

Sub-contractor Approval Form

Project Name _____

Project Number _____

1. Name of sub-contractor: _____
2. Sub-contractor Business ID Number with VT Secretary of State: _____
(Attach documentation showing that business has "Active" status.)
3. General description of work to be performed: _____
4. Approximate value of work: \$ _____
5. Total value of work sub-contracted to date on project : \$ _____
6. Value of work as a percentage of total contract amount _____
(Note: Value of sub-contracted work may not exceed 50% of total contract amount)
7. Total Contract Value \$ _____
8. Sub-contractor debarment status has been confirmed by checking on SAM.gov? Yes No
(Documentation must be attached)
9. Sub-contract includes all items identified on the Sub-contract Instruction and Checkoff Sheet and all the requirements and pertinent provisions of the prime contract. (Retain copy of sub-contracts in project files) Yes No

Approved: _____ Date: _____

Municipal Employee in responsible charge **or**
Construction Inspector/Resident Engineer employed or hired by municipality

A copy of this form shall be forwarded to the VTrans Project Supervisor upon approval by the municipality

Reference:
23 CFR 633