AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT

1. CONTRACT ID CODE	PAGE	OF PAGES
	1	40

2. AMENDMENT/MODIFICATION NO.	3. EFFECTIVE DATE	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. *(If applicable)*
0001	06/18/2026		

6. ISSUED BY CODE 51

Gallup Indian Medical Center
Acquisition Department
1808 W. Aztec Avenue
Gallup NM 87301

7. ADMINISTERED BY *(If other than Item 6)* CODE

8. NAME AND ADDRESS OF CONTRACTOR *(No., street, county, State and ZIP Code)*

CODE FACILITY CODE

(x) 9A. AMENDMENT OF SOLICITATION NO. 75H71026Q00166

x 9B. DATED *(SEE ITEM 11)* 05/20/2026

10A. MODIFICATION OF CONTRACT/ORDER NO.

10B. DATED *(SEE ITEM 13)*

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☒ The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended, ☒ is not extended.
Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended , by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted ; or (c) By separate letter or electronic communication which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted , such change may be made by letter or electronic communication, provided each letter or electronic communication makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA *(If required)*

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE

A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: *(Specify authority)* THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.

B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES *(such as changes in paying office, appropriation data, etc.)* SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).

C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:

D. OTHER *(Specify type of modification and authority)*

E. IMPORTANT: Contractor ☐ is not ☐ is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION *(Organized by UCF section headings, including solicitation/contract subject matter where feasible.)*

This is a Small Business (SB) set-aside

The new deadline is June 29, 2026 at 10:00 a.m. MDT.

This contract is subject to the electronic payment process by the Department of Treasury. All invoices complying to the requirements at 52.212-4(g) must be submitted through www.ipp.gov For additional information, refer to the incorporated clause at 352.232-71 Electronic Submission of Payment Requests (APR 2026)(DEVIATION).

If the Government's and Contractor's terms and conditions are in conflict, the Government's terms and conditions will prevail.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9 A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER *(Type or print)*		16A. NAME AND TITLE OF CONTRACTING OFFICER *(Type or print)*	
		JERLYN R. BEGAY	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA	16C. DATE SIGNED
(Signature of person authorized to sign)		*(Signature of Contracting Officer)*	

NAME OF OFFEROR OR CONTRACTOR

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	FOB: Destination Period of Performance: 07/01/2026 to 09/30/2026				

SECTION B – CONTINUATION OF SF-1449

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SECTION C – CONTRACT CLAUSES

52.212-4	CONTRACT TERMS AND CONDITIONS – COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES	NOV 2025 (DEVIATION)

The following Federal Acquisition Regulation clauses also apply:

☐	52.203-3	GRATUITIES	APR 1984
☐	52.203-6	RESTRICTIONS ON SUBCONTRACTOR SALES TO THE GOVERNMENT Alt I	NOV 2021
☐	52.203-12	LIMITATION OF PAYMENTS TO INFLUENCE CERTAIN FEDERAL TRANSACTIONS	JUN 2020
☐	52.203-13	CONTRACTOR CODE OF BUSINESS ETHICS AND CONDUCT	NOV 2021
☐	52.203-16	PREVENTING PERSONAL CONFLICTS OF INTEREST	JUN 2020
☒	52.203-17	CONTRACTOR EMPLOYEE WHISTLEBLOWER RIGHTS	NOV 2023
☒	52.203-19	PROHIBITION ON REQUIRING CERTAIN INTERNAL CONFIDENTIALITY AGREEMENTS OR STATEMENTS	JAN 2017
☐	52.204-9	PERSONAL IDENTITY VERIFICATION OF CONTRACTOR PERSONNEL	JAN 2011
☒	52.204-13	SYSTEM FOR AWARD MANAGEMENT MAINTENANCE	NOV 2025 (DEVIATION)
☐	52.204-14	SERVICE CONTRACT REPORTING REQUIREMENTS	NOV 2025 (DEVIATION)
☐	52.204-15	SERVICE CONTRACT REPORTING REQUIREMENTS FOR INDEFINITE-DELIVERY CONTRACTS	NOV 2025 (DEVIATION)
☐	52.204-91	CONTRACTOR IDENTIFICATION	NOV 2025 (DEVIATION)
☐	52.209-6	PROTECTING THE GOVERNMENT'S INTEREST WHEN SUBCONTRACTING WITH CONTRACTORS DEBARRED, SUSPENDED, OR PROPOSED FOR DEBARMENT	NOV 2025 (DEVIATION)
☐	52.209-9	UPDATES OF PUBLICLY AVAILABLE INFORMATION REGARDING RESPONSIBILITY MATTERS	NOV 2025 (DEVIATION)
☒	52.209-10	PROHIBITION ON CONTRACTING WITH INVERTED DOMESTIC CORPORATIONS	NOV 2025 (DEVIATION)
☐	52.213-1	RESERVED	
☐	52.219-3	NOTICE OF HUBZONE SET-ASIDE OR SOLE-SOURCE AWARD	NOV 2025 (DEVIATION)
☒	52.219-6	NOTICE OF TOTAL SMALL BUSINESS SET-ASIDE	NOV 2025 (DEVIATION)
☐	52.219-6 Alt I	NOTICE OF TOTAL SMALL BUSINESS SET-ASIDE, WITH ALTERNATE I	NOV 2025 (DEVIATION)

☐	52.219-7	NOTICE OF PARTIAL SMALL BUSINESS SET-ASIDE	NOV 2020
☐	52.219-7 Alt I	NOTICE OF PARTIAL SMALL BUSINESS SET-ASIDE, WITH ALTERNATE I	MAR 2020
☐	52.219-8	UTILIZATION OF SMALL BUSINESS CONCERNS	NOV 2025 (DEVIATION)
☐	52.219-9	SMALL BUSINESS SUBCONTRACTING PLAN	NOV 2025 (DEVIATION)
☐	52.219-9 Alt I	SMALL BUSINESS SUBCONTRACTING PLAN, WITH ALTERNATE I	NOV 2025 (DEVIATION)
☐	52.219-9 Alt II	SMALL BUSINESS SUBCONTRACTING PLAN, WITH ALTERNATE II	NOV 2025 (DEVIATION)
☐	52.219-9 Alt III	SMALL BUSINESS SUBCONTRACTING PLAN, WITH ALTERNATE III	NOV 2025 (DEVIATION)
☐	52.219-9 Alt IV	SMALL BUSINESS SUBCONTRACTING PLAN, WITH ALTERNATE IV	NOV 2025 (DEVIATION)
☐	52.219-13	NOTICE OF SET-ASIDE OF ORDERS	MAR 2020
☐	52.219-13 Alt I	RESERVED	
☐	52.219-16	LIQUIDATED DAMAGES—SUBCONTRACTING PLAN	NOV 2025 (DEVIATION)
☐	52.219-27	NOTICE OF SET-ASIDE FOR, OR SOLE-SOURCE AWARD TO, SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS (SDVOSB) CONCERNS ELIGIBLE UNDER THE SDVOSB PROGRAM	NOV 2025 (DEVIATION)
☒	52.219-28	POSTAWARD SMALL BUSINESS PROGRAM REREPRESENTATION	NOV 2025 (DEVIATION)
☐	52.219-28 Alt I	POSTAWARD SMALL BUSINESS PROGRAM REREPRESENTATION, WITH ALTERNATE I	NOV 2025 (DEVIATION)
☐	52.219-29	NOTICE OF SET-ASIDE FOR, OR SOLE-SOURCE AWARD TO, ECONOMICALLY DISADVANTAGED WOMEN-OWNED SMALL BUSINESS CONCERNS	NOV 2025 (DEVIATION)
☐	52.219-30	NOTICE OF SET-ASIDE FOR, OR SOLE-SOURCE AWARD TO, WOMEN-OWNED SMALL BUSINESS CONCERNS ELIGIBLE UNDER THE WOMEN-OWNED SMALL BUSINESS PROGRAM	NOV 2025 (DEVIATION)
☐	52.219-33	NONMANUFACTURER RULE	NOV 2025 (DEVIATION)
☒	52.222-3	CONVICT LABOR	NOV 2025 (DEVIATION)
☒	52.222-19	CHILD LABOR—COOPERATION WITH AUTHORITIES AND REMEDIES	NOV 2025 (DEVIATION)
☐	52.222-35	EQUAL OPPORTUNITY FOR VETERANS	NOV 2025 (DEVIATION)
☐	52.222-36	EQUAL OPPORTUNITY FOR WORKERS WITH DISABILITIES	NOV 2025 (DEVIATION)
☐	52.222-36 ALT I	EQUAL OPPORTUNITY FOR WORKERS WITH DISABILITIES, WITH ALTERNATE I	JUL 2014
☐	52.222-37	EMPLOYMENT REPORTS ON VETERANS	NOV 2025 (DEVIATION)

