

New York State Division of Criminal Justice Services
LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM

IMPORTANT: A LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM MUST BE SUBMITTED WITH BID OR PROPOSAL. IN ADDITION TO THE INITIAL SUBMITTAL OF THIS FORM, A DCJS-3301 MUST BE SUBMITTED FOR EACH SUBSEQUENT CONTRACT/RENEWAL PERIOD AND WITH ALL APPLICABLE BUDGET MODIFICATION REQUESTS, PROVIDING DETAIL OF NEW OR REASSESSED GOALS.

Grantee (Contractor) Information: Rockland County

1. Name: Rockland County Sheriff's Office		Address: 55 New Hempstead Road, New City, NY 10956	
Contact Person/Title: Marie Merla/Crime Analyst			Telephone Number: 845-638-5466
2. Contract Number: C484269		Project Number: OI13-1052-D00	3. DUNS Number: 075437848
4. Project/RFP Title: Operation Impact		5. Project Location (Municipality/County/Region): Rockland County	
6. Contract Amount: 84300.00		7. Grantee Discretionary NPS Amount: 0	8. Contract Award Period: 7/1/13-6/30/14
9. Description of Goods/Services/Supplies Provided: Overtime			

10. MWBE Subcontractor/Supplier Name and Address	11. NYS ESD Vendor ID Number	12. Description of Services & Supplies	13. MBE Goal Amount	14. WBE Goal Amount	15. Date of Subcontract	19. MWBE Status and Certification
						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
						<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending
16. Discretionary NPS Amount:			17. Total MWBE Goals:			
					\$0	\$0
			18. Total MWBE Percentages:		0%	0%

NOTE: If NYS MWBE Certification is pending, a copy of the notice of application receipt issued by the NYS Empire State Development Corporation must accompany this form.

20. Contractor Certification : Rockland County		<input type="checkbox"/> My firm proposes to use the MWBEs listed above.	
21. x I certify that to the best of my knowledge, the information provided herein is complete and accurate.			Date: September 27, 2013
MWBE Firms: <input type="checkbox"/> NYS Certified <input type="checkbox"/> Certification Pending <input type="checkbox"/> Unknown		Reviewer Comments:	
OPDF Contract Manager: <i>Marie Merla</i>		Review Date: <i>10/11/13</i>	