

CHECKLIST FOR EVALUATION OF SUBCONTRACTING PLANS

PART I.

1. Contractor

Name: _____
Division or Plant: _____
Address: _____
Telephone: _____

2. Subcontracting Plan Administrator

Name: _____
Title: _____
Address: _____
Telephone: _____

3. Type of Solicitation

____ Sealed Bid
____ Negotiated
____ BAA

4. Type of Plan

____ Individual
____ Commercial Product
____ Master Plan (If approved, leave
17 thru 25 blank)

5. Place of contract performance:

____ Same as (1). ____ Other.

6. Solicitation No. _____ Contract No. _____

7. Contract period _____ 8. Contract value: \$ _____

9. Description of contract items (supplies or services): _____

10. Contracting Officer

Name: _____
Address: _____
Telephone: _____

11. Administrative Contracting Officer

Name: _____
Address: _____
Telephone: _____

PART II.

12. Goals Established

"Planned Subcontracting"

	Dollar Amount	Percent
a. Total planned subcontracting	\$ _____	
b. Large Business (LB)	\$ _____	
c. Small Business (SB)	\$ _____	_____ %
d. Small disadvantaged business (SDB) (subset 12.c)	\$ _____	_____ %
HBCU/MI	\$ _____	_____ %
e. Woman Owned SB (WOSB)	\$ _____	_____ %

f. Records on a contract-by-contract basis to support award data, including name, address, and size status of each subcontractor? Yes ___ No ___

24. In order to effectively implement this plan to the extent consistent with efficient contract performance, the contractor shall perform the following functions:

a. Assist SB, SDB, and WOSB firms to facilitate their participation? Yes ___ No ___

b. Provide adequate and timely consideration of potential SB, SDB, and WOSB firms in make-or-buy decisions? Yes ___ No ___

c. Counsel and discuss subcontracting opportunities with SB, SDB, and WOSB firms? Yes ___ No ___

25. Description of efforts encouraging the maximum practical opportunity for SB, SDB, and WOSB participation? Yes ___ No ___

26. Description of extent offeror plans to restrict competition to SDB, HBCUs and MIs? Yes ___ No ___

PART III.

27. Evaluation of the Contractor's past performance in awarding subcontracts for similar services? Yes ___ No ___

28. Is the Subcontracting Plan as submitted acceptable? Yes ___ No ___

29. If the plan is unacceptable, was the contractor notified of the deficiencies in writing? Yes ___ No ___

REMARKS:

Name _____ Title _____ Date _____

Does the Plan provide:

13. Acceptable goals? (If not, explain in remarks section) Yes ___ No ___
14. Description of products and services to be subcontracted:
- a. Other than SB? Yes ___ No ___
 - b. SB? Yes ___ No ___
 - c. SDB including HBCU/MIs? Yes ___ No ___
 - d. WOSB? Yes ___ No ___
15. Description of method used to develop goals? Yes ___ No ___
16. Description of method used to locate potential sources? Yes ___ No ___
17. For goal development purposes:
- a. Inclusion of indirect/overhead cost? Yes ___ No ___
 - b. If not included, rationale for not including Yes ___ No ___
 - c. Description of method used to allocate indirect/overhead costs? Yes ___ No ___
18. The name and duties of the subcontract program administrator? Yes ___ No ___
19. Description of contractor's efforts to assure subcontracting opportunities to SB, SDB, and WOSB concerns? Yes ___ No ___
20. Flow down assurances, including:
- a. Appropriate subcontracting clauses will be used in subcontracting? Yes ___ No ___
 - b. Subcontractors will be required to adopt a similar plan? Yes ___ No ___
 - c. Subcontractors agreement to submit required reports Yes ___ No ___
21. Assurances contractor will submit SF 294 and 295 reports, other reports, as required, and cooperate in studies, surveys? Yes ___ No ___
22. Recitation of types of records maintained to show compliance with Plan? Yes ___ No ___
23. For the following types of records:
- a. SB, SDB, and WOSB source lists? Yes ___ No ___
 - b. Efforts to identify and award subcontracts to SB, SDB, and WOSB firms? Yes ___ No ___
 - c. Organizations contacted for SB, SDB, and WOSB sources, including:
 - Contacts with SB, SDB, and WOSB associations? Yes ___ No ___
 - Contacts with business development organizations? Yes ___ No ___
 - Attendance at SB, SDB, and WOSB procurement conferences and trade fairs? Yes ___ No ___
 - d. Records to support internal activities to guide buyers, including:
 - Workshops, seminars, and training programs? Yes ___ No ___
 - Monitoring activities to evaluate compliance? Yes ___ No ___
 - e. On a contract-by-contract basis, records on all subcontract solicitations over \$100,000, indicating for each solicitation:
 - Were SBs solicited and if not, why not? Yes ___ No ___
 - Were SDBs solicited and if not, why not? Yes ___ No ___
 - Were WOSBs solicited and if not, why not? Yes ___ No ___