

**REFERRAL OF SMALL BUSINESS FOR
CERTIFICATE OF COMPETENCY (CoC) CONSIDERATION**

TO: U.S. Small Business Administration(SBA) Region:	FROM (Activity Name and Address) :
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The Procurement Contracting Officer (PCO) on this acquisition has determined the small business concern listed below to be nonresponsible. It is requested that this case be processed in accordance with FAR 19.602, and that we be advised if the firm files for a CoC. If your consideration results in a decision to issue a CoC, we request that we be furnished a brief written statement citing the SBA's proposed action. Please advise the Associate Director of Small Business of your decision within 15 business days of receipt of this referral. Award is being withheld during this period pending receipt of your response. Advance telephone notice of intent to issue a CoC to the PCO is requested. The PCO has also determined the small business concern listed below to be ineligible as a manufacturer or regular dealer as defined by the Walsh-Healey Public Contracts Act and in accordance with the requirements of FAR 22.608-2(f)(2), does hereby notify the SBA of this and request that the SBA render a determination. Award is being withheld during this period pending receipt of your response or final determination from the Secretary of Labor. If your determination is negative and the case is forwarded to the Secretary of Labor for final disposition, we request that you furnish us a brief statement citing the SBA's proposed action. Advance telephone notice to the PCO of intent to forward the case to the Secretary of Labor is requested. All correspondence should include reference to solicitation number, purchase request number, and buyer name.

1. SIGNATURE OF ASSOCIATE DIRECTOR OF SMALL BUSINESS		2. DATE
3. BUYER	4. OFFICE SYMBOL	5. TELEPHONE NUMBER
6. CONTRACTING OFFICER	7. OFFICE SYMBOL	8. TELEPHONE NUMBER
9. SMALL BUSINESS SPECIALIST	10. OFFICE SYMBOL	11. TELEPHONE NUMBER

12. DETERMINATION OF NONRESPONSIBILITY BASED ON UNSATISFACTORY <input type="checkbox"/> CREDIT <input type="checkbox"/> CAPACITY <input type="checkbox"/> PAST PERFORMANCE <input type="checkbox"/> OTHER:	13. DETERMINATION OF ELIGIBILITY BASED ON <input type="checkbox"/> PREAWARD SURVEY <input type="checkbox"/> CONTRACTOR DOES NOT CERTIFY TO WALSH-HEALEY ELIGIBILITY <input type="checkbox"/> OTHER:
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14. FIRM a. NAME OF FIRM b. ADDRESS c. CAGE CODE	d. PLANT LOCATION(S) (if different from offeror's address)
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15. OFFEROR		
a. NAME OF OFFEROR	b. TITLE	c. TELEPHONE NUMBER

16. DOLLAR VALUE	17. QUANTITY	18. ITEM NOUN
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19. NOMENCLATURE (NSN)	20. SOLICITATION NUMBER	21. PURCHASE REQUEST NUMBER
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22. SPECIFICATION OR PART NUMBER	23. TYPE OF BID <input type="checkbox"/> SEALED BID <input type="checkbox"/> NEGOTIATED <input type="checkbox"/> ORAL QUOTE <input type="checkbox"/> WRITTEN QUOTE <input type="checkbox"/> SMALL PURCHASE
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24. SET-ASIDE <input type="checkbox"/> SMALL <input type="checkbox"/> LSA <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> NOT SET-ASIDE % SET-ASIDE	25. NAME OF NEXT LOW OFFEROR	26. NEXT LOW OFFEROR IS <input type="checkbox"/> SDB <input type="checkbox"/> LSA <input type="checkbox"/> SMALL <input type="checkbox"/> LARGE	27. DOLLAR VALUE
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28. SET-ASIDE <input type="checkbox"/> SOLICITATION <input type="checkbox"/> PREAWARD <input type="checkbox"/> DETERMINATION OF NONRESPONSIBILITY <input type="checkbox"/> DRAWING <input type="checkbox"/> OTHER: <input type="checkbox"/> FINANCIAL <input type="checkbox"/> SPECIFICATION <input type="checkbox"/> DETERMINATION OF INELIGIBILITY <input type="checkbox"/> ABSTRACT
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29. REMARKS
