

**NIH BOARD OF CONTRACT AWARDS REVIEW CHECKLIST
ARCHITECT-ENGINEER ACQUISITIONS**

REVIEW TYPE	
<input type="checkbox"/> Presolicitation	<input type="checkbox"/> Preaward
<input type="checkbox"/> Postaward	
Office of Acquisition	
Awarding Office	
Presolicitation or Contract Number	
Contract Specialist	
Contracting Officer	
Total Price/Estimated Cost	
Period of Performance	
Brief Description of Items or Services Being Acquired	

SECTION A – Acquisition Planning/Evaluation Board Activities						
No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		Acquisition Planning				
A.1	Was adequate market research performed?	FAR 7.102; 10.001, 10.002; 12.101 (over \$100K); HHSAR 307.7105				
A.2	Does File contain an adequate Acquisition Plan (AP), addressing all FAR and HHSAR requirements?	FAR 7.105; HHSAR 307.71 (>\$500K – but see documentation requirements for <\$500K or other exceptions at 307.7101(c)) HHS AP template				
A.3	Was acquisition plan developed by entire team and has each participant been identified in the AP?	FAR 7.102(b) FAR 7.105				
A.4	Does AP discuss the rationale for the contract type selected and is the type appropriate for the requirement?	FAR 16.103, HHS AP template				
A.5	If noncompetitive, has a JOFOC been written and approved at the applicable level?	FAR 6.3, HHSAR 306.3, JOFOC Desk Guide				
A.6	Did the Government develop an independent government cost estimate and is it adequate?	FAR 7.105; 36.605, HHSAR 307.7103				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.7	Is there evidence of milestone planning/scheduling?	FAR 7.105(b)(20); HHSAR 307.7106				
A.8	If requirement is potentially appropriate for Safety Act protections, is there evidence in the file that the program office obtained pre-qualification notice?	FAR 50.205- 2(a)(3)				
A.9	If funded with disaster assistance funds and requested by DHS, does the acquisition include requirement to display any fraud hotline poster applicable to specific project?	FAR 3.1003(b)(2)				
A.10	Is there evidence of adequate funding or intent to commit funds?	HHSAR 307.7104				
A.11	Does the file contain evidence of project officer/COTR training, or waiver?	HHSAR 307.170; 307.170-1				
		Small Business				
A.12	If exceeding specified thresholds, was acquisition plan coordinated with small business specialist (HHS-653)? If applicable, were proper appeal procedures followed?	FAR 7.104(d); HHSAR 319.501				
A.13	If CO rejects the SBS' or SBA PCR's recommendation, has the justification been documented on the HHS Form 653 and, if SBA PCR recommendation has been rejected, has the SBA PCR been timely notified?	FAR 19.202-1, FAR 19.505, HHSAR 319.501				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.14	If this requirement was previously an SBSA, and its current size makes it unlikely for competition by SBs, or the requirement involves bundling, has coordination with SBA PCR taken place at least 30 days prior to release of RFP?	FAR 19.202-1(e)(1); 19.501(f) FAR 10.001				
A.15	If 8(a) contract is contemplated, has Offering Letter been sent to SBA?	FAR 19.804				
A.16	If 8(a) acquisition, does requirement meet the test for a single source 8(a) acquisition? If over the threshold, is the requirement set up as competitive?	FAR 19.805-1				
A.17	Has HUBZone set-aside been considered?	FAR 19.1305				
A.18	Has service-disabled veteran-owned small business (SDVOSB) set-aside been considered?	FAR 19.1405				
		Contract Type/Purchase Description/ SOW/SOO				
A.19	Do services correctly fall under the Brooks Act definition?	P.L. 95-582, FAR 36.601-4				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.20	Is Purchase description/statement of work, specification, etc. adequate, limiting use of “brand name or equal” unless justified, and following established purchase description order of preference?	FAR 11.002, 11.101(a)				
A.21	Do requirements documents achieve maximum practicable energy efficiency, as well as use of recovered material, environmentally preferable materials, energy- and water-efficient products, renewable energy technologies, products containing energy-efficient standby power devices, ENERGY STAR or FEMP products as required, and biobased products, as applicable?	FAR 11.101(b), FAR 23.2, 23.4, 23.7				
