

SUBCONTRACTOR/HAULER REQUEST ⁽¹⁾

(Item Tabulation)



PRIME CONTRACTOR _____
 FILE NUMBER: _____
 PROJECT NUMBER: _____
 COUNTY: _____

SUB CONTRACTOR: _____
 DBE WBE NON
 FEIN⁽⁷⁾: _____ TIER⁽²⁾: _____
 ADDRESS: _____

IF SECOND TIER OR LOWER, INDICATE
 NAME(S) OF UPPER TIER FIRMS

LINE ITEM NO.	DESCRIPTION	QUANTITY ⁽³⁾	UNIT	CONTRACT UNIT PRICE	SUBCONTRACT - HAULER UNIT PRICE ⁽⁴⁾	EXTENDED AMOUNT (BID PRICE)	EXTENDED AMOUNT (SUBCONTRACT PRICE)	⁽⁵⁾	REMARKS ⁽⁶⁾
						SHEET TOTAL			SHEET ___ OF ___
						TOTAL FOR FIRM			% OF CONTRACT AMOUNT

Notes:

- (1) Use separate form for each subcontractor/hauler.
- (2) Indicate Tier of Sub Contractor.
- (3) For Lump Sum or Portion of Lump sum items show Quantity as decimal percent (e.g., 50% = 0.5, 100% = 1.0).
- (4) Applicable only for DBE/WBE Request.
- (5) Indicate Specialty Item
- (6) Use "Remarks" to explain portions/partial items, etc.,
- (7) FEIN Number is required for all subcontractors

SCDOT Use Only	
Entered to SM Data (date)	
By (initials)	