☐	52.222-40	NOTIFICATION OF EMPLOYEE RIGHTS UNDER THE NATIONAL LABOR RELATIONS ACT	NOV 2025 (DEVIATION)
☐	52.222-41	SERVICE CONTRACT LABOR STANDARDS	NOV 2025 (DEVIATION)
☐	52.222-43	FAIR LABOR STANDARDS ACT AND SERVICE CONTRACT LABOR STANDARDS-PRICE ADJUSTMENT (MULTIPLE YEAR AND OPTION CONTRACTS)	NOV 2025 (DEVIATION)
☐	52.222-44	FAIR LABOR STANDARDS ACT AND SERVICE CONTRACT LABOR STANDARDS-PRICE ADJUSTMENT	NOV 2025 (DEVIATION)
☒	52.222-50	COMBATING TRAFFICKING IN PERSONS	NOV 2025 (DEVIATION)
☐	52.222-50 Alt I	COMBATING TRAFFICKING IN PERSONS	NOV 2025 (DEVIATION)
☐	52.222-51	EXEMPTION FROM APPLICATION OF THE SERVICE CONTRACT LABOR STANDARDS TO CONTRACTS FOR MAINTENANCE, CALIBRATION, OR REPAIR OF CERTAIN EQUIPMENT—REQUIREMENTS	NOV 2025 (DEVIATION)
☐	52.222-53	EXEMPTION FROM APPLICATION OF THE SERVICE CONTRACT LABOR STANDARDS TO CONTRACTS FOR CERTAIN SERVICES—REQUIREMENTS	NOV 2025 (DEVIATION)
☐	52.222-54	EMPLOYMENT ELIGIBILITY VERIFICATION	NOV 2025 (DEVIATION)
☐	52.222-55	MINIMUM WAGES FOR CONTRACTOR WORKERS UNDER EXECUTIVE ORDER 14026	NOV 2025 (DEVIATION)
☐	52.222-62	PAID SICK LEAVE UNDER EXECUTIVE ORDER 13706	NOV 2025 (DEVIATION)
☒	52.222-90	ADDRESSING DEI DISCIMINATION BY FEDERAL CONTRACTORS	APR 2026 (DEVIATION)
☐	52.223-2	REPORTING OF BIOBASED PRODUCTS UNDER SERVICE AND CONSTRUCTION CONTRACTS	NOV 2025 (DEVIATION)
☒	52.223-5	POLLUTION PREVENTION AND RIGHT-TO-KNOW INFORMATION	MAY 2024
☐	52.223-11	OZONE-DEPLETING SUBSTANCES	NOV 2025 (DEVIATION)
☐	52.223-12	MAINTENANCE, SERVICE, REPAIR, OR DISPOSAL OF REFRIGERATION EQUIPMENT AND AIR CONDITIONERS	NOV 2025 (DEVIATION)
☒	52.223-23	SUSTAINABLE PRODUCTS	NOV 2025 (DEVIATION)
☐	52.224-1	PRIVACY ACT NOTIFICATION	APR 1984
☐	52.224-2	PRIVACY ACT	APR 1984
☐	52.224-3	PRIVACY TRAINING	JAN 2017
☐	52.224-3 ALT I	PRIVACY TRAINING, WITH ALTERNATE I	JAN 2017
☒	52.225-1	BUY AMERICAN-SUPPLIES	NOV 2025 (DEVIATION)
☐	52.225-1 Alt I	BUY AMERICAN-SUPPLIES, WITH ALTERNATE I	OCT 2022

☐	52.225-3	BUY AMERICAN-FREE TRADE AGREEMENTS-ISRAELI TRADE ACT	NOV 2025 (DEVIATION)
	52.225-3 ALT I	RESERVED	
☐	52.225-3 Alt II	BUY AMERICAN-FREE TRADE AGREEMENTS-ISRAELI TRADE ACT, WITH ALTERNATE II	NOV 2025 (DEVIATION)
☐	52.225-3 Alt III	BUY AMERICAN-FREE TRADE AGREEMENTS-ISRAELI TRADE ACT, WITH ALTERNATE III	NOV 2025 (DEVIATION)
☐	52.225-3 Alt IV	BUY AMERICAN-FREE TRADE AGREEMENTS-ISRAELI TRADE ACT, WITH ALTERNATE IV	NOV 2025 (DEVIATION)
☐	52.225-5	TRADE AGREEMENTS	NOV 2023
☐	52.225-14	INCONSISTENCY BETWEEN ENGLISH VERSION AND TRANSLATION OF CONTRACT	FEB 2000
☐	52.225-19	CONTRACTOR PERSONNEL IN A DESIGNATED OPERATIONAL AREA OR SUPPORTING A DIPLOMATIC OR CONSULAR MISSION OUTSIDE THE UNITED STATES	MAY 2020
☐	52.225-26	CONTRACTORS PERFORMING PRIVATE SECURITY FUNCTIONS OUTSIDE THE UNITED STATES	OCT 2016
☐	52.226-1	UTILIZATION OF INDIAN ORGANIZATIONS AND INDIAN-OWNED ECONOMIC ENTERPRISES	NOV 2025 (DEVIATION)
☐	52.226-5	RESTRICTIONS ON SUBCONTRACTING OUTSIDE DISASTER OR EMERGENCY AREA	NOV 2025 (DEVIATION)
☐	52.226-6	PROMOTING EXCESS FOOD DONATION TO NONPROFIT ORGANIZATIONS	NOV 2025 (DEVIATION)
☒	52.226-8	ENCOURAGING CONTRACTOR POLICIES TO BAN TEXT MESSAGING WHILE DRIVING	MAY 2024
☐	52.229-12	TAX ON CERTAIN FOREIGN PROCUREMENTS	AUG 2025 (DEVIATION)
☐	52.232-18	AVAILABILITY OF FUNDS	APR 1984
☐	52.232-29	TERMS FOR FINANCING OF COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES	NOV 2021
☐	52.232-30	INSTALLMENT PAYMENTS OF COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES	NOV 2021
☒	52.232-33	PAYMENT BY ELECTRONIC FUNDS TRANSFER—SYSTEM FOR AWARD MANAGEMENT	OCT 2018
☐	52.232-34	PAYMENT BY ELECTRONIC FUNDS TRANSFER—OTHER THAN SYSTEM FOR AWARD MANAGEMENT	JUL 2013
☐	52.232-36	PAYMENT BY THIRD PARTY	NOV 2025 (DEVIATION)
☒	52.232-40	PROVIDING ACCELERATED PAYMENTS TO SMALL BUSINESS SUBCONTRACTORS	MAR 2023
☐	52.232-90	FAST PAYMENT PROCEDURE	NOV 2025 (DEVIATION)
☒	52.233-3	PROTEST AFTER AWARD	NOV 2025 (DEVIATION)
☒	52.233-4	APPLICABLE LAW FOR BREACH OF CONTRACT CLAIM	NOV 2025 (DEVIATION)

☒	52.237-2	PROTECTION OF GOVERNMENT BUILDING, EQUIPMENT, AND VEGETATION	APR 1984
☐	52.237-3	CONTINUITY OF SERVICES	JAN 1991
☒	52.240-91	SECURITY PROHIBITIONS AND EXCLUSIONS	NOV 2025 (DEVIATION)
☐	52.240-91 Alt I	SECURITY PROHIBITIONS AND EXCLUSIONS, WITH ALTERNATE I	NOV 2025 (DEVIATION)
☐	52.240-92	SECURITY REQUIREMENTS	NOV 2025 (DEVIATION)
☐	52.240-92 Alt II	SECURITY REQUIREMENTS WITH ALTERNATE II	NOV 2025 (DEVIATION)
☐	52.240-93	BASIC SAFEGUARDING OF COVERED CONTRACTOR INFORMATION SYSTEMS	NOV 2025 (DEVIATION)
☐	52.242-5	PAYMENTS TO SMAL BUSINESS SUBCONTRACTORS	JAN 2017
☐	52.242-13	BANKRUPTCY	JUL 1995
☐	52.244-2	SUBCONTRACTS	JUN 2020
☒	52.244-6	SUBCONTRACTS FOR COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES	NOV 2025 (DEVIATION)
☐	52.245-1	GOVERNMENT PROPERTY	SEP 2021
☐	52.245-2	GOVERNMENT PROPERTY INSTALLATION OPERATION SERVICES	APR 2012
☐	52.245-9	USE AND CHARGES	APR 2012
☐	52.247-64	PREFERENCE FOR PRIVATELY OWNED U.S.-FLAG COMMERCIAL VESSELS	NOV 2025 (DEVIATION)
☐	52.247-64 Alt I	PREFERENCE FOR PRIVATELY OWNED U.S.-FLAG COMMERCIAL VESSELS, WITH ALTERNATE I	APR 2003
☐	52.247-64 Alt II	PREFERENCE FOR PRIVATELY OWNED U.S.-FLAG COMMERCIAL VESSELS, WITH ALTERNATE II	NOV 2021

52.252-2	CLAUSES INCORPORATED BY REFERENCE	FEB 1998

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. Also, the full text of a clause may be accessed electronically at this/these address(es):

Revolutionary FAR Overhaul - FAR Overhaul - FAR Part Deviation Guidance | Acquisition.GOV

Federal Acquisition Regulation - https://www.acquisition.gov/browse/index/far

Department of Health and Human Services Acquisition Regulation – https://www.acquisition.gov/hhsar

(End of clause)

52.252-6	AUTHORIZED DEVIATIONS IN CLAUSES	NOV 2020

(a)The use in this solicitation or contract of any Federal Acquisition Regulation (48 CFR Chapter 1) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b)The use in this solicitation or contract of any Department of Health and Human Services (48 CFR Chapter 3) clause with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of clause)

The following Department of Health and Human Services Acquisition Regulation clauses also apply:

☐	352.203-70	ANTI-LOBBYING	DEC 2015
☐	352.208-70	PRINTING AND DUPLICATION	DEC 2015
☐	352.211-3	PAPERWORK REDUCTION ACT	DEC 2015
☐	352.219-71	MENTOR-PROTÉGÉ PROGRAM REPORTING REQUIREMENTS	JAN 2010
☐	352.223-70	SAFETY AND HEALTH	DEC 2015
☐	352.224-70	PRIVACY ACT	DEC 2015
☐	352.226-6	INDIAN ECONOMIC ENTERPRISE SUBCONTRACTING LIMITATIONS	MAR 2022
☐	352.227-70	PUBLICATIONS AND PUBLICITY	DEC 2015
☐	352.231-70	SALARY RATE LIMITATION	DEC 2015
☐	352.237-70	PRO-CHILDREN ACT	DEC 2015
☐	352.237-71	CRIME CONTROL ACT – REPORTING OF CHILD ABUSE	DEC 2015
☐	352.237-72	CRIME CONTROL ACT – REQUIREMENTS FOR BACKGROUND CHECKS	DEC 2015
☐	352.237-73	INDIAN CHILD PROTECTION AND FAMILY VIOLENCE ACT	DEC 2015

352.232-71	ELECTRONIC SUBMISSION OF PAYMENT REQUESTS	APR 2026 (DEVIATION)

(a) *Definitions*. As used in this clause –

Payment request means a bill, voucher, invoice, or request for contract financing payment with associated supporting documentation. The payment request must comply with the requirements in FAR 32.905(b) and the applicable payment clause included in this contract.

