



Office of
General Services

Office of Minority and Women-Owned
Businesses & Community Relations

MWBE UTILIZATION PLAN

IFB No.: **22955**

INSTRUCTIONS: This form must be submitted with any bid, proposal, response to request for qualifications or proposed negotiated contract or within a reasonable time thereafter, but prior to contract award as required in the IFB, RFP or RFQ. 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 (MWBE) under the contract. Attach additional sheets if necessary. Making false representations or including information evidencing a lack of good faith as part of, or in conjunction with, the submission of a Utilization Plan is prohibited by law and may result in penalties including, but not limited to, termination of a contract for cause, loss of eligibility to submit future bids, and/or withholding of payments. Firms that do not perform commercially useful functions may not be counted toward MWBE utilization.

Contractor's Name, Address and Telephone No. Morton Salt, Inc. 123 N. Wacker Drive, Chicago, IL 60606 312/807-2000	Federal Identification No. 27-3146174	Contract Description Location (Region)	MWBE Goals in Contract MBE 5 % WBE 5 %
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Certified MWBE Subcontractors/Suppliers Name, Address, Telephone No, E-mail Address	Federal ID. No.	NYS ESD CERTIFIED		Detailed description of Work (Attach additional sheets if necessary)	Dollar Value of Subcontracts/ supplies/ services and intended performance dates of each component of the contract
		MBE	WBE		
CLA & Sons Trucking Inc. 47 Marshall Avenue. Schenectady, NY 12304 Raishon Artis 518/365-9899 hudseeker@aol.com	26-7993403	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Trucking of Rock Salt to various bid locations	Value TBD, based on demand
K&D Industries of NY, LLC 129 Gallows Hill Road Cortlandt Manor, NY 10507 Karl Bjorkland 914/760-4519 deride@aol.com	01-0922649	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Trucking of Rock Salt to various bid locations	Value TBD, based on demand
M P Helwig Corp. 479 Elliot Road East Greenbush, NY 12081 Maureen Helwig 518/424-1197 mhelwig1@nycap.rr.com	14-1738645	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Trucking of Rock Salt to various bid locations	Value TBD, based on demand

IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, CONTRACTOR MUST SUBMIT A REQUEST FOR WAIVER (Form BDC 333)

Submission of this form constitutes the contractor's acknowledgement and agreement to comply with the MWBE requirements set forth under NYS Executive Law, Article 15-A and 5 NYCRR Part 142. Failure to submit complete and accurate information may result in a finding of noncompliance or rejection of the bid/proposal and/or suspension or termination of the contract.

Prepared By (Signature) <i>Anthony T. Patton</i>	Email Address bids@mortonsalt.com
Name and Title of Preparer (Print or Type) Anthony T. Patton, Director, U.S. Gov't Bulk Deicing Sales & Mktg	Telephone No. 312/807-2496
Date 7/14/2015	

FOR MWBE USE ONLY

Reviewed By <i>Anthony T. Patton</i>	Date 7/30/15			
Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 7/30/15			
Contract No.	Project No. (if applicable)	Contract Award Date	Estimated Completion Date	Contract Amount Obligated
Notice of Deficiency issued <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date	Comments: Page 1 of 2		
Notice of Acceptance issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 7/30/15			



Office of
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MWBE UTILIZATION PLAN

IFB No.: 22955

INSTRUCTIONS: This form must be submitted with any bid, proposal, response to request for qualifications or proposed negotiated contract or within a reasonable time thereafter, but prior to contract award as required in the IFB, RFP or RFQ. 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 (MWBE) under the contract. Attach additional sheets if necessary. Making false representations or including information evidencing a lack of good faith as part of, or in conjunction with, the submission of a Utilization Plan is prohibited by law and may result in penalties including, but not limited to, termination of a contract for cause, loss of eligibility to submit future bids, and/or withholding of payments. Firms that do not perform commercially useful functions may not be counted toward MWBE utilization.

Contractor's Name, Address and Telephone No. Morton Salt, Inc. 123 N. Wacker Drive Chicago, IL 60606-1743 312/807-2000		Federal Identification No. 27-3146174	Contract Description Location (Region)		MWBE Goals In Contract MBE 5 % WBE 5 %
Certified MWBE Subcontractors/Suppliers Name, Address, Telephone No, E-mail Address	Federal ID. No.	NYS ESD CERTIFIED		Detailed description of Work (Attach additional sheets if necessary)	Dollar Value of Subcontracts/ supplies/ services and intended performance dates of each component of the contract
		MBE	WBE		
MJD Enterprises Inc. 15 Dykeman Lane, Pawling NH 12564 Susan DeVito-Censuello 845/832-3113 mjdind@optonline.net	13-318-2812	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Trucking of Rock Salt to various bid locations	Value TBD, based on demand
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		

IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, CONTRACTOR MUST SUBMIT A REQUEST FOR WAIVER (Form BDC 333)
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Prepared By (Signature) *Anthony T. Patton* Email Address bids@mortonsalt.com
Name and Title of Preparer (Print or Type) Anthony T. Patton, Director, U.S. Gov't Bulk Deicing Sales & Marketing Telephone No. 312/807-2496 Date 7/14/2015

FOR MWBE USE ONLY

Reviewed By *Anthony T. Patton* Date 7/30/15
Utilization Plan Approved Yes No Date 7/30/15

Contract No.	Project No. (if applicable)	Contract Award Date	Estimated Completion Date	Contract Amount Obligated
Notice of Deficiency Issued <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date	Comments: Page 2 of 2		
Notice of Acceptance Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 7/31/15			