CITY OF SAN ANTONIO
ECONOMIC DEVELOPMENT
DEPARTMENT

CHANGE TO UTILIZATION PLAN

List all changes in the use of certified or non-certified Subcontractors/Suppliers in relation to the Prime Contractor's Original Utilization Plan or latest Change to Utilization Plan approved by the Economic Development Department for the contract listed below.

Name of Prime Contractor:

Name of Contract:

CHANGES:

All sections of the following table must be completed. Additional Subcontractor rows provided on back page if needed.

ROLE	NAME OF FIRM	CERTIFICATIONS (SELECT ALL)			NEW*/REMOVE**/ CHANGE VALUE	$ ESTIMATED TOTAL CONTRACT VALUE	NIGP CODE (5 DIGIT)	START DATE (NEW SUB ONLY)
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***IF A NEW FIRM IS ADDED TO THE CONTRACT, ENSURE THEY ARE REGISTERED IN THE CITY'S CENTRAL VENDOR REGISTRY (SAePS).**

****IF REMOVING/REDUCING THE DOLLAR VALUE FOR A FIRM, ATTACH DOCUMENTATION ESTABLISHING THE FIRM WAS NOTIFIED.**

Note: If the Subcontractor changes listed on this document result in not meeting the subcontracting goal for this contract, you will be contacted by the City for further action.

JUSTIFICATION FOR ALL CHANGES TO UTILIZATION:

I hereby affirm that the above information is true and complete to the best of my knowledge and belief. I possess internal documentation from all proposed new Subcontractors/Suppliers confirming their intent to perform the scope of work for the price indicated above. All Subcontractors/Suppliers removed or reduced in dollar value have been been notified of the change in writing. In addition, all new firms have been notified of their addition to the contract as a Subcontractor and have registered in SAePS. I understand and agree that, if this change to utilization is approved, this document shall be attached thereto and become a binding part of the contract.

Prime Contractor's Authorized Agent: Sign & Date _____ Print Name _____

Director or Designee of Originating Department: Sign & Date _____ ☐ APPROVED ☐ DENIED

Director or Designee of Economic Development: Sign & Date _____ ☐ APPROVED ☐ DENIED

CHANGES:
All fields must be completed per firm listed.

ROLE	NAME OF FIRM	CERTIFICATIONS (SELECT ALL)			NEW/REMOVE*/ CHANGE VALUE	$ ESTIMATED TOTAL CONTRACT VALUE	NIGP CODE (5 DIGIT)	START DATE (NEW SUB ONLY)
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