



# 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:**

**Required Qualifications:**

**Bonding and Insurance Requirements:**

**Other Contract Requirements:**

☐ Not Applicable

**Location to Review Plans/Specifications:**

☐ Not Applicable