(b) *Submission instructions.* Except as provided in paragraph (c) of this clause, the Contractor must submit payment requests electronically using the Department of Treasury Invoice Processing Platform (IPP) or successor system. Information regarding IPP, including IPP Customer Support contact information, is available at www.ipp.gov or any successor site.

(c) *Alternate submission procedures.* The Contractor may submit payment requests using other than IPP only when the Contracting Officer authorizes alternate procedures in writing.

(d) *Submission of alternate payment procedures authorization.* If alternate payment procedures are authorized, the Contractor shall include a copy of the Contracting Officer's written authorization with each payment request.

(End of clause)

The following local Indian Health Service, Navajo Area terms also apply:

NAIHS-ACQ-09	UNAUTHORIZED COMMITMENTS	NOV 2025

(a) Definitions.

Contracting Officer means a person with the authority to enter into, administer, and/or terminate contracts and make related determination and findings.

Ratification means the act of approving an unauthorized commitment by an official who has the authority to do so.

Unauthorized Commitment (UAC) means an agreement that is not binding solely because the Government representative who made it lacked the authority to enter into that agreement on behalf of the Government.

(b) Policy.

The Government is not bound by agreements with, or contractual commitments made to, prospective contractors by individuals who do not have delegated contracting authority. Unauthorized commitments do not follow the appropriate process for the expenditure of Government funds. Consequently, the Government may not be able to ratify certain actions, putting a contractor at risk for taking direction from a Federal official other than the contracting officer (see FAR 1.403-2). Government employees responsible for unauthorized commitments are subject to disciplinary action. Contractors perform at their own risk when accepting direction from unauthorized officials. Failure to follow statutory and regulatory processes for the expenditure of Government funds is a very serious matter.

(c) Procedure.

Any agreement, modification, or change to a contractual agreement made by a government personnel who lack authority will be deemed an unauthorized commitment. The Government is not liable to the Contractor or under the terms of the contract, financially or otherwise – unless the unauthorized commitment successfully passes the ratification process.

The ratification process does not have any lead time, nor does the Government make any promise that an unauthorized commitment will be ratified and, therefore, the Contractor would be paid. The Contractor

proceeds at its own risk if any of the terms of the contract are altered, changed, or modified without the written concurrence by a Contracting Officer.

(End of Clause)

NAIHS-ACQ-19	REAL ID ACT	MAY 2025

In alignment with the Department of Homeland Security (DHS) and the Transportation Security Administration (TSA), the U.S. Department of Health and Human Services (HHS) will fully implement and enforce REAL ID Act requirements for all HHS facility access beginning May 7, 2025. All individuals entering HHS-owned, leased, or operated facilities must present a REAL ID-compliant credential or another federally approved form of identification. Below is the list of acceptable forms of ID.

- State-issued Enhanced Driver's License
- U.S. passport
- U.S. passport card
- DHS trusted traveler cards (Global Entry, NEXUS, SENTRI, FAST)
- U.S. Department of Defense ID, including IDs issued to dependents
- Permanent resident card
- Border crossing card
- An acceptable photo ID issued by a federally recognized Tribal Nation/Indian Tribe, including Enhanced Tribal Cards (ETCs)
- HSPD-12 PIV card
- Foreign government-issued passport
- Canadian provincial driver's license or Indian and Northern Affairs Canada card
- Transportation worker identification credential
- U.S. Citizenship and Immigration Services Employment Authorization Card (I-766)
- U.S. Merchant Mariner Credential
- Veteran Health Identification Card (VHIC)

(End of clause)

NAIHS-ACQ-20	PROTECTING FEDERAL EMPLOYEES AND THE PUBLIC FROM EXPOSURE TO TOBACCO SMOKE IN THE FEDERAL WORKPLACE	APR 2026

In accordance with Executive Order 13058 "Protecting Federal Employees and the Public from Exposure to Tobacco Smoke in the Federal Workplace," and the Assistant Secretary for Health memorandum "Prohibition of Tobacco Use in HHS Occupied Facilities," the use of tobacco products, in any form, is strictly prohibited at IHS-operated properties including, but not limited to:

1. All interior and exterior spaces of IHS-operated properties.
2. All HIS-operated spaces in multi-tenant buildings.
3. All Government vehicles regardless of their location.
4. Private vehicles while on IHS property.

The IHS continues to recognize the value and efficacy of patients' traditional beliefs and ceremonial practices. The use of tobacco products for ceremonial purposes is allowed in the designated traditional healing room, including any space designated for a ceremony, or in a patient's hospital room.

To the maximum extent practicable, Contractor must notify the Contracting Officer's Representative in advance of using tobacco products in a ceremony.

(End of Clause)

SECTION D – DOCUMENTS, EXHIBITS, ATTACHMENTS, ETC.

Attachment A – Statement of Work

Attachment B – Office Measurements

Attachment C – Pre-Construction Risk Assessment

Attachment A

Tohatchi Health Center

Scope of Work

Business Office Furniture

Scope of Work

The contractor shall provide all necessary labor, equipment and supplies to install workstations/furniture to rooms 156, 157 and 158.

Deliverables

1. New office furniture. All furniture to be wipeable and with micro-bacterial surfaces.
    a. Two U Shaped Desks with Hutch.
        i. Electric adjustable height desk.
        ii. Combo file with 2 box drawers, 1 file drawer and 1 lateral file drawer.
        111. Hutch with 2 silver framed glass doors.
    b. One Sit-to-Stand Full Casing Desk
        i. Electric adjustable height desk.
    c. One 4 Shelf Bookcase with Doors Covering Lower¾ of Unit.
    d. One 29 1/2 inch Height Laminate Wood Door Storage Cabinet
    e. One 2 Drawer Under Desk Mobile File Pedestal
    f. Two 2 Drawer Lateral File with Hutch
    g. One 42 inch Wide x 24 inch Depth Reversible Return
    h. One PL142 Half Leg
    i. One Under Desk Full Box/File Pedestal
    j. Two Big & Tall Dual Layer Air Grid Mesh Manager Chairs
    k. One High Back Multifunction Mesh Executive Office Chair
    l. All hardware to connect furniture to complete installation.
    m. Site visit to verify measurements, door locations, power and data outlets.

General Conditions

1. Codes and Standard. The Contractor shall adhere to all the following code and standards requirements for work performed.
    a. 2018 Edition NFPA 99
    b. Occupational Safety and Health Act (OSHA)- CFRA1926
2. Project Safety

    a. Contractor shall provide all worksite safety equipment.
    b. Housekeeping accomplished on a daily basis. Contractor will remove all debris and trash generated by this project to be disposed of properly at a state certified disposal site in accordance with national, state and local environmental regulations.
    c. Contractor shall be responsible for complete and strict compliance with Gallup Service Unit Facility policies, including safety policy.
    d. Pre-Construction Control Risk Assessment (PCRA) shall be approved and signed before any work starts.
    e. Contractor(s) shall sign in and out with Security room 101.
3. Product Specifications
    a. Office desks
4. Submittals
    a. Submittals of all products and materials. Provide in scanned PDF format.
5. Inspection
    a. The Government has the right to inspect all aspects of work performed.
    b. Final acceptance will be based on an acceptable final inspection.
6. Quality Assurance
    a. Only materials approved on product submittal are used. No substitution without prior approval by Contracting Officer.
    b. All new materials shall be installed per manufacturer's instructions.
    c. All work to be performed by a contractor specialized in the specific trade required on this project.
7. Execution
    a. All activities shall be coordinated with Tohatchi Health Center Facility Management staff to ensure there are no detrimental impact on the day-to-day operations of the clinic. Advance notification of 72 hours is required to properly coordinate issues and delays.
    b. Contractor is responsible for obtaining all appropriate signed forms and permits prior to starting any work.
    c. Contractor shall verify all existing site conditions and measurements prior to removal and installation.
    d. Facility staff will terminate electrical power to workstations and IT staff will provide data lines and jacks for the work stations.
8. Inspection

a. The government reserves the right to inspect all aspects of work performed, including hiring a third party inspector to verify proper installation and operation.
b. Contractor is required to demonstrate full and complete operation of all work performed.
c. Final acceptance will be based on an acceptable final inspection, including final verification testing of all materials and workmanship.

