

**ATTACHMENT A1  
INDIANA VETERAN OWNED SMALL BUSINESS RFP SUBCONTRACTOR  
COMMITMENT FORM**

In accordance with Section 1.22 of RFP 21-66986, the respondent is expected to submit with its proposal an Indiana Veteran Owned Small Business (IVOSB) RFP Subcontractor Commitment Form. The Form must show that there are, participating in the proposed contract, Indiana Veteran Owned Small Business(es) listed in the “VETBIZ” registry, or listed on the IDOA Directory of Certified Firms that conform to the IVOSB rules as laid out at <https://www.in.gov/idoa/mwbe/indiana-veteran-business-program/ivosb-faqs/>.

If participation is met through use of vendors who supply products and/or services directly to the Respondent, the Respondent must provide a description of products and/or services provided that are directly related to this proposal and the cost of direct supplies for this proposal. Respondents must complete the Subcontractor Commitment Form in its entirety. The amount entered in “**TOTAL BID AMOUNT**” should match the amount entered in the Attachment D, Cost Proposal Template.

If the vendor responding to the RFP is an IVOSB certified entity, the letter confirming same should be submitted with their response. IDOA will verify the certification but will not check for it. Therefore the responding vendor has the responsibility to alert IDOA of their certification. The IVOSB respondent will receive the total points for the IVOSB evaluation criteria per section 3.2.7. Additional ISVOB subcontractors must be included if the IVOSB respondent is seeking the additional bonus point.

The IVOSB respondent must list their **company contact information only** on the IVOSB Subcontractor Commitment Form. Failure to address these goals may impact the evaluation of your Proposal. The Department reserves the right to verify all information included on the IVOSB Subcontractor Commitment Form.

**Prime Contractors must ensure that the proposed IVOSB subcontractors meet the following criteria:**

- Must be listed on Federal Center for Veterans Business Enterprise registry or listed on the IDOA Directory of Certified Firms, **on or before** the proposal due date.
- Prime Contractor must include with their proposal the subcontractor’s veteran business Certification Letter provided by either IDOA or Federal Govt. (VA OSDDBU), to show current status of certification.
- Each firm may only serve as one classification – MBE, WBE (see Section 1.21) or IVOSB.
- IVOSB must have a Bidder ID (see section 2.3.7 - Department of Administration, Procurement Division)
- A Prime Contractor who is an IVOSB **can** count their own workforce or companies to meet this requirement.
- **Must serve a Valuable Scope Contribution (VSC). The firm must serve a value-added purpose on the engagement, as confirmed by the State.**
- Must provide goods or service only in the industry area for which it is certified as listed in the federal registry (<https://www.vip.vetbiz.va.gov/>) or IDOA Certified Firm directories <https://www.in.gov/idoa/mwbe/indiana-veteran-business-program/ivosb-faqs/>.
- Must be used to provide the goods or services specific to the contract.

**INDIANA VETERAN OWNED SMALL BUSINESS RFP SUBCONTRACTOR LETTER OF COMMITMENT**

A signed letter(s), on company letterhead, from the IVOSB must accompany the IVOSB Subcontractor Commitment Form. Each letter shall state and will serve as acknowledgement from the IVOSB of its subcontract amount, a description of products and/or services to be provided on this project, and approximate date the subcontractor will perform work on this contract. The State reserves the right to deny evaluation points if the letter(s) is not attached. The State may deny evaluation points if the letter(s) is not attached, not on company letterhead, not signed and/or does not reference and match the subcontract amount, subcontract amount as a percentage of the “**TOTAL BID AMOUNT**” and the anticipated period that the Subcontractor will perform work for this solicitation.

By submission of the Proposal, the Respondent acknowledges and agrees to be bound by the policies and processes involving the State’s IVOSB Program. Questions involving the regulations governing the IVOSB Subcontractor Commitment Form should be directed to: [indianaveteranspreference@idoa.in.gov](mailto:indianaveteranspreference@idoa.in.gov).

# STATE OF INDIANA IVOSB SUBCONTRACTOR COMMITMENT FORM

RFP#: 21-66986


DUE DATE: April 9, 2021

TOTAL BID AMOUNT: 234,618

<b>Company Name:</b> Indy Data Partners, Inc.	<b>Contact Person:</b> Angie Gleim		
<b>Address:</b> 12125 E.65 <sup>th</sup> Street, #36727 Indianapolis, IN 46236	<b>E-mail:</b> Angie.Gleim@IndyDataPartners.com		
<b>Sub-Contract Amount:</b> 11,100 (based on 148 hours in project plan)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Telephone Number:</b> ( 317 ) 713-4040</td> <td style="width: 50%;"><b>Fax Number:</b> ( 317 ) 824-0394</td> </tr> </table>	<b>Telephone Number:</b> ( 317 ) 713-4040	<b>Fax Number:</b> ( 317 ) 824-0394
<b>Telephone Number:</b> ( 317 ) 713-4040	<b>Fax Number:</b> ( 317 ) 824-0394		
<b>Sub-Contract Percentage of Total Bid (Use two decimal places):</b>  4.73%	<b>Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u></b> Utilizing data import and translation tools, Indy Data Partners will assist in the migration of data from IDEM's old system to the new system. Our services will be provided in parallel to the overall services provided by Agilaire, allowing the team to meet a replacement schedule of approximately 50 sites within the scheduled timeframe.		
<b>Provide approximate dates when Sub-Contractor will perform on this project:</b> August through November 2021			

<b>Company Name:</b>	<b>Contact Person:</b>		
<b>Address:</b>	<b>E-mail:</b>		
<b>Sub-Contract Amount:</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"><b>Telephone Number:</b> (   )</td> <td style="width: 50%;"><b>Fax Number:</b> (   )</td> </tr> </table>	<b>Telephone Number:</b> (   )	<b>Fax Number:</b> (   )
<b>Telephone Number:</b> (   )	<b>Fax Number:</b> (   )		
<b>Sub-Contract Percentage of Total Bid (Use two decimal places):</b>	<b>Describe service/product to be provided and <u>how this is a Valuable Scope Contribution of the Contract:</u></b>		
<b>Provide approximate dates when Sub-Contractor will perform on this project:</b>			

**Agilaire LLC**  
 Respondent Firm  
 2904-B Tazewell Pike, Suite A  
 Address  
 Knoxville, TN 37918  
 City/State/Zip Code  
 Steve Drevik  
 Representative  
 April 1, 2021  
 Date

865-927-9440 x104  
 Telephone Number  
 865-927-9552  
 Fax Number  
 sdrevik@agilaire.com  
 Email Address  
  
 Authorizing Signature  
 Steve Drevik, President  
 Printed Name and Title

☐ Please check if additional forms are attached.

Page \_\_\_\_\_ of \_\_\_\_\_

**FORM MUST BE COMPLETED IN ITS ENTIRETY WITH COMPLETED LETTERS OF COMMITMENT.**