A.22	For facility design contracts, does SOW require that A-E specify in construction design specifications: use of maximum practicable amt. of recovered materials IAW perf. requirements, availability, price reasonableness, and cost-effectiveness, & as appropriate, does SOW also require A-E to consider energy & conservation, pollution prevention, & waste reduction to maximum extent practicable in developing construction design specs?	FAR 36.601-3(a)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.23	If both A&E and other services are required, are proper procedures followed?	FAR 36.601-36				
		Services				
A.24	Is there documentation that the services, if applicable, do not represent an inherently governmental function?	FAR 7.503; 11.106				
		Bundling				
A.25	Does AP address bundling, and if anticipated, was market research conducted to determine whether bundling was necessary and if so, was it justified and approved?	FAR 7.107, 19.202-1(e)(1)				
A.26	If bundled contract is anticipated, has proper notification to affected incumbent SB concerns taken place?	FAR 10.001(c)(1) & (2), 7.107(a); 19.202-1(e)(1)				
A.27	Has coordination of anticipated bundled contract taken place with HHS SBS and PCR?	FAR 19.202- 1(e)(1)(iii)				
		Sources				
A.28	Are sources selected in accordance with the procedures in FAR 36.6?	FAR 36.601-3, 36.602				
		Source Selection Planning				
A.29	If past performance is not to be evaluated, has CO provided rationale?	FAR 15.403(c)(3)(iii)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.30	Is A&E Evaluation Board composed of members who have experience in architecture, engineering, construction and Government acquisition?	FAR 36.602-2(a)				
		OCOI/COI				
A.31	If potential for OCOI/COI has been determined, did CO obtain assistance/advice of technical specialists and OGC in evaluating potential conflicts?	FAR 9.504(b)				
A.32	If significant potential for OCOI/COI, did CO provide written analysis, recommended course of action, draft RFP provision and clause language to HCA?	FAR 9.504(c)				
		D&Fs/JUSTIFICATIONS				
A.33	If submission of cost/pricing data >SAT but <\$650K is required, has approval been obtained?	FAR 15.403-4(a)				
A.34	If applicable, is there an approved D&F for use of a T&M or L/H contract?	FAR 16.601(c)				
A.35	If applicable, is there an approved D&F for use of a letter contract and has it been properly approved?	FAR 16.603-3(a), HHSAR 316.603-3, OAMP Policy Letter 2004-01				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.36	If applicable, has D&F been executed for evaluation or non-evaluation of options?	FAR 17.206				
A.37	If applicable, is there a properly approved D&F for use of a letter contract?	FAR 16.603, HHSAR 316.603-3, OAMP Policy Letter 2004-1				
A.38	If a particular source is excluded from competition to establish or maintain alternative source(s), has determination been made and approved?	FAR 6.202(b), HHSAR 306.202				
A.39	If contract action with Government employee or business concern substantially owned or controlled by one or more Government employees, did CO obtain exception to policy?	FAR 3.602, HHSAR 303.602				
A.40	If liquidated damages planned, are they adequately documented as to their need, and not considered a penalty?	FAR 11.5				
A.41	If acquisition meets definition of “emergency acquisition flexibilities” have available acquisition flexibilities or emergency flexibilities been considered, & if not, has action as written been justified as to rationale for not using these flexibilities?	FAR Part 18				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.42	If multiyear contracting is used, has HCA determination been obtained?	FAR 17.105-1				
A.43	If IDIQ >\$100M, is D&F approved by HCA in file?	FAR 16.504(c)(1)(ii) (D)				
		Synopsis				
A.44	Is there a FedBizOpps notice of intent to contract for A&E services, including specific selection criteria	FAR 5.205(d), 36.601-1				
A.45	Does synopsis include proper NAICS code and size standard?	FAR 19.303(a)				
A.46	Does synopsis allow at least a 30-day response time from date of publication of notice of intent to contract for A-E services?	FAR 5.203(d) (includes competitive 8(a) acquisitions)				
A.47	If non-competitive acquisition under a FAR Part 6 exception requiring advertising in FedBizOpps, has the synopsis been issued or is a draft synopsis in file?	FAR 6.3, 6.4, 6.5, HHSAR 306.2, 306.3, 306.5				