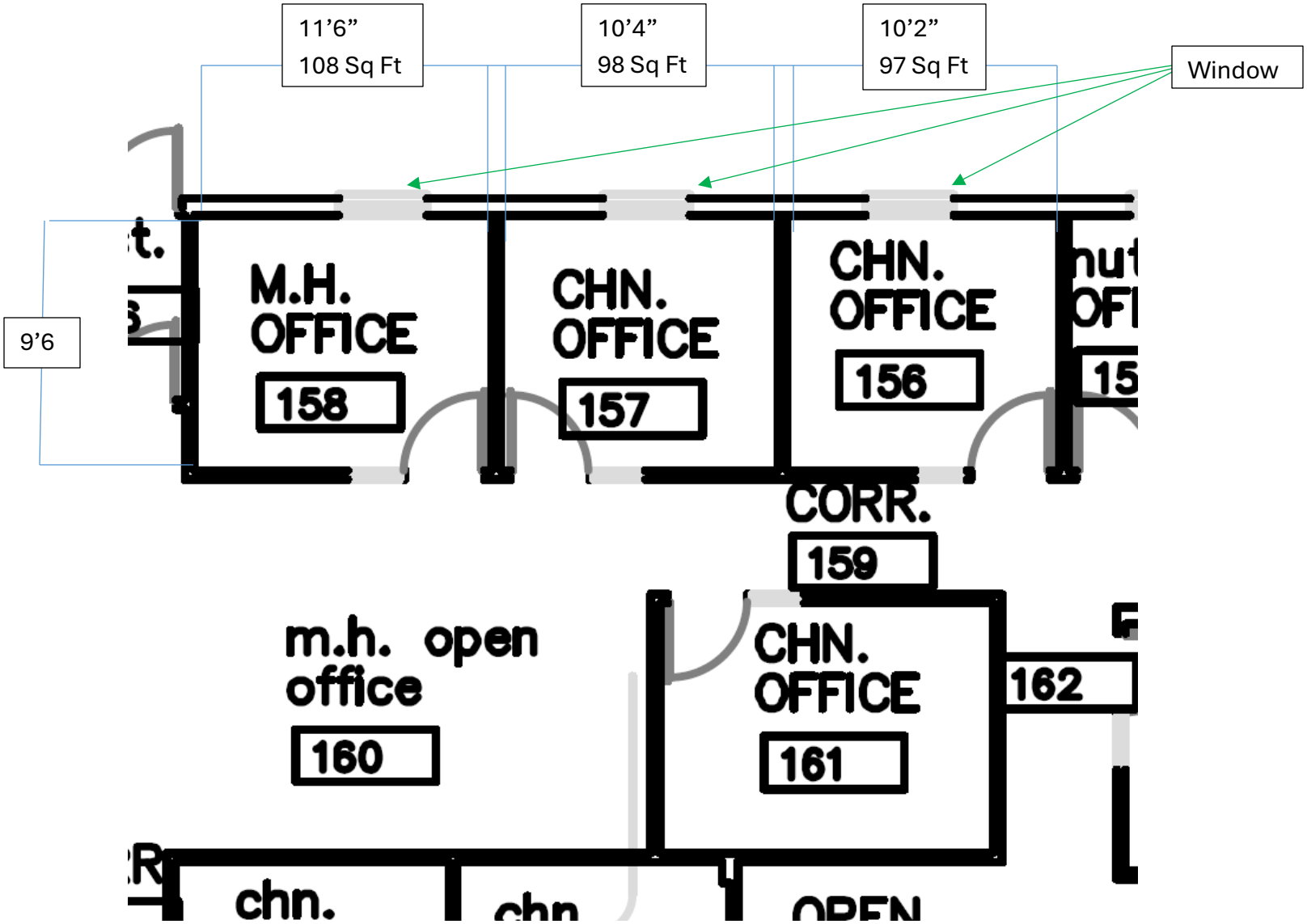
9. Project Schedule
    a. The contractor shall provide a detailed schedule indicating starting and completion dates of the project.
    b. Contractor shall work with local contact for job access and work time coordination.
    c. Contractor shall provide a coordinated schedule to Contract Officer Representative (COR) and Contract Specialist (CS).
    d. Hours of operation for the facility are 8:00 am - 4:30 pm, Monday-Friday (excluding federal holidays). Work outside these hours must be submitted three business days in advance in writing to the Contract Officer for approval.

10. Performance Period
    a. From date of award through three months to complete install of all furniture.

11. Final Payment
    a. Final payment will not be authorized until all work is complete, including punch list items and final inspection has been made.
    b. Close out documents shall include approved submittals and copies of warranty letters.

12. Warranty
    a. Contractor shall warranty all work for one year from date of acceptance.

Attachment B



Attachment C

Pre-Construction Risk Assessment – Cover Page

Project Title:		Project/Contract #:	
GIMC Coordinator:		PCRA Submit Date:	
Project Conducted by:	❑Fac. Mgmt. ❑I.T. ❑Telecom ❑Clin. Eng. ❑Contractor: _____	Proposed Start Date:	
Staff/Cont. Name:		Est. Duration:	
Supervisor Name:		Est. Complete Date:	
Telephone:		Date Project Completed:	
Email:			
Project Description: (include specific sites and tasks)			
ICRA Classification	Class I ❑ Class II ❑ Class III* ❑ Class IV* ❑		

Section 1. Initial Project Impact Review

Topic	*Will project negatively impact or involve…?*	No	Yes	Responses (If **YES** to any)
Fire Safety *Section 2A(1)*	Ceiling tile removal (less than 4 hours total)	❑	❑	Complete Above the Ceiling Access Permit (ACAP)
	Existing fire-stop; minor barrier penetrations	❑	❑	
Fire Safety *Section 2A(2)*	Fire detection/alarm/suppression systems	❑	❑	Complete Interim Life Safety Measure (ILSM) evaluation.
	Exit paths or fire/smoke barriers	❑	❑	
	Hot work practices	❑	❑	
	Extra fire load or flammable materials	❑	❑	
Utilities *Section 2B*	Water, sewer, electricity, steam, or HVAC (including outside air intakes)	❑	❑	Complete the Utility System Risk Assessment (USRA)
	Medical gases or vacuum	❑	❑	
	Call systems, telephones, or IT systems	❑	❑	
Environmental/ Occupational *Section 2C*	Lead or asbestos containing materials	❑	❑	Complete Env./Occ. Risk Assessment (EORA)
	Chemical hazards (i.e. mercury, volatile organics)	❑	❑	
	Exposure to infectious agents or mold	❑	❑	
Security *Section 2D*	Security systems (badge readers, cameras)	❑	❑	Complete Security Risk Assessment (SRA)
	Security processes (tours, foot/vehicle traffic)	❑	❑	
Infection Control *Section 2E*	Patient care areas or critical utilities	❑	❑	Complete an Infection Control Risk Assessment (ICRA)
	Moderate to high levels of dust, noise, vibration	❑	❑	
	More than one work shift	❑	❑	

Project Approval

Evaluator Signature & Title		Date:		*Required for: All*
Facility Manager Signature		Date:		*Required for: All*
Safety Officer Signature		Date:		*Required for: All*
Infection Preventionist Signature		Date:		*Required for: USRA and ICRA*
Supervisor (affected area)		Date:		*Required for: All*

Project Close-out

Facility Manager Signature		Date:		*Required for: All*
Safety Officer Signature		Date:		*Required for: All*
Infection Preventionist Signature		Date:		*Required for: ICRA-Class III & IV*
Supervisor (affected area)		Date:		*Required for: All*

Section 2A(1). Above Ceiling Permit

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

Topic	Issue for Evaluation	No	Yes	Responses (If **NO** to any)	Date Completed
GSU Training	1. Have all supervisors/workers been trained on fire safety requirements	❑	❑	• Schedule training with Facility Mgr or Safety Ofcr • Review policy and sign acknowledgement below.	
	2. Has supervisor read above ceiling access policy?	❑	❑		
Project Plans/ Drawings	1. Has a cable routing plan been provided to Facility Manager?	❑	❑	• Provide Facility Mgr with written plan or drawing. • If req'd by Facility Mgr, request and redline Life Safety Plan drawings	
	2. Is a redlined drawing/CAD over the Life Safety Plan needed? (GIMC use only)	❑	❑		
Project Details	1. Have descriptions/fire ratings for any materials to be installed been provided?	❑	❑	• Provide complete project details to Facility Manager; or utilize facility approved systems/materials.	
	2. Have additions of cables/wires to pre-existing pathways/sleeves been reviewed and found to comply with allowable loads?	❑	❑		
	3. Have descriptions of UL compliant firestop systems been provided; or will facility approved systems be used?	❑	❑		
	4. Have descriptions of approved hanger/ support systems been provided; or will facility approved systems be used?	❑	❑		
	5. Have product details for all firestop systems/materials been provided?	❑	❑		
Pre-work inspection	1. Has a pre-work inspection been conducted?	❑	❑	• Conduct pre-work inspection and notify Facility Manager of existing deficiencies.	
	2. Have any existing unprotected penetrations been identified?	❑	❑		
	3. Have existing items supported by sprinkler piping been identified?	❑	❑		
ILSM	1. Will any ceiling/tile grid, fire/smoke barrier, or firestop system be compromised for more than 4 hours or beyond the end of the work day, without a temporary code compliant protection system/ methodology?	❑	❑	• Conduct a full ILSM evaluation	

ACA Permit Approval

Facility Manager Signature		Date:	

ACA Permit Close-out

Facility Manager Signature		Date:	

ABOVE CEILING ACCESS PERMIT

PERMIT MUST BE PROMINENTLY DISPLAYED AT THE JOB SITE

NOTICE TO PERMIT HOLDER

READ CAREFULLY

Certain spaces (such as above ceiling tile grids or utility closets) are restricted to authorized personnel, and are controlled in GSU facilities.

Access to these spaces is a privilege, which may be denied for those who do not comply with the Above Ceiling Access Permit Policy. This applies to all staff, as well as vendors and contractor personnel.

This form and the preceding pages are the permit and must be displayed at all times while creating new, or accessing existing penetrations in smoke or fire barriers. It must also be displayed when working above ceiling tile grids, in utility closets or in any other space identified as CONTROLLED SPACE.

Persons found working in these spaces without a valid permit visible are in violation of the ABOVE CEILING ACCESS PERMIT POLICY, and may lose their access privileges. Chronic non-compliers will be disciplined.

SOME EXAMPLES OF POLICY VIOLATIONS:

- Accessing a controlled space without a permit
- Failure to hold and display a valid permit
- Failure to close out a permit
- Performing work outside the scope of a permit
- Providing false information to a permit issuer
- Falsifying data on a permit
- Allowing someone to work under the scope of a permit issued in another's name

All individuals performing work in a CONTROLLED SPACE shall read and be familiar with the ABOVE CEILING ACCESS PERMIT POLICY, copies of which can be obtained in Facility Management.

