



Office of General Services

Office of Minority and Women-Owned Businesses & Community Relations

Commodities and Services

Submit Completed Plan To:

Office of Minority and Women-Owned Businesses & Community Relations
29th Floor, Corning Tower
The Governor Nelson A. Rockefeller Empire State Plaza
Albany, New York 12242
Phone: 518-486-9284 Fax: 518-486-9285

MWBE UTILIZATION PLAN

[X] Initial Plan [] Revised plan Contract/Solicitation # 1902

RFP # 1902

INSTRUCTIONS: This Utilization Plan must contain a detailed description of the supplies and/or services to be provided by each NYS Certified Minority and Women-owned Business Enterprise (MWBE) under the contract. By submission of this Plan, the Bidder/Contractor commits to good faith efforts in the utilization of MWBE subcontractors and suppliers as required by the MBE/WBE goals contained in the Solicitation/Contract. 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. Attach additional sheets if necessary.

BIDDER/CONTRACTOR INFORMATION
Bidder/Contractor Name: Bubonia Holding Corp.
NYS Vendor ID: 1000054986
Bidder/Contractor Address: 18 West Albany Drive, Albany, New York 12205
Bidder/Contractor Telephone Number: (518) 438-8900
Contract Work Location/Region: Albany

MWBE Goals in Contract
MBE 15 %
WBE 15 %

Contract Description/Title: RFP 1902 Snow Plowing and Snow Removal. Harriman S.O.B. Campus

CONTRACTOR INFORMATION
Prepared by (Signature): [Signature]
Name and Title of Preparer: Stephen J. Bubonia
Telephone Number: (518) 438-8900
Date: 07/30/15
Email Address: steve@bubonia.com
President

IF UNABLE TO MEET THE MBE AND WBE GOALS SET FORTH IN THE SOLICITATION/CONTRACT BIDDER/CONTRACTOR MUST SUBMIT A REQUEST FOR WAIVER (FORM BDC 333)

FOR OGS MWBE USE ONLY
OGS MWBE Authorized Signature: [] Accepted [] Accepted as Noted [] Notice of Deficiency
NAME (Please Print): MBE %/\$ WBE %/\$ Date:
Comments:

NYS CERTIFIED MWBE SUBCONTRACTOR/SUPPLIER INFORMATION: The directory of New York State Certified MWBEs can be viewed at: https://ny.newnyccontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=2528
Note: All listed Subcontractors/Suppliers will be contacted and verified by OGS.

MWBE Subcontractor/Supplier Name: Genovese Transport & Cartage
MWBE Certification: [] MBE [X] WBE (If firm is dual certified please select one only)
Please identify the person you contacted: Joanne Genovese
Federal Identification No.: 14-1834390
Telephone No.: (518) 858-5701
Address: 32 Belvidere Ave, Albany NY 12203
Email Address: GenoveseTransport@aol.com

Detailed Description of work to be provided by subcontractor/supplier: Snow plow services.
Dollar Value of subcontracts/supplies/services (When \$ value cannot be determined put estimated % of work under the contract or value TBD based on contractual spending): \$ or 20 %

MWBE Subcontractor/Supplier Name: Butterfield Contracting
MWBE Certification: [] MBE [] WBE (If firm is dual certified please select one only)
Please identify the person you contacted: Rick Butterfield
Federal Identification No.:
Telephone No.: (518) 469-5544
Address: 345 Palmer Rd E.Greenbush NY 12061
Email Address:

Detailed Description of work to be provided by subcontractor/supplier: Snow Plow Services
Dollar Value of subcontracts/supplies/services (When \$ value cannot be determined put estimated % of work under the contract or value TBD based on contractual spending): \$ or 20 %