

MWBE UTILIZATION PLAN - FOR CONTRACTORS OF THE NEW YORK STATE OFFICE FOR THE AGING

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 (MWBE) under the contract. Attach additional sheets if necessary. Utilization of certified minority- and women-owned business enterprises for non-commercially useful functions may not be counted towards utilization of certified minority- and women-owned business enterprises as identified in this utilization plan.

Offeror's Name: AIM Independent Living Center
Address: 271 East First Street
City, State, Zip Code: Corning, NY 14830
Telephone No.: 607-962-8225
Region/Location of Work: Region 14 - Steuben and Allegany counties

Federal Identification No.: 16-1137097
Solicitation No.: Long Term Care Ombudsman Program
Project No.:
MWBE Goals in the Contract: MBE % WBE 30%

1. Certified MWBE Subcontractors/Suppliers Name, Address, Email Address, Telephone No.	2. Classification	3. Federal ID No.	4. Detailed Description of Work (Attach additional sheets, if necessary)	5. Dollar Value of Subcontracts/ Supplies/Services and intended performance dates of each component of the contract.
A. Empire Interpreting State Tower Bldg, Suite 406 109 S. Warren Street Syracuse, NY 13202 315-472-1383	NYS ESD CERTIFIED <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE	03-0508118	Language and American Sign Language Interpreting Services	\$1,500
B. Curcio Printing 513 Prentice Road Vestal, NY 13850 607-729-2477	NYS ESD CERTIFIED <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE	16-1375617	Printing services	\$1,000
C. Rosanne Sell Advertising, Inc. 88 Main Street Binghamton, NY 13905 607-772-6868	NYS ESD CERTIFIED <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE	22-2552824	Development of outreach materials to include print media, brochure, website, flyers, radio, television, etc...	\$950

6. IF UNABLE TO FULLY MEET THE MBE AND WBE GOALS SET FORTH IN THE CONTRACT, OFFEROR MUST SUBMIT A REQUEST FOR WAIVER FORM (MWBE 104).

PREPARED BY (Signature): 

DATE: December 3, 2015

NAME AND TITLE OF PREPARER (Print or Type): Rene L. Snyder, Executive Director

SUBMISSION OF THIS FORM CONSTITUTES THE OFFEROR'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE MWBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 143, AND THE ABOVE-REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND POSSIBLE TERMINATION OF YOUR CONTRACT.

TELEPHONE NO.: 607-962-8225 **EMAIL ADDRESS:** rene@aimcfl.com

REVIEWED BY:  **FOR MWBE USE ONLY**

UTILIZATION PLAN APPROVED: YES NO **Date:** 3/16/16

Contract No.: **Project No. (if applicable):**

Contract Award Date: **Estimated Date of Completion:**