I have read and understand the ABOVE CEILING ACCESS PERMIT POLICY, and agree to comply with it.			
Staff/Contractor Signature		Date:	

Section 2A(2). Interim Life Safety Measure Risk Assessment

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

Topic	Issue for Evaluation	No	Yes	Responses (If **YES** to any)	Date Initiated
Exits	1. Any exit access or travel distances altered/excessive?	❑	❑	• Post signage for an alternate means of egress • Train staff on alternate means of egress* • Inspect exit daily for blockage or debris • Double fire drill frequency* • Increase hazard surveys*	
	2. Any exits used by anyone other than contractors obstructed?	❑	❑		
	3. Absence of two remote exits?	❑	❑		
Emergency Access	1. Access to emergency depts. or services obstructed?	❑	❑	• Designate an alternate means of access • Notify GIMC Security • Notify Gallup Fire Dept.	
	2. Access to construction area obstructed for emergency forces?	❑	❑		
Fire Protection	1. Fire alarm/detection (>25% in one zone) impaired >4 hrs?	❑	❑	• Submit fire watch request; ○ Or, use/monthly test temp. alarm/detection/ suppression system • Notify Gallup Fire Dept. • Double fire drill frequency* • Make affected staff aware • Increase hazard surveys*	
	2. Fire suppression impaired >10 hrs?	❑	❑		
Fire & Smoke Barriers	1. Major breaches of fire/smoke barriers (including vertical)?	❑	❑	• Construct 1-hr smoke tight temp. barrier (as needed) • Inspect exits daily • Double fire drill frequency • Train staff to compensate* • Increase hazard surveys*	
	2. Unprotected corridors or Haz. Areas?	❑	❑		
	3. Fire/smoke door maintenance/latching problem not immediately repairable?	❑	❑		
Addl. Firefighting Equipment	1. Fire load significantly increased above normal for area/building?	❑	❑	• Provide additional fire extinguishers in area	
Addl. Firefighting Training	1. Additional firefighting equipment differs from normal equipment?	❑	❑	• Train equipment staff/ contractors to use	
Combustible Load Levels	1. New/increased storage of flammable/combustible materials?	❑	❑	• Minimize debris accumulation • Increase hazard surveys	
	2. Flammable/combustible debris?	❑	❑		
Hazard Surveillance	1. Addl. hazards such as excavations, etc.?	❑	❑	• Initiate additional surveillance of area	
Facility-wide Training	1. Life safety deficiencies or hazards impaired throughout entire building?	❑	❑	• Train employees on ILSM • Notify Gallup Fire Dept.	

*-Need for response may be waived upon approval of Authority Having Jurisdiction based on scope and duration of project.

Describe any other life safety impacts, as well as specific actions to be implemented, for these and those above.

Evaluator signature & Title		Date:	
Facility Manager Signature		Date:	
Safety Officer Signature		Date:	
Staff/Contractor Signature		Date:	

Section 2A(3). Hot Work Permit

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

WELDING and BURNING PERMIT
(Work is not permitted unless this card is filled in and posted in work area)

Date_____/_____/_____Time _____ _____AM/PM

Building _____

Department _____Floor _____

Work to be done

_____

_____

Special Precautions _____

Fire Watch Required?_____ Yes _____No

The location where work is to be done has been examined by me, the necessary precautions have been taken (see checklist), and permission is granted for this work.

Permit Expires _____/_____/_____ Time: _____AM/PM

Signed _____
Individual responsible for work authorization (Facility Manager)

Time Started _____ Time Completed _____

FINAL CHECK
(Where Fire Watch is required)

Work area, and all adjacent area where sparks might have spread, were continuously inspected during the entire time cutting, welding, or other hot work was conducted, and 30 minutes after completion. In addition, the work area was checked four (4) hours after the cutting, welding, or other hot work was completed, and no fire conditions were noted.

Signed

Return this permit, after work is completed, to Facilities Manager or designee for filing.

Required Precautions CHECK LIST

- ☐ Fire protection system(s) in service (sprinklers, CO_2, foam).
- ☐ Cutting and welding equipment I good condition.
- ☐ Floor/ground clean (and wet down when necessary).
- ☐ Combustibles at least 35 feet from welding area.
- ☐ Flammable liquids and other hazards removed from area.
- ☐ All floor and wall openings within 35 feet covered.
- ☐ Non-combustible covers used to protect nearby combustibles and equipment.
- ☐ Containers, tanks, ducts, and other enclosures cleaned and purged of flammable vapors, liquids, dusts, and other hazardous materials.
- ☐ Fire extinguishers or small standpipe fire hose provided.
- ☐ All hazardous operations discontinued in area.
- ☐ Fire watch should be present during, and at least on-half hour after, welding burning has ceased.
- ☐ Location of nearest fire alarm box identified.

When possible, do work in a non-combustible area.

An individual should generally be assigned to watch for dangerous Sparks in the area and the floor below.

Section 2B. Utility System Risk Assessment

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

Will project affect?	Yes	No	Minimum Recommended Precautions: (If Yes)
Noise	❑	❑	• Review project and patient care schedules to identify least impactful times, or options to curtail or relocate patient care operations • Review how workers will access worksite and isolate from patient care as feasible • Review tools and processes to be used for reasonable, quieter alternatives; • Install sound attenuating barriers where feasible. Monitor as needed.
Vibration	❑	❑	• Review work schedules for project and work area to identify least impactful times • Review tools and processes to be used for reasonable alternatives • Assess potential impacts on sensitive patient care equipment/processes; Monitor as needed.
Water	❑	❑	• Submit ICRA and Utility Shutdown Request; Submit fire watch request per ILSM evaluation • Pre-position materials needed to respond to a water leak • Review need/options to isolate adjacent areas and equipment (i.e. lab analyzers, ice machines, HVAC appurtenances, etc.) • Flush and/or treat system if potential for residue or stagnation (See Legionella Plan)
Sewer	❑	❑	• Submit ICRA and Utility Shutdown Request • Pre-position materials needed to respond to leaks or spills, and to handle contaminated construction debris. • Review need/options to isolate adjacent areas and to curtail or alter patient care routines.
Electricity	❑	❑	• Review work schedules for project and work area to identify least impactful times • Review potential impacts to connected utility systems and electronic equipment • Submit Utility Shutdown Request
Steam	❑	❑	• Submit Utility Shutdown Request • Notify steam-based equipment users of potential impacts
Natural Gas	❑	❑	• Submit Utility Shutdown Request
HVAC	❑	❑	• Submit ICRA and Utility Shutdown Request • Review work schedules for project and work area to identify least impactful times • Identify alternate environmental condition options
Medical Gas & Vacuum	❑	❑	• Submit Utility Shutdown Request • Ensure work will be done in accordance with NFPA 99 or other relevant codes • Notify patient care staff of potential impacts to prompt clinical intervention planning • Ensure that post-completion testing is completed
IT Systems	❑	❑	• Collaboratively plan project between Facility Mgmt and IT Departments • Notify patient care staff to plan for clinical process modification as needed
Telephones	❑	❑	• Collaboratively plan project between Facility Mgmt and IT Departments • Notify patient care security staff to plan for emergency response modifications
Call systems	❑	❑	• Collaboratively plan project between Facility Mgmt and IT Departments • Notify patient care staff to plan for clinical process modification as needed • Plan for alternate notification means (standalone systems, bells, etc.)
Observation Cameras	❑	❑	• Collaboratively plan project between Facility Mgmt and IT Departments • Notify patient care staff to plan for clinical process modifications as needed

Describe any specific actions to be implemented:

Evaluator Signature & Title		Date:	
Facility Manager Signature		Date:	
Safety Officer Signature		Date:	
Staff/Contractor Signature		Date:	

Section 2C. Environmental and Occupational Risk Assessment

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

Will project involve:	Yes	No	Minimum Recommended Precautions: (If Yes)
Lead-based paint	❑	❑	• Review facility lead-based paint assessment and management plan • Ensure project staff are properly trained in precautions necessary to protect facility occupants and themselves • Establish plan to implement appropriate isolation, work practices, housekeeping, and waste handling • Establish plan for required air or surface sampling
Asbestos	❑	❑	• Review facility asbestos assessment and management plan • Ensure project staff are properly trained in precautions necessary to protect facility occupants and themselves • Establish plan to implement appropriate isolation, work practices, housekeeping, and waste handling • Establish plan for required air or surface sampling
Chemical hazards	❑	❑	• Review area or initial project plan to identify hazards inherent to work area • Compile and review listing of chemicals to be used; ensure Safety Data Sheets available • Review chemicals to be used for potential impacts on areas adjacent to project • Ensure project staff have receive Haz. Communications training including emergency response processes/responsibilities • Conduct Job Hazard Assessment and ensure appropriate personal protective equipment is available and used
Infectious Agents	❑	❑	• Review area or initial project plan to identify hazards inherent to work area • Ensure staff have received Bloodborne Pathogen Training including exposure response processes/responsibilities • Review need for medical screening/vaccination with employee health program • Conduct Job Hazard Assessment and ensure appropriate personal protective equipment is available and used
Mold	❑	❑	• Review area or initial project plan to identify hazards inherent to work area • Consider potential risk of water damage due to compromising wall, ceiling, roof • Ensure project staff are properly trained in precautions necessary to protect facility occupants and themselves • Establish plan to implement appropriate isolation, work practices, housekeeping, and waste handling

Describe any specific actions to be implemented:

Evaluator Signature & Title		Date:	
Facility Manager Signature		Date:	
Employee Health Signature (as needed)		Date:	
Safety Officer Signature		Date:	
Staff/Contractor Signature		Date:	

Section 2D. Security Risk Assessment

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

Will project affect:	Yes	No	Minimum Recommended Precautions: (If Yes)
Badge Readers	❑	❑	• Collaborative plan project with IT Department • Notify Security staff of impaired system to plan for alternative access control methods • Notify affected work area staff of alternative access control methods
Security Cameras	❑	❑	• Collaboratively plan project between Facility Mgmt and IT Departments • Notify security to plan for surveillance process modifications
Physical Barriers	❑	❑	• Review need for temporary physical barriers
Security Processes	❑	❑	• Review changes to area access with security to plan for alternate rounding paths • Review pedestrian/facility occupant foot traffic patterns to identify potential vulnerabilities • Review vehicle traffic patterns with security to ensure required access and to plan for traffic management as needed
Security sensitive areas	❑	❑	• Review project staff listing with security • Notify project staff of access control requirements • Provide identification as needed.
Emergency Response Procedures	❑	❑	• Notify external first responders/partners as appropriate • Provide training to staff regarding procedural changes • Relocate equipment and/or signage as needed • Review emergency response communications procedures/plan

