



## MARKET RESEARCH QUESTIONNAIRE Cytogenetics Laboratory Testing Iowa City VA Health Care System

The U.S. Department of Veterans Affairs is conducting market research pursuant to Federal Acquisition Regulation Part 10. The Iowa City VA Health Care System has a requirement for Cytogenetics Laboratory Testing.

Please answer the following questions:

1. Can your firm provide Cytogenetics Laboratory Testing within one (1) hour as either a prime contractor or as a subcontractor in Iowa City, IA. .

\_\_\_\_\_ Prime \_\_\_\_\_ Subcontractor \_\_\_\_\_ No

- 2 Is there any additional information that you would like provide regarding your ability to provide Cytogenetics Laboratory Testing Services within one (1) hour in Iowa City, IA?

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3. The North American Industrial Classification System (NAICS) code 621511 Medical Laboratories, which sets the small business size standard at \$32.5 million. (greater than \$32.5 million is considered large business)  
Based on this standard, what is your business size, small or large?

\_\_\_\_\_ Small \_\_\_\_\_ Large

4. If you are a small business, what level of subcontracting, if any, would be available for the service you are interested in providing? \_\_\_\_\_%

5. Is your firm eligible for participation in one of the following small business programs? If so, please indicate the program.

\_\_\_\_\_ “8(a)” program  
\_\_\_\_\_ Women-owned small business concern  
\_\_\_\_\_ Economically Disadvantaged Women-owned small business concern  
\_\_\_\_\_ Veteran-owned small business concern  
\_\_\_\_\_ Service-disabled veteran-owned small business concern  
\_\_\_\_\_ Use of a price evaluation adjustment for a small disadvantaged business concern

# Department of Veterans Affairs



6. How many calendar days does your firm need to prepare a proposal resulting from this solicitation?

\_\_\_\_\_15 days    \_\_\_\_\_30 days    \_\_\_\_\_45 days    \_\_\_\_\_Less than 15 days

7. Is your company registered in the System for Award Management ([www.sam.gov](http://www.sam.gov))?

\_\_\_\_\_Yes    \_\_\_\_\_No

8. Please furnish the following information in reference to your firm:

Name: \_\_\_\_\_

Point of Contact: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

9. Please indicate any General Services Administration Federal Supply Schedule (FSS) contract number(s) your firm has been awarded in association with the aforementioned services and their respective expiration date(s).

FSS number(s): \_\_\_\_\_

Expiration date(s): \_\_\_\_\_



## Department of Veterans Affairs

I am extremely appreciative of the time you have taken to complete this questionnaire. Please email your completed market research questionnaire to me at: [shea.colby@va.gov](mailto:shea.colby@va.gov).

If you have any questions please don't hesitate to contact me at (612)-344-2184 or [shea.colby@va.gov](mailto:shea.colby@va.gov).

Sincerely,

Shea Colby, Contracting Officer  
U.S. Department of Veterans Affairs  
Network Contracting Office 23 (NCO 23)  
Minneapolis, MN 55415  
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