



**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. United Metro Energy Corp. 500 Kingsland Ave. Brooklyn, NY 11222 (718) 383-1400	Federal Identification No. 46-2112871	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		
Petroleum Kings, LLC, 1 Amanda Court, White Plains, NY 10607	27-2259466	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transportaiton Services	TBD based on NYSOGS Supply and 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)**

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>Daniel Gianfaglia</i>	Email Address <u>dgianfaglia@umecny.com</u>
Name and Title of Preparer (Print or Type) <u>Daniel Gianfaglia President and C.O.O.</u>	Telephone No. (718) 389-1400      Date <u>August 1, 2014</u>

**FOR MWBE USE ONLY**

Reviewed By <i>[Signature]</i>	Date <u>10/10/14</u>			
Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date <u>10/14/14</u>			
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	Comments: <i>Approved with Notice. MWBE application is fasttrack pending Certification.</i>		
Notice of Acceptance Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date <u>10/14/14</u>			