

FOR OFFICIAL USE ONLY

Modernize 6N Inpatient Restrooms (Swing for 3N)

EXHIBIT C

SUBCONTRACTOR INFORMATION AND CONSENT FORM

Subcontractor and/or Teaming Partner Consent for the Release of Past Performance Information to the Prime Contractor and Reference Information

Past performance information concerning subcontractors and teaming partners cannot be disclosed to a private party without the subcontractor's or teaming partner's consent. Because a prime contractor is a private party, the Government will need that consent before disclosing subcontractor/teaming partner past and present performance information to the prime during exchanges. To assist the Government in assessing your past performance relevancy we request that the following consent form be completed by the major subcontractors/teaming partners identified in your proposal. The completed consent forms should be submitted to the offering contractor for submission with past performance volume.

Name of Firm: _____
(That is currently planning on participating as a subcontractor and or a teaming partner with)

Telephone: _____

Address: _____

City/State/Zip Code: _____

DUNS/Cage Code: _____

Name of Prime: _____
(PRIME CONTRACTOR OR NAME OF ENTITY PROVIDING PROPOSAL in responding to the Request for Proposal No. 36C25626R0108 for Project No. 667-27-130 Modernize 6N Inpatient Restrooms (Swing for 3N))

Telephone: _____

Address: _____

City/State/Zip Code: _____

DUNS/Cage Code: _____

We understand that the Government is placing increased emphasis on past performance to obtain best value in source selections. To facilitate the performance confidence assessment process, we are signing this consent form to allow you to discuss our past and present performance information with the prime contractor during the source selection process.

Signature:

Title of Individual with authority to sign for legally bind the company

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Reference List (required):

Contract No. and Title: _____
Describe role (Prime/Sub) and Work Performed: _____
Referecne POC Name/Email Address/Phone #: _____

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