A.48	If CO believes that advance notice is not appropriate, has memo been sent to HHS requesting relief from synopsis and has it been approved?	HHSAR 305.202				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.49	If Safety Act is applicable, does pre-solicitation notice state that pre-qualification designation notice has been requested and either issued or denied by DHS? If designation notice has been issued, has it been incorporated into RFP?	FAR 50.205-2(b)				
		Evaluation Planning				
A.50	Is SF-330, A-E Qualifications form used for evaluation of potential A&E contractors?	FAR 36.702(b)				
A.51	Do selection criteria for potential A-E contractors consider professional qualifications necessary for satisfactory performance?	FAR 36.602-1(a)(1)				
A.52	Do selection criteria consider specialized experience and technical competence in type of work required, and where appropriate, experience in energy conservation, pollution prevention, waste reduction and use of recovered materials?	FAR 36.602-1(a)(2)				
A.53	Do selection criteria consider capacity to accomplish work in required time period?	FAR 36.602-1(a)(3)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.54	Do selection criteria consider past performance on contracts with Government agencies and private sector in terms of cost control, quality of work and compliance with performance schedules?	FAR 36.602-1(a)(4)				
A.55	Do selection criteria consider location in general geographical area of the project and knowledge of locality of the project (application of this criterion must leave an appropriate no. of qualified firms)?	FAR 36.602-1(a)(5)				
A.56	If using a design competition, has head of agency given approval?	FAR 36.602-1(b)				
A.57	Does RFP clearly state all factors and subfactors and their relative importance?	FAR 15.304(d), HHSAR 315.204-5(c)(1)				
		Misc. Issues				
A.58	If IDIQ, are multiple awards anticipated, or does the file document why a single award is contemplated?	FAR 16.504(c)				
A.59	If IDIQ, have procedures for ordering been included?	FAR 16.504				
A.60	If IDIQ, have minimum and maximum quantities been included?	FAR 16.504				
A.61	If IDIQ, has period of performance been included?	FAR 16.504				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.62	Is there evidence of an internal file review?	NIH Manual 6304.71				
A.63	If RFI or exchanges with industry, were they conducted properly?	FAR 15.201				
A.64	Does the RFP include requirement for contractor code of business ethics and conduct, and a hotline poster, as applicable?	FAR 3.10				
		Evaluation Board Functions				
A.65	If non-Government individuals sit on the Evaluation Board, has it been ensured that no firm is eligible for award during the period in which any of its principals or associates are participating members of the Evaluation Board?	FAR 36.602-2(b)				
A.66	Has the Evaluation Board reviewed current data files on eligible firms and responses to the FedBizOpps concerning the specific project?	FAR 36.602-3				
A.67	Has the Evaluation Board reviewed the firms in accordance with criteria specified?	FAR 36.602-1, 36.602-3(b)				
A.68	Has the Evaluation Board held discussions with at least 3 of the most highly qualified firms regarding concepts and the relative utility of alternative methods of furnishing the required services?	FAR 36.602-3(c)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.69	Has the Evaluation Board prepared a selection report to the designated selection authority detailing strengths/weaknesses for each evaluation criterion, discussions held, and recommending, in order of preference, at least 3 firms that are considered to be the most highly qualified to perform the required services?	FAR 36.602-3(d)				
A.70	Has the designated selection authority reviewed the recommendations and made the final selection in the form of a listing, in order of preference of the firms considered most highly qualified to perform the work?	FAR 36.602-4				
A.71	If the designated selected authority does not agree with the recommendations made by the Evaluation Board in the order of the Board's preference, has he/she provided a written explanation of the reason(s)?	FAR 36.602-4(b)				
A.72	Has the Evaluation Board been notified of the final selection?	FAR 36.602-4(d)				
		Misc. Issues				
A.73	Does the RFP include time of delivery or performance schedule?	FAR 11.4				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
A.74	If contract will involve safety/health issues, are proper clauses included?	HHSAR 323.7002				

SECTION B – SOLICITATION PHASE						
No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		RFP				
