

**Attachment 7**

Tax ID #: \_\_\_\_\_



THE CITY OF NEW YORK

**Subcontractor Utilization Plan -Part I: Agency's Target**

This page to be completed by contracting agency

**Contract Overview**

Pin # 8502007WM0008P FMS Project ID#: RED-360

Project Title Resident Engineering Inspection Services for Trunk Water Main Replacement

Contracting Agency Department of Design and Construction

Agency Address 30-30 Thomson Ave City Long Island City State NY Zip Code 11101

Contact Person Donna Pope Title Director

Telephone # 718-391-1556 Email poped@ddc.nyc.gov

**Project Description** *(attach additional pages if necessary)*

Resident Engineering Inspection Services for Trunk Water Main Replacement in Clove Road between Narrows Road North and Silver Lake Park Golf Course, Borough of Staten Island

(1) ✓ **Target Subcontracting Percentage**  
 Percentage of total contract dollar value that agency estimates will be awarded to subcontractors in amounts under \$1 million for construction and professional services. \_\_\_\_\_ 5 %

**Subcontractor Participation Goals\***  
*Complete and enter total for each Construction or Professional Services, or both (if applicable)*

Group	Construction	Professional Services
Black American	_____ %	Unspecified %
Hispanic American	_____ %	Unspecified %
Asian American	_____ %	No Goal
Caucasian Female	No Goal	Unspecified %
<b>Total Participation Goals</b>	<b>(2) _____ %</b>	<b>(3) 30 %</b>

\*Note: For this procurement, individual ethnicity and gender goals are not specified. Bidders/proposers may meet the Total Participation Goal through subcontracts with vendors certified in one or more of the ethnicity or gender categories.

Tax ID #: \_\_\_\_\_

## Subcontractor Utilization Plan – Part II: Bidder/Proposer Subcontracting Plan

This page and the next (Part II herein) are to be completed by the bidder/proposer. NOTE: Bids/proposals which do not include a completed subcontractor utilization plan (Part II herein) will be deemed to be non-responsive, unless a full waiver of the target subcontracting percentage is granted (Part III herein).

### Section I: Prime Contractor Contact Information

Tax ID # \_\_\_\_\_ FMS Vendor ID # \_\_\_\_\_  
 Business Name \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone # \_\_\_\_\_ Email \_\_\_\_\_

### Section II: General Contract Information

1. Define the industry in which work is to be performed.

- **Construction** includes all contracts for the construction, rehabilitation, and/or renovation of physical structures. This category does include CM Build as well as other construction related services such as: demolition, asbestos and lead abatement, and painting services, carpentry services, carpet installation and removal, where related to new construction and not maintenance.
- **Professional Services** are a class of services that typically require the provider to have some specialized field or advanced degree. Services of this type include: legal, management consulting, information technology, accounting, auditing, actuarial, advertising, health services, pure construction management, environmental analysis, scientific testing, architecture and engineering, and traffic studies, and similar services.

a. Type of work on Prime Contract (Check one):

- Construction  
 Professional Services

b. Type of work on Subcontract (Check all that apply):

- Construction  Other  
 Professional Services

2. What is the expected percentage of the total contract dollar value that you expect to award to all subcontracts? \_\_\_\_\_ %

3. Will you award subcontract(s) in amounts below \$ 1 million for construction and/or professional services contracts within the first 12 months of the notice to proceed on the contract?  Yes  No

### Section III: Subcontractor Utilization Summary

**IMPORTANT: If you do not anticipate that you will subcontract at the target level the agency has specified, because you will perform more of the work yourself, you must seek a waiver of the Target Subcontracting Percentage by completing p. 4).**

Step 1:	Subcontracts under \$1M (4) (construction/professional services)	Total Bid/Proposal Value	Calculated Target Subcontracting Percentage
Calculate the percentage (of your total bid) that will go towards subcontracts under \$1M for construction and/or professional services	\$ _____	\$ _____	_____ %
	÷	x 100 =	

- **Subcontracts under \$1M (construction/professional services):** Enter the value you expect to award to subcontractors in dollars for amounts under \$1 million for construction and/or professional services. This value defines the amount that participation goals apply to, and will be entered into the first line of Step 2.
- **Total Bid/Proposal Value:** Provide the dollar amount of the bid/proposal.
- **Calculated Target Subcontracting Percentage:** The percentage of the total contract dollar value that will be awarded to one or more subcontractors for amounts under \$1 million for construction and/or professional services. **This percentage must equal or exceed the percentage listed by the agency on page 1, at line (1).**

**! Important: The "Calculated Target Subcontracting Percentage" MUST equal or exceed the Target Subcontracting Percentage listed by the agency on Page 1, Line (1) or the bid/proposal will be deemed non-responsive.**

