



MWBE UTILIZATION PLAN

Contract No.: IFB 22779

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. East Coast Petroleum Inc. 340 Jackson Avenue, Bronx, NY 10454 718-402-5107	Federal Identification No. 13-3762228	Contract Description Location (Region) Statewide contract for Heating Fuel Oil	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		
Mikes Heavy Duty Towing Inc. 816 Liberty Ave, Brooklyn, NY 718-277-6060 mike@mikestowing-ny.com	11-3315509	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Towing Services	\$12,000
DTM Parts Supply Inc. 31 Sageman St, Mt. Vernon, NY 914-760-0558 jdtdm4@aol.com		<input checked="" type="checkbox"/>	<input type="checkbox"/>	Truck Parts	\$18,000
G & J Graphics Inc, DBA The Bronx Design Group 2914 Westchester Ave, Bronx, NY 718-409-9874 geri@bronxdesign.com		<input type="checkbox"/>	<input checked="" type="checkbox"/>	Printing Services	\$7,000

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)	Email Address amilanesc@castcoastpetro.com
Name and Title of Preparer (Print or Type) Anthony Milanese-President	Telephone No. 718-402-5107 Date 8/28/14

FOR MWBE USE ONLY

Reviewed By	Date 9/17/14			
Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 9/19/14			
Contract No.	Project No. (if applicable)	Contract Award Date	Estimated Completion Date	Contract Amount Obligated
Notice of Deficiency Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 8/26/14	Comments: Services applicable per vendor explanation via email correspondence.		
Notice of Acceptance Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 9/19/14			