



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.

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| Contractor's Name, Address and Telephone No. Mirabito Energy Products The Metrocenter - 49 Court Street, PO Box 5306 Binghamton, NY 13902 Phone: 607-352-2800 | Federal Identification No. 15-0552668 | Contract Description Location (Region) Statewide contract for Heating Fuel Oil | MWBE Goals In Contract MBE 5 % WBE 5% |
|--|--|--|---|

| Certified M/WBE 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 | | |
| Teagan Trucking 111 Josephine Drive Cobleskill, NY 12043 Phone: 518-234-2922 | 57-1235466 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Tractor Leasing and Hauling Subcontracting | To be determined, depends on many external factors |
| | | <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)

Submission of this form constitutes the contractor's acknowledgement and agreement to comply with the M/WBE 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.

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| Prepared By (Signature) | Email Address jason.mirabito@mirabito.com |
| Name and Title of Preparer (Print or Type) Jason O. Mirabito | Telephone No. 607-352-2800 Date 9/2/2014 |

FOR MWBE USE ONLY

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|---|-----------------------------|---|---------------------------|---------------------------|
| Reviewed By | Date 9/8/14 | | | |
| Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Date 9/8/14 | | | |
| 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: <i>Plan accepted with notice.</i> | | |
| Notice of Acceptance Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Date 9/8/14 | | | |