

The University of Texas System
Office of Facilities Planning and Construction
HUB Form for Contract Modifications

In accordance with State Law, each state agency must determine whether subcontracting opportunities are probable under the contract or any modification thereto. In order to comply with this regulation, the **Prime Contractor/Prime Consultant shall complete this form and attach it to their pricing submittal** for any contract modification.

Additional subcontracting is probable in the context of this contract modification.

Yes No

If **YES**, provide a listing of subcontracting opportunities and attach a completed HSP for this scope of work:

If **NO**, complete the following statements:

Services provided as a result of this contract modification will be provided via **Prime Contractor/Consultant**.

Yes No

Services provided as a result of this contract modification will be provided via **existing subcontractor/subconsultant**.

Yes No

Existing subcontractors/subconsultants providing this work are part of the current HUB Subcontracting Plan (HSP). (If **NO**, provide subcontractor's name and explanation of selection process.)

Yes No

Signature – PM/RCM

(Printed name)

Date

Signature – Prime Contractor/Consultant

(Printed name)

Date

Signature – HUB Coordinator

(Printed name)

Date