B.1	Does RFP include proper NAICS code and size standard?	FAR 19.303(a)				
B.2	If solicitation period consistent with FAR 5.203?	FAR 5.203 (includes competitive 8(a) acquisitions)				
B.3	Has the RFP informed the offeror that no construction contract may be awarded to the firm that designed the project, except as provided at FAR 36.209?	FAR 36.606(b)				
B.4	Does RFP include annual reps and certs	FAR 4.1202 and 52.204-7				
B.5	If electronic commerce was used to issue RFP and receive proposals, did RFP specify permitted electronic methods?	FAR 15.203(c)				
B.6	Are proper provisions/clauses included?	FAR 36.606, 36.609, 52.301 Matrix, NCI Contract Workform				
B.7	Does RFP require the A-E contractor to design the project so that construction costs will not exceed a contractually specified dollar limit (funding limitation), unless inapplicable?	FAR 36.209-1, 52.236.22				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
B.8	If oral RFP used, is there compliance with FAR?	FAR 15.203(f)				
B.9	If liquidated damages are used, is the clause proper?	FAR 11.503				
B.10	If letter contract used in a sole source acquisition, is there compliance with FAR requirements?	FAR 15.203(e)				
B.11	If potential conflict of interest is involved, does RFP include appropriate provisions?	FAR 9.504(b), 9.506(b)(1)-(3), NIH Manual 6009-1				
B.12	If contract will require contractor to have physical access to a federally-controlled facility or access to a federal information system, has FIPS PUB 201, associated OMB guidance, and requirement for inclusion of proper clause been followed?	FAR 4.13 and 52.204-9				
B.13	If hazardous materials required, has FAR 52.223-3 been included?	FAR 23.303(a)				
B.14	Are date, place and time for receipt of offers clearly stated on face page of RFP?	FAR 15.204-2				
B.15	Does the RFP include requirement for contractor code of business ethic and conduct, and a hotline poster display, as applicable?	FAR 3.10				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		RFP Amendments				
B.16	If oral notice of RFP amendment is used, is there compliance with FAR?	FAR 15.206(f)				
B.17	If RFP is amended, have amendments been sent and was closing date extended if necessary?	FAR 15.206				
		Evaluation				
B.18	Does RFP provide basis for award?	FAR 15.304				
		Options				
B.19	If options included, did CO justify and document in contract file?	FAR 17.205				
B.20	If options included, does the RFP provide the basis for evaluation?	FAR 17.203(b), HHSAR 317.201				
B.21	If options included, does the RFP limit the term to 10 years for services (except those subject to SCA – 5 years), and 5 years for supplies? (N/A for IT contracts and R&D contracts)	FAR 17.204(e), HHSAR 317.204(e)				
B.22	If options included, is provision at FAR 52.217-5 included?	FAR 17.202(a)				
		IDIQ				
B.23	Does the RFP specify the period of performance, the minimum and maximum quantities, procedures for fair opportunity, etc. necessary under IDIQ contracts?	FAR 16.504(a)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		Cost/Pricing Data – Non- FP				
B.24	Does RFP adhere to pricing policy and used order of precedence for determining type of cost or pricing data required? Did CO comply with prohibition on obtaining cost or pricing data or obtain waiver?	FAR 15.402, 15.403-1, 15.403-4(a)(2)				
B.25	If RFP will waive requirement for cost or pricing data, has HCA approved waiver?	FAR 15.403-1(c)(4)				
B.26	Does RFP include instructions for submission of cost or pricing data or other than cost or pricing data (information)?	FAR 15.403(5)(a)(1)-(4)				
B.27	If submission of cost or pricing data is required, does RFP state that such data can be submitted in offeror's own format?	FAR 15.403-5(b)(2) (unless CO determines a specific format is essential)				
B.28	If cost-reimbursement contract is used, is RFP appropriately structured as Level of Effort or Completion type and is proper language used?	FAR 16.3				
B.29	If RFP will require submission of cost or pricing data >100K but <\$650K, has HCA authorized CO to obtain the data?	FAR 15.403-4(a)(2)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		Misc. Issues				
B.30	Has OMB No. 0990-0115 been included on face page of RFP?	HHSAR 301.106(b)				
		Multiyear Contracting				
B.31	If multi-year contracting used, did RFP include all required factors to be considered in evaluation?	FAR 17.106-2				
