

**Attachment B:**

**HUD OneCPD Subcontractor Application**

**Contact Information and Rates**

Please complete the following chart for your contact information:

|  |  |
| --- | --- |
| **Contact Person** |  |
| **Contact E-mail** |  |
| **Contact Telephone Number** |  |

**Organization/Individual Experience**

Please complete the Organization/Individual Experience spreadsheet.

**Special Consideration**

Special consideration will be given to small, disadvantaged, minority, or women-owned businesses. Please indicate if this applies to you:

[ ] Yes     [ ] No

**References**

Please list 2 references for CDTA/ similar work you have completed in the past 18 months.

|  |  |
| --- | --- |
| **Reference Name** |  |
| **Organization** |  |
| **Phone Number** |  |
| **E-mail Address** |  |
| **Brief Description of Work Completed** |  |

|  |  |
| --- | --- |
| **Reference Name** |  |
| **Organization** |  |
| **Phone Number** |  |
| **E-mail Address** |  |
| **Brief Description of Work Completed** |  |