CONTRACTOR REQUIREMENTS AND PROCEDURES FOR BUSINESS PARTICIPATION OPPORTUNITIES FOR NEW YORK STATE CERTIFIED MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISES AND EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITY GROUP MEMBERS AND WOMEN

NEW YORK STATE LAW

Pursuant to New York State Executive Law Article 15-A, the Department of State (hereinafter “DOS”) recognizes its obligation under the law to promote opportunities for maximum feasible participation of certified minority-and women-owned business enterprises and the employment of minority group members and women in the performance of DOS contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title “The State of Minority and Women-Owned Business Enterprises: Evidence from New York” (“Disparity Study”). The report found evidence of statistically significant disparities between the level of participation of minority-and women-owned business enterprises in state procurement contracting versus the number of minority-and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOS establishes goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises (“MWBE”) and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, DOS hereby establishes an overall goal of 20% for MWBE participation, 10% for Minority-Owned Business Enterprises (“MBE”) participation and 10% for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOS may withhold payment pending receipt of the required MWBE documentation. The directory of New York State Certified MWBEs can be viewed at: https://ny.newnycontracts.com/FrontEndVendorSearchPublic.asp

For guidance on how DOS will determine a Contractor’s “good faith efforts,” refer to 5 NYCRR §142.8.

I. MWBE Utilization

By submitting a bid or proposal, a bidder on the Contract (“Bidder”) agrees to submit the following documents and information as evidence of compliance with 5 NYCRR §142.8:

A. Bidders are required to submit a MWBE Utilization Plan on Form A with their bid or proposal. Any modifications or changes to the MWBE Utilization Plan after the Contract award and during the term of the Contract must be reported on a revised MWBE Utilization Plan and submitted to DOS.

B. DOS will review the submitted MWBE Utilization Plan and advise the Bidder of DOS acceptance or issue a notice of deficiency within 30 days of receipt.

C. If a notice of deficiency is issued, Bidder agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt by submitting to the DOS:

Office of Affirmative Action Programs
99 Washington Avenue, Albany, New York 12231
Phone: (518) 473-2507; Fax (518) 473-9211

a written remedy in response to the notice of deficiency. If the written remedy that is submitted is not timely or is found by DOS to be inadequate, DOS shall notify the Bidder and direct the Bidder
to submit, within five (5) business days, a request for a partial or total waiver of MWBE participation goals. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or proposal.

D. DOS may disqualify a Bidder as being non-responsive under the following circumstances:
   a) If a Bidder fails to submit a MWBE Utilization Plan;
   b) If a Bidder fails to submit a written remedy to a notice of deficiency;
   c) If a Bidder fails to submit a request for waiver; or
   d) If DOS determines that the Bidder has failed to document good faith efforts.

Contractors shall attempt to utilize, in good faith, any MBE or WBE identified within its MWBE Utilization Plan, during the performance of the Contract. Requests for a partial or total waiver of established goal requirements made subsequent to Contract Award may be made at any time during the term of the Contract to DOS, but must be made no later than prior to the submission of a request for final payment on the Contract.

II. Non-Compliance

A. In accordance with 5 NYCRR §142.13, Contractor acknowledges that if it is found to have willfully and intentionally failed to make good faith efforts to meet the MWBE participation goals set forth in the Contract, such finding constitutes a breach of Contract and DOS may withhold payment from the Contractor as liquidated damages. Such liquidated damages shall be calculated as an amount equaling the difference between: (1) all sums identified for payment to MWBEs had the Contractor achieved the contractual MWBE goals; and (2) all sums actually paid to MWBEs for work performed or materials supplied under the Contract.

B. In addition, failure to comply with the foregoing requirements may result in a finding of non-responsiveness, non-responsibility and/or a breach of the Contract, leading to the withholding of funds, suspension or termination of the Contract or such other actions or enforcement proceedings as allowed by the Contract.

Equal Employment Opportunity Requirements

By submission of a bid or proposal in response to this solicitation, the Bidder/Contractor agrees with all of the terms and conditions of Appendix A including Clause 12 - Equal Employment Opportunities for Minorities and Women. The Contractor is required to ensure that it and any subcontractors awarded a subcontract over $25,000 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work") except where the Work is for the beneficial use of the Contractor, shall undertake or continue programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, equal opportunity shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, termination, and rates of pay or other forms of compensation. This requirement does not apply to: (i) work, goods, or services unrelated to the Contract; or (ii) employment outside New York State.

Bidder further agrees, where applicable, to submit with the bid a staffing plan (Form B) identifying the anticipated work force to be utilized on the Contract and if awarded a Contract, will, upon request, submit to the DOS, a workforce utilization report identifying the workforce actually utilized on the Contract if known.

Further, pursuant to Article 15 of the Executive Law (the “Human Rights Law”), all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor and sub-contractors will not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.
## Form A
### M/WBE Utilization Plan

**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 represents the anticipated M/WBE usage for the contract and 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.

