NEW YORK STATE OF OPPORTUNITY | 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
25th Floor, Corning Tower
The Governor Nelson A. Rockefeller Empire State Plaza
Albany, New York 12247
Phone 518-486-9284 Fax 518-486-9285

MWBE UTILIZATION PLAN

☒ Initial Plan ☐ Revised plan Contract/Solicitation # 22802-Lot 2

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		MWBE Goals In Contract
Bidder/Contractor Name: *Lenovo (United States) Inc.*	NYS Vendor ID: *1000032072*	MBE 10 %
Bidder/Contractor Address (Street, City, State and Zip Code): *1009 Think Place, Morrisville, NC 27560*		WBE 10 %
Bidder/Contractor Telephone Number: *203-505-3227*	Contract Work Location/Region:	
Contract Description/Title: Umbrella IT - Lot 2 Hardware		

CONTRACTOR INFORMATION			
Prepared by (Signature):	Name and Title of Preparer: *Anthony Garzone, SSE*	Telephone Number: *732-865-5030*	Date: *10/8/15*
Email Address: *agarzone@lenovo.com*			

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)

MWBE Subcontractor/Supplier Name: *Island Computer Products, DBA ICP, Inc*	MWBE Certification: ☐ MBE ☒ WBE (If firm is dual certified please select one only)	
Please identify the person you contacted: *Sal Saglik*	Federal Identification No.: *133536167*	Telephone No.: *718-556-6700*
Address: *20 Clifton Avenue, Staten Island, NY 10305*	Email Address: *ssaglik@icpcorp.com*	
Detailed Description of work to be provided by subcontractor/supplier: *Services could include installation, imaging, tagging, deployment*		
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): $*Will depend on contract amount* or _____%		

MWBE Subcontractor/Supplier Name: *Stellar Services*	MWBE Certification: ☒ MBE ☐ WBE (If firm is dual certified please select one only)	
Please identify the person you contacted: *Han Lim*	Federal Identification No.: *11-3189413*	Telephone No.: *212-432-2848*
Address: *70 West 36th Street, New York, NY 10018*	Email Address: *hlim@stellarservices.com*	
Detailed Description of work to be provided by subcontractor/supplier: *Services could include installation, imaging, tagging, deployment*		
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): $*Will depend on contract amount* or _____%		

FOR OGS MWBE USE ONLY

OGS MWBE Authorized Signature: Amola Surgick	☒ Accepted	☐ Accepted as Noted	☐ Notice of Deficiency
NAME (Please Print): Amola Surgick	MBE %/$ 10%	WBE %/$ 10%	Date: 10/20/15
Comments:			

NYS CERTIFIED MWBE SUBCONTRACTOR/SUPPLIER INFORMATION: The directory of New York State Certified MWBEs can be viewed at: https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp?TN=ny&XID=2528

Note: All listed Subcontractors/Suppliers will be contacted and verified by OGS.