

# M/WBE UTILIZATION PLAN

**INSTRUCTIONS:** This form must be submitted with any bid, proposal, or proposed negotiated contract or within a reasonable time thereafter, but prior to contract award. This Utilization Plan must contain a detailed description of the supplies and/or services to be provided by each certified Minority and Women-owned Business Enterprise (M/WBE) under the contract. Attach additional sheets if necessary.

<b>Offeror's Name:</b> <b>Address:</b> <b>City, State, Zip Code:</b> Telephone No.: Region/Location of Work:	<b>Federal Identification No.:</b> <b>Solicitation No.:</b> <b>Project No.:</b> <b>M/WBE Goals in the Contract:</b> MBE 7.25 % WBE 4.75 %
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1. Certified M/WBE Subcontractors/Suppliers Name, Address, Email Address, Telephone No.	2. Classification	3. Federal ID No.	4. Detailed Description of Work (Attach additional sheets, if necessary)	5. Dollar Value of Subcontracts/Supplies/Services and intended performance dates of each component of the contract.
<b>A.</b>	<b>NYS ESD CERTIFIED</b> MBE WBE			
<b>B.</b>	<b>NYS ESD CERTIFIED</b> MBE WBE			

**6. IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, OFFEROR MUST SUBMIT A REQUEST FOR WAIVER FORM (M/WBE 104).**

<b>PREPARED BY (Signature):</b>  <b>DATE:</b>  <b>NAME AND TITLE OF PREPARER (Print or Type):</b> SUBMISSION OF THIS FORM CONSTITUTES THE OFFEROR'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 143, AND THE ABOVE-REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND POSSIBLE TERMINATION OF YOUR CONTRACT.	<b>TELEPHONE NO.:</b>  <b>EMAIL ADDRESS:</b>  <div style="background-color: #cccccc; text-align: center; padding: 5px;"><b>FOR M/WBE USE ONLY</b></div> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;"><b>REVIEWED BY:</b></td> <td style="width: 30%;"><b>DATE:</b></td> </tr> </table> <b>UTILIZATION PLAN APPROVED:</b> YES NO Date: _____ <b>Contract No.:</b> _____ <b>Project No. (if applicable):</b> _____ <b>Contract Award Date:</b> _____ <b>Estimated Date of Completion:</b> _____ <b>Amount Obligated Under the Contract:</b> _____ <b>Description of Work:</b> _____ <b>NOTICE OF DEFICIENCY ISSUED:</b> YES NO Date: _____ <b>NOTICE OF ACCEPTANCE ISSUED:</b> YES NO Date: _____	<b>REVIEWED BY:</b>	<b>DATE:</b>
<b>REVIEWED BY:</b>	<b>DATE:</b>		