



**MWBE UTILIZATION PLAN**

Contract No.: PD 1899

**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. 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.

Contractor's Name, Address and Telephone No. Dunwell Elevator Electrical Industries, Inc. 879 Grand Street, Brooklyn, NY 11211	Federal Identification No. 11-2618123	Contract Description Location (Region) ELEVATOR MAINTENANCE & REPAIRS	MWBE Goals in Contract MBE 7 % WBE 3 %
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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		
Turtle & Hughes, Inc. 70-30 80th Street Glendale, NY 11385 (718) 941-4890	13-5444820	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wiring, Counterweights & electrical supplies	TBD
Schmit Machine, Inc. 40-09 21st Street, LIC, NY 11101 P (718)784-0619 - F(718)392-8019	11-2610955	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elevator Machine repairs	TBD
North American Elevator Products 40-09 21st Street, LIC, NY 11101 P (718)784-2840 - F (718) 392-8019	11-2930179	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elevator Products	TBD

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>Norma Melendez</i>	Email Address <u>normam@dunwellelevator.com</u>
Name and Title of Preparer (Print or Type) <u>Norma Melendez, Director of Mktg &amp; Sales</u>	Telephone No. <u>718-388-7575 x 1013</u> Date <u>10/6/2014</u>

**FOR MWBE USE ONLY**

Reviewed By	Date			
Utilization Plan Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Date			
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:		
Notice of Acceptance Issued <input type="checkbox"/> Yes <input type="checkbox"/> No	Date			



CONTINUATION SHEET #2

**MWBE UTILIZATION PLAN**

Contract No.: PD #1899

**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. 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.

Contractor's Name, Address and Telephone No. Dunwell Elevator Electrical Industries, Inc. 879 Grand Street, Brooklyn, NY 11211	Federal Identification No. 112618123	Contract Description Location (Region) ELEVATOR MAINTENANCE & REPAIRS	MWBE Goals in Contract MBE 7 % WBE 3 %
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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		
Titan Machine Corp. - 42-11 9th Street, LIC, NY 11101 P (718)361-7848 - F (718)361- 3115	11-2298183	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elevator new machines & machine repairs	TBD
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		

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Prepared By (Signature) <i>Norma Melendez</i>	Email Address normam@dunwellelevator.com
Name and Title of Preparer (Print or Type) Norma Melendez, Director of Mktg & Sales	Telephone No. 718-388-7575 ext 1013 Date 10/6/2014

**FOR MWBE USE ONLY**

Reviewed By <i>Norma Melendez</i>	Date 10/15/14			
Utilization Plan Approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 10/17/14			
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 10/10/14	Comments:		
Notice of Acceptance Issued <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date 10/17/14			