Describe any specific actions to be implemented:

Evaluator Signature & Title		Date:	
Facility Manager Signature		Date:	
Security Supv. Signature		Date:	
Safety Officer Signature		Date:	
Staff/Contractor Signature		Date:	

Section 2E. Infection Control Risk Assessment

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration:	

Building:	Floor(s):	Department Name(s):	Room Number(s) & Description(s)

Project Description: (include specific sites and tasks)

Infection Control Risk Assessment
Matrix of Precautions for Construction & Renovation

Step 1: Using the following table, *identify* the Type of Construction Project Activity (Type A-D)

TYPE A	**Inspection and Non-Invasive Activities**. Includes, but is not limited to: ▪ removal of ceiling tiles for visual inspection only, e.g., limited to 1 tile per 50 square feet ▪ painting (but not sanding) ▪ wallcovering, electrical trim work, minor plumbing, and activities which do not generate dust or require cutting of walls or access to ceilings other than for visual inspection.
TYPE B	**Small scale, short duration activities which create minimal dust** Includes, but is not limited to: ▪ installation of telephone and computer cabling ▪ access to chase spaces ▪ cutting of walls or ceiling where dust migration can be controlled.
TYPE C	**Work that generates a moderate to high level of dust or requires demolition or removal of any fixed building components or assemblies** Includes, but is not limited to: ▪ sanding of walls for painting or wall covering ▪ removal of floorcoverings, ceiling tiles and casework ▪ new wall construction ▪ minor duct work or electrical work above ceilings ▪ major cabling activities ▪ any activity which cannot be completed within a single workshift.
TYPE D	**Major demolition and construction projects** Includes, but is not limited to: ▪ activities which require consecutive work shifts ▪ requires heavy demolition or removal of a complete cabling system ▪ new construction.

Step 1: _____

Step 2: Using the following table, ***identify*** **the Patient Risk Groups** that will be affected.

Low Risk	Medium Risk	Medium-High Risk	Highest Risk
▪ Office areas ▪ Nonpatient-care areas not otherwise specified (NOS)	▪ Cardiology ▪ Echocardiography ▪ Endoscopy ▪ Local Room ▪ Physical Therapy ▪ Radiology/MRI ▪ Respiratory Therapy ▪ Infusion Clinic ▪ Orthopedic Clinic	▪ Emergency Room ▪ Labor & Delivery ▪ Laboratories (specimen) ▪ Medical Units ▪ Newborn Nursery ▪ Outpatient Surgery ▪ Pediatrics ▪ Pharmacy ▪ Post Anesthesia Care Unit	▪ Any area caring for immunocompromised patients ▪ Central Sterile Supply ▪ Intensive Care Units ▪ Negative pressure isolation rooms ▪ Operating rooms including C-section rooms

If more than one risk group will be affected, select the higher risk group:

_____

Step 2: _____

Step 3: ***Match*** **the following**;

Patient Risk Group (***Low, Medium, High, Highest***) with the planned **…**
Construction Project Type (***A, B, C, D***) on the following matrix, to find the **…**
Class of Precautions (***I, II, III or IV***) or level of infection control activities required.

	Type of Construction			
Patient Risk Group	**Type A**	**Type B**	**Type C**	**Type D**
Low Risk Group	I	II	II	III/IV
Medium Risk Group	I	II	III	IV
Medium-High Risk Group	I	II	III/IV	IV
Highest Risk Group	I –III Consult ICP	III/IV	III/IV	IV

Class of IC Measures Class I ❑ Class II ❑ Class III* ❑ Class IV* ❑

* Note Infection Preventionist approval will be required when the Construction Activity and Risk Level indicate that Class III or Class IV control procedures are necessary.

Step 3: _____

Description of Required Infection Control Precautions by Class

	Before Construction	During Construction Project	Upon Completion of Project
CLASS I	1. Notify Department Supervisor	1. Execute work by methods to minimize raising dust from construction operations. 2. Immediately replace a ceiling tile displaced for visual inspection	1. Clean work area upon completion of task.
CLASS II	1. Notify Department Supervisor	1. Provide active means to prevent airborne dust from dispersing into atmosphere. 2. Water mist work surfaces to control dust while cutting. 3. Seal unused doors with duct tape. 4. Block off and seal air vents. 5. Place dust mat at entrance and exit of work area 6. Remove or isolate HVAC system in areas where work is being performed.	1. Wipe work surfaces with cleaner/disinfectant. 2. Contain construction waste before transport in tightly covered containers. 3. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 4. Upon completion, restore HVAC system where work was performed.
CLASS III	1. Contact Housekeeping Supervisor to schedule Post-work cleaning 2. Review ICRA with Department Supervisor(s)	1. Remove or Isolate HVAC system in area where work is being done to prevent contamination of duct system. 2. Complete all critical barriers i.e. sheetrock, plywood, plastic, to seal area from non-work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins. 3. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. 4. Contain construction waste before transport in tightly covered containers. 5. Cover transport receptacles or carts. Tape covering unless solid lid.	1. Do not remove barriers from work area until completed project is inspected by the owner's Safety Department and Infection Prevention & Control Department and thoroughly cleaned by the owner's Environmental Services Department. 2. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 3. Vacuum work area with HEPA filtered vacuums. 4. Wet mop area with cleaner/disinfectant. 5. Upon completion, restore HVAC system where work was performed.
CLASS IV	1. Contact Housekeeping Supervisor to schedule Post-work cleaning 2. Notify Tour Supervisor 3. Review ICRA with Department Supervisor(s)	1. Isolate HVAC system in area where work is being done to prevent contamination of duct system. 2. Complete all critical barriers i.e. sheetrock, plywood, plastic, to seal area from non-work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins. 3. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. 4. Seal holes, pipes, conduits, and punctures. 5. Construct anteroom and require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave work site. 6. All personnel entering work site are required to wear shoe covers. Shoe covers must be changed each time the worker exits the work area.	1. Do not remove barriers from work area until completed project is inspected by the owner's Safety Department and Infection Prevention & Control Department and thoroughly cleaned by the owner's Environmental Services Dept. 2. Remove barrier material carefully to minimize spreading of dirt and debris associated with construction. 3. Contain construction waste before transport in tightly covered containers. 4. Cover transport receptacles or carts. Tape covering unless solid lid. 5. Vacuum work area with HEPA filtered vacuums. 6. Wet mop area with cleaner/disinfectant. 7. Upon completion, restore HVAC system where work was performed.

Step 4. Identify the areas surrounding the project area, assessing potential impact

Adjacent Area Impacts: Identify the areas surrounding the project area, to assess potential impact						
	Below	Above	Lateral	Lateral	Behind	in Front
Adjacent Unit Name						
Patient Risk Group (per Table 1)						

Step 5. Identify specific site of activity e.g., patient rooms, medication room, etc.
Step 6. Identify containment measures, using prior assessment. What type of barriers? (E.g., solid wall barriers); Will HEPA filtration be required. Do plans allow for adequate number of isolation/negative airflow rooms? (Note: Renovation/construction area shall be isolated from the occupied areas during construction and shall be negative with respect to surrounding areas)
Step 7. Consider potential risk of water damage. Is there a risk due to compromising structural integrity? (e.g., wall, ceiling, roof)
Step 8. Work hours: Can or will the work be done during non-patient care hours?
Step 9. Do plans allow for adequate number of isolation/negative airflow rooms?
Step 10. Do the plans allow for the required number & type of handwashing sinks?
Step 11. Does the infection prevention & control staff agree with the minimum number of sinks for this project?
Step 12. Does the infection prevention & control staff agree with the plans relative to clean and soiled utility rooms?
Step 13. Plan to discuss the following containment issues with the project team. (E.g., traffic flow, housekeeping, debris removal [how and when])
***Appendix**: Identify and communicate the responsibility for project monitoring that includes infection prevention & control concerns and risks. The ICRA will be modified throughout the project. Revisions must be communicated to the Project Manager.*

Infection Control Construction Permit

	Permit No:
Location of Construction:	Project Start Date:
Project Coordinator:	Estimated Duration:
Contractor Performing Work	Permit Expiration Date:
Supervisor:	Telephone:

YES	NO	CONSTRUCTION ACTIVITY	YES	NO	INFECTION CONTROL RISK GROUP
		TYPE A: Inspection, non-invasive activity			GROUP 1: Low Risk
		TYPE B: Small scale, short duration, moderate to high levels			GROUP 2: Medium Risk
		TYPE C: Activity generates moderate to high levels of dust, requires greater 1 work shift for completion			GROUP 3: Medium/High Risk
		TYPE D: Major duration and construction activities Requiring consecutive work shifts			GROUP 4: Highest Risk

CLASS I	1. Execute work by methods to minimize raising dust from construction operations. 2. Immediately replace any ceiling tile displaced for visual inspection.	3. Minor Demolition for Remodeling
CLASS II	1. Provides active means to prevent air-borne dust from dispersing into atmosphere 2. Water mist work surfaces to control dust while cutting. 3. Seal unused doors with duct tape. 4. Block off and seal air vents. 5. Wipe surfaces with cleaner/disinfectant.	6. Contain construction waste before transport in tightly covered containers. 7. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 8. Place dust mat at entrance and exit of work area. 9. Isolate HVAC system in areas where work is being performed; restore when work completed.
CLASS III **Date** **Initial**	1. Obtain infection control permit before construction begins. 2. Isolate HVAC system in area where work is being done to prevent contamination of the duct system. 3. Complete all critical barriers or implement control cube method before construction begins. 4. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. 5. Do not remove barriers from work area until complete project is checked by Infection Prevention & Control and thoroughly cleaned by Environmental Services.	6. Vacuum work with HEPA filtered vacuums. 7. Wet mop with cleaner/disinfectant 8. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 9. Contain construction waste before transport in tightly covered containers. 10. Cover transport receptacles or carts. Tape covering. 11. Upon completion, restore HVAC system where work was performed.
CLASS IV **Date** **Initial**	1. Obtain infection control permit before construction begins. 2. Isolate HVAC system in area where work is being done to prevent contamination of duct system. 3. Complete all critical barriers or implement control cube method before construction begins. 4. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. 5. Seal holes, pipes, conduits, and punctures appropriately. 6. Construct anteroom and require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave the work site. 7. All personnel entering work site are required to wear shoe covers.	8. Do not remove barriers from work area until completed project is checked by Infection Prevention & Control and thoroughly cleaned by Environmental. Services. 9. Vacuum work area with HEPA filtered vacuums. 10. Wet mop with disinfectant. 11. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 12. Contain construction waste before transport in tightly covered containers. 13. Cover transport receptacles or carts. Tape covering. 14. Upon completion, restore HVAC system where work was performed.

