



Kentucky Transportation Cabinet
Division of Construction
SUBCONTRACT REQUEST

TC 63-35
07/2024
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CONT_ID _____

SUBCONTRACT NO: _____ Tier Y/N _____

TO: _____
Matthew P. Simpson, P.E.
Director, Division of Construction

FROM: _____
Prime Contractor KYTC Vendor Number

SUBJECT: _____
County Fed/State Project Number

I hereby request to subcontract a portion of the subject project to:

_____ KYTC Vendor Number

The amount to be subcontracted by this request is \$ _____ or _____ of the
(Original contract amount or subcontract amount if Tier request)

I have previously subcontracted as follows:

NAME OF SUBCONTRACTOR	AMOUNT	PERCENT
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The total amount to be subcontracted including this request is \$ _____ or _____ of the
(original contract) or (subcontract) amount.

This subcontractor has been furnished a copy of Appendix B of 49 CFR Part 29 and advised to include the Certification in all lower tier covered transactions and in all solicitations for lower tier transactions (Federal Aid Contracts only).

The proposed subcontractor is on the Department's list of qualified contractors to perform work requested and a copy of current insurance coverage will be available at the prime contractor's office before the subcontractor begins work on project.

Prime Contractor

Date