B.32	If multi-year contracting used, did RFP include required clauses?	FAR 17.109				
B.33	If CO determined that RFP contained information that required additional controls to monitor access and distribution (e.g., technical data, specifications, maps, building designs, schedules, etc.), was information made available through the Federal Technical Data Solution (FedTeDS) unless exempt?	FAR 5.102(a)(4); 5.102(a)(5) (over \$25K)				
B.34	If FedTeDS was used, was it in conjunction with the GPE solicitation notice to meet synopsis and advertising requirements of FAR Part 5?	FAR 5.102(a)(4)				

SECTION C – RECEIPT, EVALUATION AND AWARD

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		Receipt				
C.1	Have proposals been received no later than time set for receipt of offers, and if not, are late proposals handled properly?	FAR 15.208, HHSAR 315.208				
C.2	Are proposal modifications, revisions, or withdrawals handled properly?	FAR 15.208, HHSAR 315.208				
C.3	If electronic proposals were permitted, were any unreadable electronic bids handled properly?	FAR 15.203(c)				
		Evaluation				
C.4	If option quantities or periods were solicited, was proper evaluation conducted?	FAR 17.206				
C.5	Do at least 50% of HHS evaluators have appropriate training?	HHSAR 307.170-2				
C.6	Was small business subcontracting evaluation accomplished properly?	FAR 15.305(a)(5)				
C.7	Is cost or price evaluation compliant?	FAR 15.305(a)(3), 15.404-1(a)-(c), HHSAR 315.305				
C.8	If option quantities or periods were solicited, was proper evaluation conducted?	FAR 17.206				
C.9	Are evaluators' certifications in file?	HHSAR 315.305(a)(3)(ii)(E)(2) and (3)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.10	Has Evaluation Board prepared a selection report recommending, in order of preference, at least three firms that are considered to be the most highly qualified to perform the required services? Does the report include a description of the discussions and evaluation conducted by the board to allow the selection authority to review the considerations upon which the recommendations are based?	FAR 36.602-3(d)				
C.11	If the firm listed as the most preferred is not the firm recommended as the most highly qualified by the evaluation board, has the selection authority provided for the contract file a written explanation of the reason for the preference?	FAR 36.603-4(b)				
		Negotiations				
C.12	Has the contracting officer conducted the negotiations IAW FAR Part 15, beginning with the most preferred firm in the final selection?	FAR 36.606(a)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.13	Has the contracting officer sought advance agreement on any charges for computed-assisted design, or if the firm's proposal does not cover appropriate modern, cost-effective design methods (e.g., computer-assisted design), has the contracting officer discussed this topic with the firm?	FAR 36.606(d)				
C.14	Has the extent of any subcontracting been discussed and are the limits of a firm's subcontracting been agreed upon IAW FAR 52.244-4?	FAR 36.606(e), 52.244-4				
C.15	Have proposal revisions/final proposal revision been handled properly?	FAR 15.307, HHSAR 315.307				
C.16	If a mutually satisfactory contract cannot be negotiated, has the firm been notified that negotiations have been terminated and were negotiations initiated with the next firm on the final selection list?	FAR 36.606(f)				
C.17	If negotiations fail with all selected firms, has the contracting officer referred the matter to the selection authority?	FAR 36.606(f)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
		Cost/Price Analysis				
C.18	Have prenegotiation objectives, including profit/fee analysis, been established?	FAR 15.406-1, 15.404-4, HHSAR 315.404-4				
C.19	Has cost analysis, price analysis, cost realism been performed as required?	FAR 15.404, HHSAR 315.404-2				
C.20	If cost analysis report has been provided from DFAS or through field pricing information, have recommendations been followed or has the file been documented justifying why the recommendations were not followed?	FAR Part 15, NIH Manual 6015-1				
C.21	If cost analysis was performed, is there adequate evaluation of negotiated direct labor costs?	FAR 31.202;				
C.22	If cost analysis was performed, is there adequate evaluation of negotiated fringe benefit costs?	FAR 31.202;				
C.23	If cost analysis was performed, is there adequate evaluation of negotiated materials and supplies costs?	FAR 31.202;				
