



NYS OFFICE OF GENERAL SERVICES

Serving New York

MWBE UTILIZATION PLAN

Contract No.: RFP 20191

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.

Contractor's Name, Address and Telephone No. U&S Services, Inc. 95 Stark Street Tonawanda, NY 14150 716-693-4490	Federal Identification No. 16-1364177	Contract Description Location (Region) Lot 1 Regions 1-4, 6 & 9 Lots 2, 3 & 5 Region 9	MWBE Goals in Contract MBE <u>10</u> % WBE <u>10</u> %
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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		
EA Millbrandt, Inc 7951 Northfield Road, Clarence Center, NY 14032 716-523-7940 memi@brand@aol.com	16-1057833	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Electrical Supplies; Temperature Control Installation	\$30,000
Rand and Jones Enterprises 18 Tracy Street #A, Buffalo, NY 14201 716-626-1080 laveme.e@randjones.com	16-1245609	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Mechanical; Electrical Supplies	\$30,000
		<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 MWBE 101/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) 	Email Address stuberj@usservicesinc.com
Name and Title of Preparer (Print or Type) John Stuber, Sales Manager	Telephone No. 716-693-4490 ext. 205 Date 4/15/2015

FOR MWBE USE ONLY

Reviewed By 	Date 4/20/15
Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 4/20/15

Contract No.	Project No. (if applicable)	Contract Award Date	Estimated Completion Date	Contract Amount Obligated
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Notice of Deficiency Issued <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date	Description of Work
Notice of Acceptance Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 4/20/15	