Attachment E
Subcontracting Plan
## SBE SUBCONTRACTING PLAN

**INSTRUCTIONS:** All construction & non-construction contracts for government-assisted projects (agency contracts & private project with District subsidy) over $250,000, shall require at least 35% of the amount of the contract (total amount of agency contract or total private project development costs) be subcontracted to Small Business Enterprises (SBE), if insufficient qualified SBEs to Certified Business Enterprises (CBE). The SBE Subcontracting Plan must list all SBE and CBE subcontracts at every tier. Once the SBE Subcontracting Plan is submitted for agency contracts, options & extensions, it can only be amended with DSLBD's consent.

**SUBMISSION OF SBE SUBCONTRACTING PLAN:**
- For agency solicitations - submit to agency with bid/proposal.
- For agency options & extensions - submit to agency before option or extension exercised.
- For private projects - submit to DSLBD, agency project manager and District of Columbia Auditor, with each quarterly report. As private projects may not have awarded all contracts at the time the District subsidy is granted, the SBE Subcontracting Plan may be submitted simultaneously with each quarterly report and list all SBE/CBE subcontracts executed by the time of submission.

**CREDIT:** For each subcontract listed on the SBE Subcontracting Plan, credit will only be given for the portion of the subcontract performed, at every tier, by a SBE/CBE using its own organization and resources. **COPIES OF EACH FULLY EXECUTED SUBCONTRACT WITH SBEs and GBEs (AT EVERY TIER) MUST BE PROVIDED TO RECEIVE CREDIT.**

**EXEMPTION:** If the Beneficiary (Prime Contractor or Developer) is a CBE and will perform the ENTIRE government-assisted project with its own organization and resources and will NOT subcontract any portion of the services and goods, then the CBE is not required to subcontract 35% to SBEs.

### BENEFICIARY (✓ which applies ☐ Prime Contractor or ☐ Developer) INFORMATION:

<table>
<thead>
<tr>
<th>Company</th>
<th>Contact #</th>
<th>Email address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*all that applies, Company is:*
- ☐ a SBE
- ☐ a CBE
- ☐ CBE Certification Number: __________
- ☐ WILL perform the ENTIRE agency contract or private project with its own organization and resources
- ☐ WILL subcontract a portion of the agency contract or private project

Company's point of contact for agency contract or private project:

<table>
<thead>
<tr>
<th>Point of Contact</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contact #</td>
<td>Email address</td>
</tr>
<tr>
<td>Street Address</td>
<td></td>
</tr>
</tbody>
</table>

### GOVERNMENT-ASSISTED PROJECT (✓ which applies ☐ Agency Contract or ☐ Private Project) INFORMATION:

<table>
<thead>
<tr>
<th>Solicitation Number</th>
<th>District Subsidy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solicitation Due Date</td>
<td>Agency Providing Subsidy:</td>
</tr>
<tr>
<td>Agency:</td>
<td>Amount of District Subsidy:</td>
</tr>
<tr>
<td>Total Dollar Amount of Contract: $</td>
<td>Date District Subsidy Provided:</td>
</tr>
</tbody>
</table>

*Design-Build must include total contract amount for both design and build phase of project.

35% of Total Dollar Amount of Contract: $_____

| Total Amount of All SBE/CBE subcontracts: $_____ (include every lower tier) |
| | 35% of Total Development Project Budget: $_____
| | (include pre-construction and construction costs) |
| | Total Development Project Budget: $_____
| | Total Amount of All SBE/CBE subcontracts: $_____ (include every lower tier) |

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SBE Subcontracting Plan – Revised October 2014
SBE/ CBE SUBCONTRACTORS (FOR EACH TIER):

<table>
<thead>
<tr>
<th>SBE/ CBE Company</th>
<th>Address/Telephone No./ Email</th>
<th>Subcontractor Tier (1st, 2nd, 3rd, etc.)</th>
<th>Description of Subcontract scope of work to be PERFORMED WITH SBE/CBES OWN ORGANIZATION &amp; RESOURCES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Select Tier</td>
<td></td>
</tr>
</tbody>
</table>

Period of subcontract:  
Price to be paid to the SBE/CBE Subcontractor: $______  

☐ all that applies, Subcontractor is:  
☐ a SBE  ☐ a CBE  ☐ CBE Certification #:  
☐ SBE/CBE will perform the ENTIRE subcontract with its own organization and resources  
☐ SBE/CBE will subcontract a portion of the subcontract (MUST LIST EACH LOWER TIER SBE/ CBE SUBCONTRACTS)

SBE/ CBE Point of Contact  
Name: _____  
Title: _____  
Telephone Number: _____  
Email Address: _____

Complete additional copies as needed.

SBE Subcontracting Plan – Revised October 2014
### AGENCY CONTRACT AWARD

**Agency:**

**Prime Contractor:**

**Contract Number:**

**Date SBE Subcontracting Plan Accepted:**

**Date agency contract signed:**

**Anticipated Start Date of Contract:**

**Anticipated End Date of Contract:**

**Total Dollar Amount of Contract:** $

*Design-Build must include total contract amount for both design and build phase of project.*

**35% of Total Contract Amount:** $

**Total Amount of All SBE/CBE subcontracts:** $(include every tier)

(✓ if applies)

- [ ] Base Period Contract – Option/Extension Period: ___
- [ ] Multi-year Contract
  - Current year (period) of Contract: ___
- [ ] Design-Build – Date of Guaranteed Contract: ___

Check if prime contractor is a CBE and will perform the ENTIRE government-assisted project (agency contract) with its own organization and resources and NOT subcontract any portion of services or goods.

### PRIVATE PROJECT SUBSIDY AWARD

**Agency Providing Subsidy:**

**District Subsidy:**

**Developer:**

**Amount of District Subsidy:**

**Date District Subsidy Provided/contract signed:**

**Anticipated Start Date of Project:**

**Anticipated End Date of Project:**

**Project Name:**

**Project Address:**

**Total Development Project Budget:** $

(✓ if applies)

(✓ if applies)

- [ ] Check if developer is a CBE and will perform the ENTIRE government-assisted project (private project) with its own organization and resources and NOT subcontract any portion of services or goods.

### AFFIRMATION

The below Agency Contracting Officer or Agency Project Manager Affirms the following (✓ to affirm):

[ ] If the Beneficiary is a CBE, DSLBD was contacted to confirm Beneficiary’s CBE certification;

[ ] The fully executed Contract (Base or Option or Extension or Multi-Year) or subsidy document, between the Beneficiary and Agency, was emailed to DSLBDCompliance.Enforcement@dc.gov within five (5) days of signing;

[ ] FOR AGENCY CONTRACT the SBE Subcontracting Plan, submitted by Beneficiary, was emailed to DSLBDCompliance.Enforcement@dc.gov within five (5) days of signing the contract between the Beneficiary and Agency.

**Name of Agency Contracting Officer or Agency Project Manager**

**Title of Agency Contracting Officer or Agency Project Manager**

**Signature**

**Date**

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