C.24	If cost analysis was performed, is there adequate evaluation of negotiated other direct costs?	FAR 31.202;				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.25	If cost analysis was performed, is there adequate evaluation of negotiated indirect costs?	FAR 31.202;				
C.26	Has subcontract pricing been appropriately considered?	FAR 15.404-3				
C.27	Has profit/fee been adequately analyzed?	FAR 15.404-4, HHSAR 315.404-4				
C.28	If cost or pricing data was required, did contractor execute a proper Certificate of Current Cost or Pricing Data?	FAR 15.406-2				
C.29	If cost or pricing data waived, is waiver in accordance with stipulated guidelines?	FAR 15..403- 1(c)(4)				
C.30	If CO learned that any cost or pricing data was inaccurate, incomplete, or noncurrent, is there compliance with procedures in FAR?	FAR 15.407-1				
		OCOI/COI				
C.31	If COI existed that could not be avoided or mitigated, did CO notify contractor, provide reasons and allowed the contractor a reasonable opportunity to respond?	FAR 9.504(e)				
C.32	Has CO resolved any conflict, or potential conflict of interest before contract award?	FAR 9.506(d), 9.503				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.33	If CO found that it was in best interest of the Government to award contract notwithstanding a COI/OCOI, was a written waiver obtained?	FAR 9503, 9.504(e)				
		Award				
C.34	Does award document include all required clauses for the type of contract used?	FAR 52.301, NCI Workform				
C.35	Has price reasonableness been established?	FAR 15.406-3, HHSAR 315.372				
C.36	Is an adequate, signed negotiation memorandum (“Summary of Negotiations”) in the file?	FAR 15.406-3, HHSAR 315.372				
C.37	Does Summary of Negotiations adequately address negotiated amounts for each contract period?	FAR 15.406- 3(a)(7),(8), HHSAR 315.372(g)				
C.38	Is Summary of Negotiations internally consistent with the cost/price amounts for each contract period and with the contract document?	FAR 15.406- 3(a)(7), (8); HHSAR 315.372(g)				
C.39	If Facilities Capital Cost of Money was proposed/negotiated, was a dollar-for-dollar offset made to fee or profit objective?	FAR 31.205-10				
C.40	Is source selection properly and sufficiently documented?	FAR 15.308				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.41	Does contact reflect agreement of the parties?	HHSAR 315.371(a)(2)				
C.42	Was affirmative determination of responsibility (including financial responsibility) made?	FAR 9.103(b), 9.104-1; HHSAR 315.372				
C.43	Is there adequate documentation in file to support responsibility determination (e.g, current balance sheet analysis with financial ratios computed, a current D&B report, line of verifications, etc.)?	FAR 9.104-1				
C.44	If protest before award, was it handled properly?	FAR 33.1, NIH Manual 6033-1 and 6033-2				
C.45	If agency protest, were OGC and NIH PCO consulted and did they concur with response prepared by contracting officer?	HHSAR 333.103,				
C.46	Was Excluded Parties List System (EPLS) checked?	FAR 9.405(d)(1) & (4)				
C.47	Was proper notification provided to unsuccessful offerors?	FAR 36.607				
C.48	Was there an approved subcontracting plan, if applicable?	FAR 19.702a)(2) (req. for LB award over \$550K)				
C.49	If subcontracting plan is applicable, has it been included as a part of the contract?	FAR 19.705-5(a)(5)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.50	Was EEO Clearance received?	FAR 22.805 (required >\$10M exc. Construction)				
C.51	Are contractor's Representations and Certifications complete and accurate or, if used, are electronic Reps & Certs referenced in contract file adequate?	FAR 4.803(a)(11), 4.1201,15.204-5				
C.52	If letter contract is definitization schedule included in contract?	FAR 16.603-2(b) and (c)				
C.53	If applicable, are performance-based finance payments established in contract only to extent actually needed for performance?	FAR 32.1004(b), 32.104				
C.54	Is there written assurance that adequate funds are available (funds certification), or is the award conditioned upon availability of funds?	FAR 32.702, 32.703-2				
C.55	Was preaward notice furnished to offerors when using SBSA, unless CO made determination of urgency?	FAR 15.503(a)(2)(i)				
C.56	If debriefings are held, are they conducted properly?	FAR 36.607(b) (FAR 15.503, 15.506(b)-(f), 15,507(c)				
