



Office of Minority/Women-Owned Business Enterprise (M/WBE)  
 DIVISION OF FINANCE  
 41<sup>st</sup> 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

Revised Plan

Contract No.: IFB -1664

**INSTRUCTIONS:** This form must be submitted with any bid, proposal, or proposed negotiated contract or within a reasonable time thereafter, but prior to contract award. 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 (M/WBE) under the contract. Attach additional sheets if necessary.

Contractor's Name Address, Telephone No. Johnson Controls Inc. 8 Skyline Drive Hawthorne, NY 12532 Federal Identification No.39-0380010	Contract Description Location (Region) Johnson Controls, Inc. Mark Finkbeiner Service Sales Hawthorne Branch 8 Skyline Drive Hawthorne, NY 12532	<i>Chiller Maintenance Services</i> <i>Eleanor Roosevelt SOB</i> <i>Poughkeepsie, NY</i>	MWBE Goals In Contract MBE <u>3</u> % WBE <u>0</u> %
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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		
JCC Maintenance Supply LLC 20-28 119th Street College Point, New York 11356 Tel: 718-762-8288 Fax: 718-762-3727 Email: info@jccsupplies.com	26-3983899	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Purchase of miscellaneous maintenance products, such as oil absorbent pads, hand cleaner etc.	\$500.94 annually

**IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, CONTRACTOR MUST SUBMIT A REQUEST FOR WAIVER (MWBE 101)**

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 NYCRR Part 143. Failure to submit complete and accurate information may result in a finding of noncompliance and/or termination of the contract.

Prepared By (Signature) <i>Mark Finkbeiner</i>	Email Address Mark.Finkbeiner@JCI.com
Name and Title of Preparer (Print or Type) Mark Finkbeiner, Service Sales Johnson Controls, Inc	Telephone No. 914 589 1489
	Date 2/8/2011

## FOR M/WBE USE ONLY

Reviewed By <i>Christopher Ramsey</i>	Date <u>3/2/11</u>			
Utilization Plan Approved <input checked="" 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	Description of Work		
Notice of Acceptance Issued <input type="checkbox"/> Yes <input type="checkbox"/> No	Date			