



## MWBE UTILIZATION PLAN

Contract No.: 22962

**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.<br>Advanced Measurement Technology<br>801 S. Illinois Avenue<br>Oak Ridge, TN 37831 | Federal Identification No. 62-1369733<br>865-482-4411 | Contract Description Location (Region)<br>Advanced Scientific Equipment & Instruments (Statewide) | MWBE Goals in Contract<br>MBE 5 %<br>WBE 5% |
|--|---|---|---|

| Certified MWBE Subcontractors/Suppliers<br>Name, Address, Telephone No, E-mail Address                             | Federal ID. No. | NYS ESD CERTIFIED        |                                     | Detailed description of Work<br>(Attach additional sheets if necessary) | Dollar Value of Subcontracts/ supplies/ services<br>and intended performance dates of each<br>component of the contract |
|--|-----------------|--------------------------|-------------------------------------|---|---|
|  |                 | MBE                      | WBE                                 |   |   |
| Commercial Freight Services<br>30255 Beverly Road<br>Romulus, MI 48174<br>734-326-9140<br>swhite@aitworldwide.com  | 36-3033973      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Transportation Services   | TBD   |
| AWLI Group Inc.<br>147-60 175 <sup>th</sup> Street<br>Jamaica, NY 11434<br>718-244-8665<br>amit@amberworldwide.com | 11-3024184      | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Transportation Services   | TBD   |
|  |                 | <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)

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>Donna Thompson</i>  | Email Address donna.thompson@ametek.com |
| Name and Title of Preparer (Print or Type) Donna Thompson, Customer Support Specialist | Telephone No. 865-483-2171 Date 6/11/15 |

| FOR MWBE USE ONLY  |   |                     |                           |                           |
|--|---|---------------------|---------------------------|---------------------------|
| Reviewed By <i>[Signature]</i>   | Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                     |                           | Date 6/23/15              |
| Contract No.   | Project No. (if applicable)   | Contract Award Date | Estimated Completion Date | Contract Amount Obligated |
| Notice of Deficiency Issued <input type="checkbox"/> Yes <input type="checkbox"/> No | Date 6/23/15  | Comments:           |                           |                           |