C.57	Is contract prepared on SF 252 and signed by a warranted CO and is amount within his/her authority?	FAR 1.601, 4.101, 36.702(a)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.58	Is there evidence of an internal file review of contract and documentation?	NIH Manual 6304.71				
C.59	Is draft FedBizOpps Award Notice in file?	FAR 5.301 (required >\$25K)				
C.60	Is draft public award announcement (“Congressional Liaison Office”) in file?	FAR 5.303(a), HHSAR 305.303(a) (required > \$3.5M)				
C.61	Is contractor is in CCR?	FAR 4.1103				
C.62	Has CO entered contract into Prism/Compusearch (NBS) and completed DCIS documentation within required timeframes?	FR 4.604(b); HHSAR 304.602				
C.63	Has source selection information been appropriately marked?	FAR 3.104-4				
C.64	If advance payments are appropriate is executed D&F in file?	FAR 32.402(c)				
C.65	If applicable, is use of incremental funding appropriate?	HHSAR 332.702				
C.66	Is contract-specified timetable consistent with planned phases or increments and corresponding allotments of funds?	HHSAR 332.703-1(b)(2)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
C.67	At time of award, if cost reimbursement contract has been awarded, and if less than the first year of performance funded, did the CO document file as to why it was advantageous to Gov't. & did the funding cover a complete phase or increment of performance?	HHSAR 332.703-1(b)(5)				
C.68	Does contract contain precise requirements for progress reports, if applicable?	HHSAR 332.703-1(b)(7)				
C.69	If letter contract, is it appropriate and compliant with requirements?	FAR 16.603, HHSAR 316.603				
C.70	Did CO ensure that fee complied with limitations?	FAR 15.404(c)(4)				
C.71	If appropriate, are CAS clauses included in contract?	FAR 30.201-4, Appendix 9903-2				

SECTION D – Contract Administration						
No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
D.1	If letter contract or undefinitized action, contract definitized in a timely manner.	FAR 16.603				
D.2	Is COTR designated in writing and does COTR/PO have training in accordance with HHSAR requirements or has a waiver obtained?	HHSAR 307.170 and 307.170-1 and 2				
D.3	If FAR 52.219-28 was included in contract, did contractor represent its size status upon occurrence of events stipulated?	FAR 19.308(d), 52.219-28(b)				
D.4	Is contractor size status representation validated or updated in the ORCA and its data in the CCR also updated to reflect current status?	FAR19.308(d), FAR 52.219-28				
		Post Award Protests				
D.5	If protest after award, has CO determination for agency protest been handled timely?	FAR 33.104				
D.6	If protest after award, has CO obtained concurrence from Protest Control Officer?	HHSAR 333.103(f)(2)(iii)				
D.7	If protest after award, has CO followed appropriate protest procedures in response to protest filed with GAO?	FAR 33.104, HHSAR 333.104 NIH Manual 6033-1 & 6033-2				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
D.8	If applicable, has D&F to allow performance been properly approved?	FAR 33.104(c) & (d), HHSAR 333.104(c) & (d), NIH Manual 6033-2				
D.9	If protest after award of task/delivery order under IDIQ, and if <\$10M, is only on the basis that order increases scope, period, or maximum value of contract?	FAR 16.505(a)(9)(i)				
		Modifications and Change Orders				
D.10	Are contract modifications properly documented, citing correct authority and funding, within scope, and issued properly as unilateral or bilateral?	FAR 43				
D.11	If modification is for new work, is approved JOFOC in file?	FAR 6.303, HHSAR 306.303, JOFOC Desk Guide				
D.12	If change order issued, is it within scope, within parameters of Changes clause and signed by a warranted CO (within his/her authority)?	FAR 43.2				
D.13	If change order issued, was equitable adjustment definitized?	FAR 43.2				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
D.14	If change orders have been executed, were they definitized in a timely manner?	FAR 43.204				
D.15	Does supplemental agreement definitizing a change order include a Contractor's Statement of Release?	FAR 43.204(c)				
D.16	If modification to a construction contract awarded as a result of this A-E contract is required due to an error or deficiencies in the A-E contract, has the CO considered the extent to which the A-E contractor may be liable, enforced the liability and collected the amount due? Has the file been properly documented?	FAR 36.608				