**Subcontractor Utilization Plan – Part II: Bidder/Proposer Subcontracting Plan – cont.**

**Step 2:**  
Calculate value of subcontractor participation goals

<p>a. Copy value from Step 1, line (4) – the total value of all expected subcontracts under \$1M for construction and/or professional services</p> <p>b. From line a. above, allocate the dollar value of "Subcontracts under \$1M" by Construction and Professional Services.</p> <ul style="list-style-type: none"> <li>• If all subcontracts under \$1M are in one industry, enter '0' for the industry with no subcontracts.</li> <li>• Amounts listed on these lines should add up to the value from line a.</li> </ul> <p>c. For Construction enter percentage from line (2) from Page 1. For Professional Services enter percentage from line (3) from Page 1.</p> <ul style="list-style-type: none"> <li>• <b>These Percentages must be copied from the Agency Plan, or the bid/proposal will be deemed non-responsive.</b></li> </ul> <p>d. Value of Total Participation Goals</p>	<p><b>Subcontracts under \$1M</b> (construction/professional services)</p> <p>\$ _____</p> <div style="display: flex; justify-content: space-around; margin-top: 20px;"> <div style="text-align: center;"> <p>Construction</p> <p>\$ _____</p> <p>x _____ %</p> </div> <div style="text-align: center;"> <p>Professional Services</p> <p>\$ _____</p> <p>x _____ %</p> </div> </div> <p>\$ _____</p>
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**Step 3:**

✓ **Subcontracts in Amounts Under \$1 M Scope of Work – Construction**

*Enter brief description of type(s) of subcontracts in amounts under \$1M anticipated, by type of work, not by name of subcontractor*

  
  

✓ **Subcontracts in Amounts Under \$1 M Scope of Work – Professional Services**

*Enter brief description of type(s) of subcontracts in amounts under \$1M anticipated, by type of work, not by name of subcontractor*

**Section IV: Vendor Certification**

*I hereby 1) acknowledge my understanding of the MWBE requirements as set forth herein and the pertinent provisions of Local Law 129 of 2005, and the rules promulgated thereunder; 2) affirm that the information supplied in support of this subcontractor utilization plan is true and correct; 3) agree, if awarded this Contract, to comply with the MWBE requirements of this Contract and the pertinent provisions of Local Law 129 of 2005, and the rules promulgated thereunder, all of which shall be deemed to be material terms of this contract; and 4) agree, if awarded this contract, to make all reasonable, good faith efforts to attain the Target Subcontracting Percentage as specified by the Agency, and to solicit and obtain the participation of MWBEs so as to meet the required Subcontractor Participation Goals.*

Signature _____	Date _____
Print Name _____	Title _____

**PART III – REQUEST FOR WAIVER OF TARGET SUBCONTRACTING PERCENTAGE**

**Contract Overview**

Tax ID # \_\_\_\_\_ FMS Vendor ID # \_\_\_\_\_  
 Business Name \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Telephone # \_\_\_\_\_ Email \_\_\_\_\_  
 Type of Procurement  Competitive Sealed Bids  Other Bid/Response Due Date \_\_\_\_\_

PIN # (for this procurement) \_\_\_\_\_ Type of work on Prime Contract \_\_\_\_\_ Type of work on Subcontract (Check all that apply):  
 (Check one):  
 Construction  Construction  Other  
 Professional Services  Professional Services

**SUBCONTRACTING as described in bid/solicitation documents (Copy this % figure from Subcontractor Utilization Plan, Part I, line 1)**  
 \_\_\_\_\_ % of the total contract value anticipated by the agency to be subcontracted for construction/professional services subcontracts valued below \$1 million (each)

**ACTUAL SUBCONTRACTING as anticipated by vendor seeking waiver**  
 \_\_\_\_\_ % of the total contract value anticipated in good faith by the bidder/proposer to be subcontracted for construction/ professional services subcontracts valued below \$1 million (each)

**Basis for Waiver Request: Check appropriate box & explain in detail below (attach additional pages if needed)**

- Vendor does not subcontract construction/professional services, and has the capacity and good faith intention to perform all such work itself.
- Vendor subcontracts some of this type of work but at *lower* % than bid/solicitation describes, and has the capacity and good faith intention to do so on this contract.
- Other \_\_\_\_\_

**References**

List 3 most recent contracts/subcontracts performed for NYC agencies (if any)

CONTRACT NO. _____	AGENCY _____	DATE COMPLETED _____
CONTRACT NO. _____	AGENCY _____	DATE COMPLETED _____
CONTRACT NO. _____	AGENCY _____	DATE COMPLETED _____

List 3 most recent contracts/subcontracts performed for other agencies/entities  
 (complete ONLY if vendor has performed fewer than 3 NYC contracts)

TYPE OF WORK _____	AGENCY/ENTITY _____	DATE COMPLETED _____
Manager at agency/entity that hired vendor (Name/Phone No.) _____		
TYPE OF WORK _____	AGENCY/ENTITY _____	DATE COMPLETED _____
Manager at agency/entity that hired vendor (Name/Phone No.) _____		
TYPE OF WORK _____	AGENCY/ENTITY _____	DATE COMPLETED _____
Manager at agency/entity that hired vendor (Name/Phone No.) _____		

**VENDOR CERTIFICATION: I hereby affirm that the information supplied in support of this waiver request is true and correct, and that this request is made in good faith.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

*Shaded area below is for agency completion only*

**AGENCY CHIEF CONTACTING OFFICER APPROVAL**  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
**CITY CHIEF PROCUREMENT OFFICER APPROVAL**  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_