



NYS OFFICE OF GENERAL SERVICES
Serving New York

Office of Minority/Women-Owned Business Enterprise (M/WBE)
DIVISION OF FINANCE
41st Floor, Corning Tower
The Governor Nelson A. Rockefeller Empire State Plaza
Albany, New York 122
Phone: (518) 486-92
Fax: (518) 486-92

MWBE UTILIZATION PLAN

Revised Plan

#10601

Contract No.: C003161

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 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. <i>Diamond Security Services 125 Lakeway Drive West Babylon NY 11734 631 920 6583</i>	Contract Description Location (Region) <i>Security Guard Services at the Virginia houses located at E 15TH STREET in Manhattan, New York County NY</i>	MWBE Goals In Contract MBE <u>100%</u> WBE <u> </u> %
Federal Identification No. <u>262644307</u>		

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 each component of the contract
		MBE	WBE		
<i>Diamond Security Services 125 Lakeway Drive West Babylon NY 11734 631 920 6583 - dss@diamondsecurityservices.com</i>	<u>262644307</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>Provide security guards at the Virginia houses</i>	<u>\$183,434-40</u>
		<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 (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 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>[Signature]</i>	Email Address <u>dss1@diamondsecurityservices.com</u>
Name and Title of Preparer (Print or Type) <u>Samuel Gbajumo President/CEO</u>	Telephone No. <u>631 920 6583</u> Date <u>12/30/10</u>

FOR M/WBE USE ONLY

Reviewed By <i>[Signature]</i>	Date			
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			