

New York State

Homes & Community Renewal

Office of Economic Opportunity and Partnership Development

Website: www.nyshcr.org/oeopd Email: Econ.Opportunity@nyshcr.org

## **UTILIZATION PLAN (CONST-1)**

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. MWBE

Utilization of service-disabled veteran-owned businesses for non-commercially useful functions may not be counted towards utilization of certified service-disabled veteran-owned businesses. SDVOB

Project ID or SHARS#	Contract Amount	Funding Amount	MBE % Required	d WBE % Required SDVOB % Required Plan Type: Utilization Plan Summary					iry
10N58	\$0.00	\$920,000.00	22.00%	10.00%		Amended	MBE \$ Required	MBE % Proposed	MBE \$ Proposed
							\$202,400.00	38.86%	\$357,500.00
							WBE \$ Required	WBE % Proposed	WBE \$ Proposed
-	Contractor Information						\$92,000.00	38.86%	\$357,500.00
			Telephone				SDVOB \$	SDVOB %	SDVOB \$
Name	Address	Federal ID #	Number	Email Address			Required	Proposed	Proposed
	22 Willowdale Avenue						\$0.00	0.00%	\$0.00
GKC Industries, Inc	Port Washington, NY 11050		516.767.1100	marcia@gkcindustries.com			OEOPD USE ONLY		
							Plan Status;	Арр	roved
Developer/Grantee Information									
			Telephone				. Pin Ki	mohani	623
Name	Address	Federal ID #	Number		Em	ail Address	X LILL &	mbarar	/ -
	111 John Street 23rd Floor						A	uthorized Signature	
Habitat for Humanity NYC	New York, NY 10038		212.991.4000	tduvivier@habitatnyc.org			Date: 6/23//7		
				_			44	Comments	
Pursuant to Executive Law Article 15-A, my firm propo	ses to use the certified MWBE firms listed below.								
Pursuant to Executive Law Article 17-B, my firm proposes to use the certified SDVOB firms listed below.									
				By completing	this form. I hasaby car	tify this to be an accurate representation			
TARA DUVIVIER	HABITAT FOR HUMANITY NYC	SR. PROJECT MANAGER	6/22/2017	of my firm's in	tentions	thy this to be an accurate representation			
Name of Company Official	Name of Company	Title	Date	]	(CHUOH)				

Subcontractor Information									
								Anticipated Contract Dates	
Firm Name	Firm Address	Firm Telephone Number	Firm Federal ID#	Firm MWBE Certification Type	Firm SDVOB Certification Type	General Description of Work to be Performed	Dollar Value of Contract	Start	Completion
	825 EAST GATE BLVD. #106B			MBE - NYS					
SLM ARCHITECTURE, P.C.	GARDEN CITY, NY 11530	516-543-0377		Certified	N/A	ARCHITECTURE	\$357,500.00	2/23/2017	8/23/2018
	825 EAST GATE BLVD. #106B			WBE - NYS					1
SLM ARCHITECTURE, P.C.	GARDEN CITY, NY 11530	516-543-0377		Certified	N/A	ARCHITECTURE	\$357,500.00	2/23/2017	8/23/2018
				N/A	N/A				
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