<table>
<thead>
<tr>
<th>Offeror's Name:</th>
<th>Federal Identification No.:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td>Project/Contract No.:</td>
</tr>
<tr>
<td>City, State, Zip Code:</td>
<td>M/WBE Goals in the Contract: MBE 10%  WBE 10%</td>
</tr>
<tr>
<td>Telephone No.:</td>
<td></td>
</tr>
<tr>
<td>Region/Location of Work:</td>
<td></td>
</tr>
</tbody>
</table>

### Projected Certified M/WBE Subcontractors/Suppliers

<table>
<thead>
<tr>
<th>Name, Address, Email Address, Telephone No.</th>
<th>Classification</th>
<th>Federal ID No.</th>
<th>Detailed Description of Work</th>
<th>Dollar Value of Subcontracts/Supplies/Services and intended performance dates of each component of the contract.</th>
</tr>
</thead>
<tbody>
<tr>
<td>A.</td>
<td>□ MBE</td>
<td>□ WBE</td>
<td>4. Detailed Description of Work (Attach additional sheets, if necessary)</td>
<td>5. Dollar Value of Subcontracts/Supplies/Services and intended performance dates of each component of the contract.</td>
</tr>
<tr>
<td>B.</td>
<td>NYS ESD CERTIFIED</td>
<td>□ MBE</td>
<td>□ WBE</td>
<td></td>
</tr>
</tbody>
</table>

### 6. If unable to fully meet the MBE and WBE goals set forth in the contract, offeror must submit a request for waiver.

My firm proposes to use the M/WBEs listed above.

**PREPARED BY** (Signature):
**DATE:**

**NAME AND TITLE OF PREPARER** (Print or Type):

**TELEPHONE NO.:**
**EMAIL ADDRESS:**

**FOR M/WBE USE ONLY**

**REVIEWSED BY:**
**DATE:**

**UTILIZATION PLAN APPROVED:** □ YES □ NO  **Date:**

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

**Contract Award Date:**
**Estimated Date of Completion:**
**Amount Obligated Under the Contract:**
**Description of Work:**

**NOTICE OF DEFICIENCY ISSUED:** □ YES □ NO  **Date:**

**NOTICE OF ACCEPTANCE ISSUED:** □ YES □ NO  **Date:**

Submittion of this form constitutes the offeror's acknowledgement and agreement to comply with the M/WBE 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.
FORM B

STAFFING PLAN
Submit with Bid or Proposal – Instructions on page 2

Complete this form only for the anticipated work force to be utilized on the State contract.

<table>
<thead>
<tr>
<th>Solicitation No.:</th>
<th>Reporting Entity:</th>
<th>Report includes Contractor’s/Subcontractor’s:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>□ Work force to be utilized on this contract</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ Total work force</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Offeror’s Name:</th>
<th>Offeror’s Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Offeror's Name:</th>
<th>Offeror/Subcontractor</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Subcontractor's name</td>
</tr>
</tbody>
</table>

Enter the total number of employees for each classification in each of the EEO-Job Categories identified.

<table>
<thead>
<tr>
<th>EEO-Job Category</th>
<th>Total Work force</th>
<th>Work force by Gender</th>
<th>Work force by Race/Ethnic Identification</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total Male (M)</td>
<td>Total Female (F)</td>
<td>White (M) (F)</td>
</tr>
<tr>
<td>Officials/Administrators</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professionals</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technicians</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sales Workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office/Clerical</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Craft Workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laborers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service Workers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Temporary/Apprentices</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Totals</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PREPARED BY (Signature): TELEPHONE NO.: EMAIL ADDRESS: DATE:

NAME AND TITLE OF PREPARER (Print or Type): Submit completed with bid or proposal
General instructions: All Offerors and each subcontractor identified in the bid or proposal must complete an EEO Staffing Plan (FORM B) and submit it as part of the bid or proposal package. Where the work force to be utilized in the performance of the State contract can be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form only for the anticipated work force to be utilized on the State contract. Where the work force to be utilized in the performance of the State contract cannot be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form for the contractor's and/or subcontractor's total work force.

Instructions for completing:
1. Enter the Solicitation number that this report applies to along with the name and address of the Offeror.
2. Check off the appropriate box to indicate if the Offeror completing the report is the contractor or a subcontractor.
3. Check off the appropriate box to indicate work force to be utilized on the contract or the Offerors' total work force.
4. Enter the total work force by EEO job category.
5. Break down the anticipated total work force by gender and enter under the heading 'Work force by Gender'.
6. Break down the anticipated total work force by race/ethnic identification and enter under the heading 'Work force by Race/Ethnic Identification'. Contact the DOS Permissible contact(s) for the solicitation if you have any questions.
7. Enter information on disabled or veterans included in the anticipated work force under the appropriate headings.
8. Enter the name, title, phone number and email address for the person completing the form. Sign and date the form in the designated boxes.

RACE/ETHNIC IDENTIFICATION
Race/ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. For the purposes of this form, an employee may be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. However, no person should be counted in more than one race/ethnic group. The race/ethnic categories for this survey are:

• WHITE (Not of Hispanic origin) All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
• BLACK a person, not of Hispanic origin, who has origins in any of the black racial groups of the original peoples of Africa.
• HISPANIC a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
• ASIAN & PACIFIC a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.
• NATIVE INDIAN (NATIVE AMERICAN/ ALASKAN NATIVE) a person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
• OTHER CATEGORIES
  • DISABLED INDIVIDUAL any person who:
    - has a physical or mental impairment that substantially limits one or more major life activity(ies)
    - has a record of such an impairment; or
    - is regarded as having such an impairment.
  • VIETNAM ERA VETERAN a veteran who served at any time between and including January 1, 1963 and May 7, 1975.
• GENDER Male or Female