D.17	If the price of construction proposed in response to a solicitation exceeds the construction funding limitation in the A-E contract, has the A-E firm been held solely responsible for redesigning the project within the funding limitation, at no increase in price? (unless there were unanticipated material costs or undue delay)	FAR 36.609-1				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
D.18	Where applicable, are contractor's requests for equitable adjustment processed in accordance with FAR 50.103 and is there a compliant approval/denial Memorandum of Decision in file?	FAR 50.103-6				
D.19	Has contract modification been entered into Prism/Compusearch (NBS) and FPDS (through DCIS), including mods for change in size status, as applicable?	FAR 4.604(b)(5); NBS				
D.20	If a contract with options and a subcontracting plan was required, or if a modification to a contract, have revised subcontracting goals been negotiated?	FAR 19.705-2				
		Claims\Disputes				
D.21	Are claims/disputes handled properly?	FAR 33.2, HHSAR 333.2				
D.22	Has CO made a timely response to contractor dispute under CDA?	FAR 33.211(c)- (f)				
D.23	Has contractor submitted certified claim under CDA?	FAR 33.207				
D.24	Has CO consulted OGC in resolving dispute under CDA?	HHSAR 333.211				
D.25	Has CO successfully resolved claim under CDA?	FAR 33.210				
D.26	Has CO rendered final decision IAW FAR & agency provisions?	FAR 33.211, HHSAR 333.211				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
D.27	If applicable, is alternate dispute resolution process used?	FAR 33.214				
		Management				
D.28	If mistake after award, have appropriate procedures been followed?	FAR 15.508				
D.29	If options included in contract, have they been executed properly and documented?	FAR 17.207				
D.30	Have contractor's invoices been reviewed/approved/disapproved in a timely manner?	FAR 32				
D.31	If termination for convenience/default deemed necessary, was process handled properly?	FAR 49				
D.32	If novation/change of name agreement requested, was process handled properly?	FAR 42.12				
D.33	Are performance evaluation reports in file, using SF 1421?	FAR 36.604				
D.34	If contractor's overall performance was unsatisfactory, was contractor advised in writing, and provided the basis for the report? Was contractor given opportunity to provide comments? If so, did the evaluating official resolve any alleged factual discrepancies and make appropriate changes in the report?	FAR 36.604 (Req. >\$30,000)				

No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
D.35	If cost overrun, has coordination taken place with program office, additional funds request received from contractor, statement from program office to fund/terminate contract, fixed fee unadjusted?	HHSAR 342.7101, 342.7102				
D.36	Have debarment/suspension procedures been properly followed?	FAR 9.4, HHSAR 309.4				
D.37	If applicable, has there been consent to subcontracts or approved system?	FAR 44.201				
D.38	Are subcontracting compliance reports submitted by prime contractor and subcontractors, and have they been evaluated?	FAR 19.704(a)(10), 19.705-6, 19.705- 7, 19.706 (Required for Large Bus. > \$500K				
D.39	If task/delivery order under IDIQ over \$5M, does requirement sent under fair opportunity provide proper information?	FAR 16.505(a)(9)(b) (iii)				
D.40	If task/delivery order under IDIQ in excess of \$5M, has CO properly notified unsuccessful offerors?	FAR 16.505(b)(4)				

SECTION E – Contract Closeout						
No.	Action Item	FAR/HHSAR/ NIH Policy Part	Yes	No	N/A	Comments
E.1	Has final payment/settlement been made?	FAR 4.804-5				
E.2	Have administrative closeout procedures been accomplished?	FAR 4.804-5				
E.3	Has contract completion statement been prepared?	FAR 4.804-5(b)				
E.4	Has disposition of GFP/GFE been addressed?	FAR 45.603				
E.5	Has final past performance evaluation been received?	FAR 42.1502, 42.1503 (over \$100K)				
E.6	If applicable, has a contract audit in accordance with agency procedures been performed?	HHSAR 304.804-70				
E.7	Have storage, handling & disposal of contract files been accomplished in accordance with agency procedures?	FAR 4.805				
E.8	Has closeout been accomplished in a timely manner?	FAR 4.804-1				
E.9	Has the HHS GWAC contract been used to accomplish closeout, or has a justification been prepared for the file?	HHS guidance				
E.10	Have excess funds been deobligated and returned to customer?	FAR 4.804-5				