Additional Requirements:

Date Initials	Exceptions/Additions to this permit Date.
Permit Request By:	Permit Authorized By:
Date:	Date:

****Post Completed & Signed ICRA at worksite.**

Section 2F: Project Revision Request

Project Title:		Project/Contract #:	
GIMC Coordinator:		Original PCRA Date:	
Project Conducted by:	❑Fac. Mgmt. ❑I.T. ❑Telecom ❑Clin. Eng. ❑Contractor: _____	Original Start Date:	
		Original Duration:	
Staff/Cont. Name:		Orig Complete Date	
Supervisor Name:		Actual Start Date:	
Telephone:		Revised Duration:	
Email:		Rev. Complete Date	

Changes to Project

Project Description: (include specific sites and tasks)	
ICRA Classification	Class I ❑ Class II ❑ Class III* ❑ Class IV* ❑

Reasons for Project Changes

Summary of Reasons:

New Areas Affected by Project:

Building:	Floor(s):	Department Name(s):	Room Number(s) & Description(s)

Changes to Initial Impact Assessment

Topic	*Will project revision affect the…?*	No	Yes	Responses (If **YES**)
Fire Safety Section 2A(1)	Above the Ceiling Access Permit (ACAP)	❑	❑	• Consult with Facility Manager
Fire Safety Section 2A(2)	Interim Life Safety Measure (ILSM) evaluation	❑	❑	• Consult with Facility Manager and Safety Officer
Utilities Section 2B	Utility Risk Assessment (URA)	❑	❑	• Consult with Facility Manager
Environmental/ Occupational Section 2C	Env./Occ. Risk Assessment (EORA)	❑	❑	• Consult with Safety Officer
Security Section 2D	Security Risk Assessment (SRA)	❑	❑	• Consult with Safety Officer
Infection Control Section 2E	Infection Control Risk Assessment (ICRA)	❑	❑	• Consult with Infection Preventionist

Project Revision Approval

Evaluator Signature & Title		Date:		*Required for: All*
Facility Manager Signature		Date:		*Required for: All*
Safety Officer Signature		Date:		*Required for: All*
Infection Prev Signature		Date:		*Required for: ICRA*

Section 3A. Fire Watch Request Form

Project Title:		Project/Contract #:	
GIMC Coordinator:		Fire Watch Start Date:	
Staff/Cont. Name:		Fire Watch Start Time:	
Supervisor Name:		Est. Complete Date:	
Telephone:		Date Project Completed:	
Email:			

Building:	Floor(s):	Department Name(s):	Room Number(s) & Description(s)

A written ILSM assessment is required on all construction projects, repairs, or other activities that will impair any part of the life safety features. Whenever the automatic fire alarm system is disabled for four (4) or more hours in a given 24-hour period, or whenever the automatic sprinkler system is disabled for ten (10) or more hours in a given 24-hour period, a Fire Watch shall be implemented in all areas affected. Project manager must send a completed copy of the ILSM assessment form along this request to the Facility Manager, Safety Officer, and Security Department Manager who will conduct the fire watch in the areas affected for the duration of impairment according to facility procedures. A fire watch log must be maintained to document each inspection.

The following elements must be included in all fire watch inspections:

1. Outside doors are closed and secured, and windows, fire doors are closed.
2. All waste, rags, paint residue, rubbish, and similar combustible items are removed from the building.
3. All remaining operable fire protection equipment is in place and not obstructed.
4. Ensure that all aisles are clear.
5. Confirm that all motors or machines not required to operate are turned off.
6. All unsecured offices and conference rooms are checked for unapproved smoking material that may have been carelessly discarded.
7. All unnecessary heat-producing devices are turned off in the impairment area
8. Ensure that flammable and combustible materials are properly stored in approved containers. (NOTE: Flammable compressed gas cylinders must be stored in a 1-hour fire resistance rated room.)
9. Ensure that sprinkler valves are in the open position. (NOTE: If sprinkler control valves are electronically supervised by the Automatic Fire Alarm System and are not impaired by this scope of work, then visual examination is not required.
10. Check for proper ventilation in the impaired area.
11. Ensure there are no leaks from the plumbing fixtures and piping

Individuals performing the Fire Watch will make clear precise entries on the Fire Watch Log, and immediately report any unsafe or unusual situations to the Safety Officer and Facility Manager, or their designees. At the conclusion of the Fire Watch, a copy of the Fire Watch Log must be forwarded to the Safety Officer and project file.

Fire Watch Approval

Requestor Signature & Title		Date:	
Facility Manager Signature		Date:	
Safety Officer Signature		Date:	
Security Supv. Signature		Date:	

Section 3B. Utility Shutdown Request

Project Title:		Project/Contract #:	
GIMC Coordinator:		Request submit date	
Staff/Cont. Name:			
Prime Contractor (if different)		Requested Shutdown Date:	
Supervisor Name:		Shutdown Time:	
Telephone:		Est. Duration:	
Email:			

NOTE: A separate utility shutdown request must be submitted for each separate work period during which the utility(ies) will be interrupted.

Utility Requested to be Shutdown	Yes	Comments
Water	❑	
Sewer	❑	
Electricity	❑	
Steam	❑	
Natural Gas	❑	
HVAC	❑	
Medical Gas & Vacuum	❑	
IT Systems	❑	
Telephones	❑	
Call systems	❑	
Observation Cameras	❑	

Evaluator Signature & Title		Date:	
Facility Manager Signature		Date:	
Utility System Manager		Date:	

Section 3C. Daily Construction Area Checklist

Project Title:		Project/Contract #:	
Staff/Cont. Name:		Start Date:	
Supervisor Name:		Estimated Duration	
Telephone:		Exp. Complete Date	

Building:	Floor(s):	Department Name(s):	Room Number(s) & Description(s)

Requirements	First Check			Second Check		
	Yes	No	N/A	Yes	No	N/A
1. Entrance Doors/ ICRA Barriers properly closed and sealed. Doors secured.	❑	❑	❑	❑	❑	❑
2. Enclosures free of penetrations						
3. Holes, pipes, conduits sealed at ICRA Barrier						
4. Air vents sealed (supply and return)						
5. HVAC system isolated						
6. Unused doors taped						
7. Windows closed						
8. HEPA filtration on and running						
9. HEPA filter log up-to-date						
10. HEPA vacuum and/or coveralls available						
11. Negative pressure monitor in place and running • Negative Pressure reading: _____						
12. Hot work permit obtained						
13. Exit signs installed and lighted						
14. Fire extinguishers in place and tag up-to-date						
15. All routes of egress clear of debris						
16. Construction signs in place						
17. Dust (sticky) mats in place and clean						
18. Routine cleaning completed						
19. Surrounding areas free of dust						
20. Debris removed daily						
21. Transport carts covered and wiped down						
22. Trash in appropriate containers						
23. All workers wearing ID badges (If no – provide #): _____						
24. FIRE WATCH IN EFFECT (note time complete)						
25. Compressed Gas Cylinders Secured						

Describe any deficiencies and specific actions taken to correct:					
Project Supervisor Signature – First Check		Date:		Time:	
Project Supervisor Signature – Second Check		Date:		Time:	

SECTION E – SOLICITATION PROVISIONS

52.212-1	INSTRUCTIONS TO OFFERORS – COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES	NOV 2025 (DEVIATION)

ADDENDUM TO 52.212-1 INSTRUCTIONS TO OFFERORS – COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES (NOV 2025)

Solicitation must include:

1. *Solicitation number*
2. *Company name/address/phone number*
3. *UEI number*
4. *Technical capability statement*
5. *Pricing*
6. *Delivery schedule*
7. *Acknowledgment of solicitation and/or amendments*
8. *Signature/date*

52.212-2	EVALUATION – COMMERCIAL PRODUCTS AND COMMERCIAL SERVICES	NOV 2025 (DEVIATION)

(a) *Evaluation factors.* The Government will award a contract resulting from this solicitation to the responsible Offeror whose offer conforming to the solicitation will be most advantageous to the Government, price and other factors considered. The following factors shall be used to evaluate offers:

1. *Technically meets Government's needs and capabilities*

2. *Price*

(b) *Options*. The Government will evaluate offers for award purposes by adding the total price for all options to the total price for the basic requirement. The Government may determine that an offer is unacceptable if the option prices are significantly unbalanced. Evaluation of options shall not obligate the Government to exercise the option(s).

(c) *Notice of award.* A written notice of award or acceptance of an offer, mailed or otherwise furnished to the successful offeror within the time for acceptance specified in the offer, shall result in a binding contract without further action by either party. Before the offer's specified expiration time, the Government may accept an offer (or part of an offer), whether or not there are negotiations after its receipt, unless a written notice of withdrawal is received before award.

