New York State Division of Criminal Justice Services

LOCAL ASSISTANCE MWBE SUBCONTRACTOR/SUPPLIER UTILIZATION PROPOSAL FORM

[redacted]

Grantee (Contractor) Information:

1. Name:	Niagara County Sheriff's Office	Address:	5526 Niagara St. Extension, Lockport, New York 14094
Contact Person/Title:	Margo Hall	Telephone Number:	716-438-3317
2. Contract Number:	C484251	Project Number:	OI13484251
3. DUNS Number:	067523886		
4. Project/RFP Title:	Operation Impact	5. Project Location (Municipality/County/Region):	Niagara County
6. Contract Amount:	95,500	7.Grantee Discretionary NPS Amount:	
8. Contract Award Period:	07/01/13-06/30/14		
9. Description of Goods/Services/Supplies Provided:	Personnel Costs and Training only		

10. MWBE Subcontractor/Supplier Name and Address	11. NYS MWBE Certified Number	12. Description of Services & Supplies	13. MBE Goal Amount	14. WBE Goal Amount	15. Date of Subcontract	19. MWBE Status and Certification	[redacted]
N/A						☐ MBE ☐ WBE ☐ NYS Certified ☐ Certification Pending	☐
						☐ MBE ☐ WBE ☐ NYS Certified ☐ Certification	☐
						☐ MBE ☐ WBE ☐ NYS Certified ☐ Certification Pending	☐
						☐ MBE ☐ WBE ☐ NYS Certified ☐ Certification	☐
16. Discretionary NPS Amount:		17. Total MWBE Goals:					
		18. Total MWBE Percentages:					

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: Margo S Hall

☐ My firm proposes to use the MWBEs listed above.

21. ☑ I certify that to the best of my knowledge, the information provided herein is complete and accurate. Date: 08/15/13

[redacted]

MWBE Firms:

☐ NYS Certified ☐ Certification Pending ☐ Unknown

Reviewer Comments:

OPDF Contract Manager:

Review Date: