
70	440	440	FUTURE
71	440	440	FUTURE
72	440	440	FUTURE
73	440	440	FUTURE
74	440	440	FUTURE
75	440	440	FUTURE

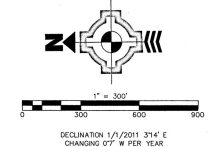
RUNWAY DATA TABLE			
	RW 18-36		
	EXISTING	B-I	ULTIMATE
RUNWAY ARC	B-I	B-I	
DESIGN AIRCRAFT & ARC	KING AIR B200 (B)	CESSNA 550 (B)	
BALANCED FIELD LENGTH	3050'	4250'	
RUNWAY LENGTH & WIDTH (ft.)	4001' X 60'	5001' X 75'	
PAVEMENT DESIGN STRENGTH (1000 lbs.)	12.5 SW	30 SW	
RUNWAY LIGHTING	MRL	MRL	
PERCENT EFFECTIVE GRADIENT	0.75%	0.75%	
PERCENT WIND COVERAGE	98.05%	98.05%	
MAXIMUM ELEVATION ABOVE MSL	432.7'	432.7'	
RW SURFACE TYPE	ASPH	ASPH	
PSA - LENGTH BEYOND RW END	240'	300'	
PSA - WIDTH	120'	150'	
DFA - LENGTH BEYOND RW END	240'	300'	
DFA - WIDTH	400'	300'	
CFZ - LENGTH BEYOND RW END	200'	200'	
CFZ - WIDTH	250'	400'	
RUNWAY END	18	36	18 36
APPROACH TYPE	GPS	GPS	GPS LPV GPS LPV
APPROACH VISIBILITY MINIMA	1 MILE	1 MILE	1 MILE
THRESHOLD BITING SURFACE & SLOPE	#8 20-1	#8 20-1	#8 20-1
RUNWAY MARKING	NPI	NPI	NPI
RUNWAY VISUAL AIDS	NONE	NONE	PARB PARB
TOUCHDOWN ZONE ELEVATION	431.1'	432.9'	418.9'
FAR PART 77 APPROACH CATEGORY	C	C	C
FAR PART 77 APPROACH SURFACE SLOPE	34.1	34.1	34.1
TAKE-OFF RUN AVAILABLE (TORA)	4001'	4001'	5001'
TAKE-OFF DISTANCE AVAILABLE (TODA)	4001'	4001'	5001'
ACCELERATE STOP DISTANCE AVAILABLE (ASDA)	4001'	4001'	5001'
LANDING DISTANCE AVAILABLE (LDA)	4001'	4001'	5001'

RUNWAY END COORDINATES AND ELEVATIONS			
RUNWAY END	LATITUDE	LONGITUDE	ELEVATION
EXISTING END OF RWY 18	32°44'51.7002" N	95°29'48.3528" W	402.5'
EXISTING END OF RWY 18	32°43'22.8902" N	95°29'50.4657" W	400.2'
EXISTING END OF RWY 36	32°44'12.1337" N	95°29'48.1668" W	432.6'

AIRPORT DATA TABLE			
	EXISTING	ULTIMATE	
AIRPORT ELEVATION (MSL)	432.7'	432.7'	
AIRPORT NAVIGATION AIDS	GPS/VOR	LPV GPS	
MEAN MAX TEMP (Hottest Month Y)	94°F	94°F	
AIRPORT REFERENCE CODE (ARC)	B-I	B-I	
TAXIWAY MARKING	STD W/E/REF	STD W/E/REF	
TAXIWAY LIGHTING	NONE	NONE	
AIRPORT REFERENCE POINT COORDINATES	32°44'31.950" N	95°29'47.412" W	
DATUM COORDINATE SYSTEMS - HORIZONTAL DATUM NAD 1983 StatePlane Texas North Central, VERTICAL DATUM NAVD83			
GFZ OBJECT PENETRATIONS - EXISTING HOLD POSITIONS ARE INSIDE GFZ - RELIGATE TO CORRECT SEPARATION DURING NEXT MAJOR RUNWAY PROJECT.			
NO OBSTRUCTION SURVEY COMPLETED			
FAA AIRSPACE STUDY 2012-ASW-5899-NRA			



WIND DATA SOURCE:
DALLAS 1997 TO 2006 ALL WEATHER



TxDOT master plans and ALPs do not consider cost, feasibility, practicality, or physical constraints, and may be impossible to build.

TEXAS DEPARTMENT OF TRANSPORTATION AVIATION DIVISION DATE FILTRON, DIRECTOR, AVIATION DIVISION DATE: 11 MAY 15		AIRPORT SPONSOR CURRENT AND FUTURE DEVELOPMENT DEPICTED ON THIS ALP IS APPROVED AND SUPPORTED BY AIRPORT SPONSOR SPONSOR ACKNOWLEDGES APPROVAL OF ALP BY TxDOT DOES NOT CONSTITUTE A COMMITMENT TO FUNDING. DATE:	
PREPARED BY: TxDOT AVIATION DIV.		KS: NOV 2014 DATE KS: NOV 2014 DATE KS:	
AIRPORT LAYOUT DRAWING WOOD COUNTY AIRPORT (JDD) MINEOLA/QUITMAN, TEXAS			



Instructions for Responding to a RFQ Solicitation

Aviation Division

eGrants Workflow:	RFQ Response
eGrants Role:	Subgrantee Administrator (SA) Subgrantee Staff (SS)
eGrants link	https://apps2.dot.state.tx.us/apps/egrants2/logout2.aspx
eGrants help:	eGrants help desk Monday – Friday 8AM – 4PM CD/ST (excluding state/federal holidays) avn-egrantshelp@txdot.gov or 1-800-687-4568

STEP	ROLE	ACTIONS	NOTES
01	SA	Go to View Opportunities. a. Select <u>Apply Now</u> to the opportunity b. The RFQ Response Menu is opened	Very important to click on the name of the document and not the organization name Make a note of the opportunity due date to ensure you respond in time
02	SA/SS	Click on View, Edit and Complete Forms a. Select RFQ Applicant Form b. Confirm Project information and address c. Upload AVN-550, 550D, 551 or 551D <u>PLEASE MAKE SURE YOU SELECT THE CORRECT PDF FILE BEFORE CHANGING STATUS.*</u> d. Hit Save	You should print the proposal document to a PDF so that it becomes un-editable. Or, you may upload a scanned copy of the AVN-550, 550D, 551, or 551D.
03	SA	When you are ready to submit your response, click on " <u>Save and submit to CS review</u> ". YOU ARE DONE	You will get an email saying the response was successfully submitted; the status must be changed to RFQ Response in CS Review by the due date and time posted in the solicitation.
04	SA/SS	<u>WAIT</u> UNTIL A SELECTION NOTIFICATION IS SENT TO YOU	
05	SS/SA	<u>AFTER SELECTION NOTIFICATION IS RECEIVED</u> Log in to view status of response. Once the scores are verified, TxDOT will move the response to an interview, selected or not selected status of which you can log in to see the status of your response.	The selection notification will refer users to eGrants to view the status of their response. User may also view the TxDOT website for selection information.

*If the responder posts the incorrect file.

- If status has been changed and the due date for the response has not expired, contact the help desk to ask for the status to be administratively changed back to Response in Process.
- If the incorrect file was posted, the incorrect file may be deleted and the correct one posted as long as the status has not been changed to Response in CS Review. Respondent will need to check the “delete” box and hit save. The page refreshes. Then post the correct file, save, and change the status.

If you are not set up in eGrants and wish to respond to a posted solicitation, you may contact the aviation help desk for assistance by using the webform available at [eGrants Help Desk Form](#)

Some organizations will have many user members. Each organization should determine which user member will submit the completed avn-550, 550D, 551, or 551D in eGrants. after the opportunity is selected for the organization, it will no longer appear on any other user’s home page unless the initiating user cancels the response.