



# Subcontracting Opportunity Notification Form

If your business is interested in bidding on the subcontracting opportunity identified in Section C, please reply by the date listed.

## Section A: Prime Contractor's Information

Company Name \_\_\_\_\_

Point of Contact \_\_\_\_\_

Email Address \_\_\_\_\_

Phone Number \_\_\_\_\_

## Section B: Contracting State Agency Information

Agency Name \_\_\_\_\_

Solicitation No. \_\_\_\_\_

## Section C: Due Date and Description

Subcontracting Opportunity \_\_\_\_\_

Time and Date Response Due (minimum seven business days):

Time \_\_\_\_\_  a.m.  p.m. on Date (mm/dd/yyyy) \_\_\_\_\_

Subcontracting Opportunity Scope of Work:

Not Applicable

Required Qualifications:

Not Applicable

Bonding and insurance requirements:

Not Applicable

Other contract requirements:

Not Applicable

Location to review plans/specifications:

Not Applicable