(End of provision)

The following Federal Acquisition Regulations provisions incorporated by reference also apply:

☐	52.203-11	CERTIFICATION AND DISCLOSURE REGARDING PAYMENTS TO INFLUENCE CERTAIN FEDERAL TRANSACTIONS	SEP 2024
☒	52.203-18	PROHIBITION ON CONTRACTING WITH ENTITIES THAT REQUIRE CERTAIN INTERNAL CONFIDENTIALITY AGREEMENTS OR STATEMENTS-REPRESENTATION	JAN 2017
☒	52.204-7	SYSTEM FOR AWARD MANAGEMENT - REGISTRATION	NOV 2025 (DEVIATION)
☐	52.204-7 Alt I	SYSTEM FOR AWARD MANAGEMENT—REGISTRATION, WITH ALTERNATE I	NOV 2025 (DEVIATION)
☐	52.207-6	SOLICITATION OF OFFERS FROM SMALL BUSINESS CONCERNS AND SMALL BUSINESS TEAMING ARRANGEMENTS OR JOINT VENTURES (MULTIPLE-AWARD CONTRACTS)	AUG 2024
☐	52.209-12	CERTIFICATION REGARDING TAX MATTERS	OCT 2025
☐	52.216-31	TIME-AND-MATERIALS/LABOR-HOUR PROPOSAL REQUIREMENTS – COMMERCIAL ACQUISITION	NOV 2021
☐	52.219-4	NOTICE OF PRICE EVALUATION PREFERENCE FOR HUBZONE SMALL BUSINESS CONCERNS	NOV 2025 (DEVIATION)
☐	52.219-31	NOTICE OF SMALL BUSINESS RESERVE	MAR 2020
☒	52.222-18	CERTIFICATION REGARDING KNOWLEDGE OF CHILD LABOR FOR LISTED END PRODUCTS	FEB 2021
☐	52.222-48	EXEMPTION FROM APPLICATION OF THE SERVICE CONTRACT LABOR STANDARDS FOR MAINTENANCE, CALIBRATION, OR REPAIR OF CERTAIN EQUIPMENT–CERTIFICATION	MAY 2014
☐	52.222-52	EXEMPTION FROM APPLICATION OF THE SERVICE CONTRACT LABOR STANDARDS FOR CERTAIN SERVICES-CERTIFICATION	MAY 2014
☐	52.222-56	CERTIFICATION REGARDING TRAFFICKING IN PERSONS COMPLIANCE PLAN	OCT 2020
☐	52.223-1	BIOBASED PRODUCT CERTIFICATION	MAY 2024
☐	52.223-4	RECOVERED MATERIAL CERTIFICATION	MAY 2008
☐	52.229-11	TAX ON CERTAIN FOREIGN PROCUREMENTS—NOTICE AND REPRESENTATION	AUG 2025 (DEVIATION)
☒	52.237-1	SITE VISIT	APR 1984
☒	52.240-90	SECURITY PROHIBITIONS AND EXCLUSIONS REPRESENTATIONS AND CERTIFICATIONS	NOV 2025 (DEVIATION)

52.209-2	**PROHIBITION ON CONTRACTING WITH INVERTED DOMESTIC CORPORATIONS – REPRESENTATION**	**NOV 2025 (DEVIATION)**

(a) *Definitions*. As used in this clause—

Inverted domestic corporation means a foreign incorporated entity that meets the definition of an inverted domestic corporation under 6 U.S.C. 395(b), applied in accordance with the rules and definitions of 6 U.S.C. 395(c).

Subsidiary means an entity in which more than 50 percent of the entity is owned—
(1) Directly by a parent corporation; or
(2) Through another subsidiary of a parent corporation.

(b) Government agencies are not permitted to use appropriated (or otherwise made available) funds for contracts with either an inverted domestic corporation, or a subsidiary of an inverted domestic corporation, unless the exception at 9.108-3(b) applies or the requirement is waived in accordance with the procedures at 9.108-5.

(c) *Representation*. The Offeror represents that-
(1) It □ is, □ is not an inverted domestic corporation; and
(2) It □ is, □ is not a subsidiary of an inverted domestic corporation.

(End of provision)

52.209-11	REPRESENTATION BY CORPORATIONS REGARDING DELINQUENT TAX LIABILITY OR A FELONY CONVICTION UNDER ANY FEDERAL LAW	NOV 2025 (DEVIATION)

(a) The Government will not enter into a contract with any corporation that—

(1) Has any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability, where the awarding agency is aware of the unpaid tax liability, unless an agency has considered suspension or debarment of the corporation and made a determination that suspension or debarment is not necessary to protect the interests of the Government; or

(2) Was convicted of a felony criminal violation under any Federal law within the preceding 24 months, where the awarding agency is aware of the conviction, unless an agency has considered suspension or debarment of the corporation and made a determination that this action is not necessary to protect the interests of the Government.

(b) The Offeror represents that–
(1) It is □ is not □ a corporation that has any unpaid Federal tax liability that has been assessed, for which all judicial and administrative remedies have been exhausted or have lapsed, and that is not being paid in a timely manner pursuant to an agreement with the authority responsible for collecting the tax liability; and
(2) It is □ is not □ a corporation that was convicted of a felony criminal violation under a Federal law within the preceding 24 months.

(End of provision)

52.222-18	CERTIFICATION REGARDING KNOWLEDGE OF CHILD LABOR FOR LISTED END PRODUCTS	FEB 2021

(a) *Definition*.

Forced or indentured child labor means all work or service-

(1) Exacted from any person under the age of 18 under the menace of any penalty for its nonperformance and for which the worker does not offer himself voluntarily; or

(2) Performed by any person under the age of 18 pursuant to a contract the enforcement of which can be accomplished by process or penalties.

(b) *Listed end products*. The following end product(s) being acquired under this solicitation is (are) included in the List of Products Requiring Contractor Certification as to Forced or Indentured Child Labor, identified by their country of origin. There is a reasonable basis to believe that listed end products from the listed countries of origin may have been mined, produced, or manufactured by forced or indentured child labor.

Listed End Product	Listed Countries of Origin

(c) *Certification*. The Government will not make award to an offeror unless the offeror, by checking the appropriate block, certifies to either paragraph (c)(1) or paragraph (c)(2) of this provision.

☐ (1) The offeror will not supply any end product listed in paragraph (b) of this provision that was mined, produced, or manufactured in a corresponding country as listed for that end product.

☐ (2) The offeror may supply an end product listed in paragraph (b) of this provision that was mined, produced, or manufactured in the corresponding country as listed for that product. The offeror certifies that it has made a good faith effort to determine whether forced or indentured child labor was used to mine, produce, or manufacture such end product. On the basis of those efforts, the offeror certifies that it is not aware of any such use of child labor.

(End of provision)

52.225-2	**BUY AMERICAN CERTIFICATE**	**OCT 2022**

(a) (1) The Offeror certifies that each end product, except those listed in paragraph (b) of this provision, is a domestic end product and that each domestic end product listed in paragraph (c) of this provision contains a critical component.

(2) The Offeror shall list as foreign end products those end products manufactured in the United States that do not qualify as domestic end products. For those foreign end products that do not consist wholly or predominantly of iron or steel or a combination of both, the Offeror shall also indicate whether these foreign end products exceed 55 percent domestic content, except for those that are COTS items. If the percentage of the domestic content is unknown, select “no”.

(3) The Offeror shall separately list the line item numbers of domestic end products that contain a critical component (see FAR 25.105).

(4) The terms “commercially available off-the-shelf (COTS) item,” “critical component,” "domestic end product," "end product," and "foreign end product" are defined in the clause of this solicitation entitled "Buy American-Supplies."

(b)Foreign End Products:

Line Item No.	Country of Origin	Exceeds 55% domestic content (yes/no)

(b)[*List as necessary*]

(c) Domestic end products containing a critical component:

Line Item No. ___

[*List as necessary*]

(d) The Government will evaluate offers in accordance with the policies and procedures of part 25 of the Federal Acquisition Regulation.

(End of provision)

52.252-1	SOLICITATION PROVISIONS INCORPORATED BY REFERENCE	FEB 1998

This solicitation incorporates one or more solicitation provisions by reference, with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available. The offeror is cautioned that the listed provisions may include blocks that must be completed by the offeror and submitted with its quotation or offer. In lieu of submitting the full text of those provisions, the offeror may identify the provision by paragraph identifier and provide the appropriate information with its quotation or offer. Also, the full text of a solicitation provision may be accessed electronically at this/these address(es):

Revolutionary FAR Overhaul - FAR Overhaul - FAR Part Deviation Guidance | Acquisition.GOV

Federal Acquisition Regulation - https://www.acquisition.gov/browse/index/far

Department of Health and Human Services Acquisition Regulation – https://www.acquisition.gov/hhsar

(End of Provision)

52.252-5	AUTHORIZED DEVIATIONS IN PROVISIONS	NOV 2020

(a)The use in this solicitation of any Federal Acquisition Regulation (48 CFR Chapter 1) provision with an authorized deviation is indicated by the addition of "(DEVIATION)" after the date of the clause.

(b)The use in this solicitation of any Department of Health and Human Services (48 CFR Chapter 3) provision with an authorized deviation is indicated by the addition of "(DEVIATION)" after the name of the regulation.

(End of Provision)

The following Department of Health and Human Services Acquisition Regulation provisions also apply:

☐	352.219-70	MENTOR-PROTÉGÉ PROGRAM	DEC 2015
☒	352.223-71	INSTRUCTIONS TO OFFERORS – SUSTAINABLE ACQUISITION	DEC 2015
☐	352.225-5	NOTICE OF INDIAN ECONOMIC ENTERPRISE SET ASIDE	MAR 2022
☐	352.226-4	NOTICE OF INDIAN SMALL BUSINESS ECONOMIC ENTERPRISE SET ASIDE	MAR 2022
☐	352.226-7	INDIAN ECONOMIC ENTERPRISE REPRESENTATION	MAR 2022
☐	352.239-73	ELECTRONIC AND INFORMATION TECHNOLOGY ACCESSIBILITY NOTICE	DEC 2015