## REQUEST FOR ACCEPTANCE OF SUBCONTRACTOR

To:	Schenectady Municipal Housing Author Modernization Department	rity	DATE:			
	375 Broadway		PROJECT NAME	3:		
	Schenectady NY 12305		PROJECT LOCA	TION:		
In accor project, below:	dance with our prime contract forwe request acceptance of the following	proposed s	subcontractor to p	erform work or suppl	of this y material as indicated	
1. SUBC	CONTRACTOR NAME:					
ADDI	RESS:					
FEDE	RAL ID/SSN NO.:		TELEF	PHONE NO.( )		
MBE/	WBE/DBE:					
2. SCO	PE OF WORK (Type of work, and Spe	cification s	ection reference)			
the Cert	ubcontractor's Non-Collusive Affidavit ificate of Insurance naming the owner a IAL OF THIS REQUEST).					
4. We w	arrant that the provisions required by o ract.	ur contract	to be inserted in e	each subcontract will l	be inserted in this	
	ertify that this proposed subcontractor is ed by the list or lists of such contractors			ards of contracts from	the United States as	
6. There	will be no assignment of interest in thi	s subcontra	ct except as follo	ws (If NONE, so state	<del>(</del> )	
7. We ce Project	ertify the Sub contractor has received	l a copy of	the Federal Wag	e Rates (In Specifica	tion Book) on this	
8. Terms	s of Payment:		Price: S	\$		
9. Rema	rks:					
				Prime Contractor		
			Ву:			
			Title:_			
	Al	PPROVAL	OR REJECTION			
Subcon	tractors eligibility to receive contract	awards ha	as been verified_			
The pro	posed subcontractor named above is		Approved		Disapproved	
	ted, the contracting party giving such a the subcontract, nor the performance of					
If reject	ed, the reason(s) will be briefly stated h	erein, and	this form will be r	eturned within 10 day	/s after receipt.	
(Date)			(Contracting Officer)			