

MWBE UTILIZATION WORKSHEET

Contract No.	County(ies)			PIN		Project Sponsor		Date Submitted		
CONTRACTOR INFORMATION										
Name						Federal ID No.				
Address 1						Address 2				
City		State		Zip		Telephone No.				
SUBCONTRACTOR INFORMATION										
Name						Federal ID No.				
Address 1						Address 2				
City		State		Zip		Telephone No.				
Estimated Beginning Date					Estimated Completion Date					
<p>The Prime Contractor shall inform the Sponsor's Engineer-in-Charge (EIC) of the dates when the Subcontractor starts and completes all work under the subcontract. When the work performed by the Subcontractor is included in an estimate for payment, labor affidavits, copies of payrolls, etc., are to be submitted in the same manner and numbers as required of the Prime Contractor. This approval may be rescinded at any time in the progress of the work if work of the Subcontractor is determined unsatisfactory.</p> <p>No work may be assigned by the Subcontractor to a second tier Subcontractor. No work may be performed by a Subcontractor other than that specifically approved by the Sponsor. The signators below agree that violations of the foregoing may result in no payment by the Sponsor for the related work.</p> <p>No work shall be started by the Subcontractor prior to filing the required insurances. The Contractor and Subcontractor hereby certify that the subcontract is in writing, and contains all the pertinent provisions of the prime contract in regard to Federal and State Laws and Regulations.</p>										
Contractor Signature				Date		Subcontractor Signature		Date		
Item No.	Name			< Less Than 100%	\$ Specialty	\$ Non-Specialty	Agreed Amount \$	% to Count		
				Totals	\$0.00	\$0.00	\$0.00			
<p>The Subcontractor named above is approved for utilization under the provisions of the Sponsor's contract specifications. Approval of this worksheet conveys only the Sponsor's concurrence in the use of the named subcontractor for the items specified, and application of the MWBE Agreed Amount to the participation goal of the contract. Sponsor approval of form CONR 89LL NYS is required prior to subletting or otherwise assigning any part of the contract.</p>										
Approved For Sponsor By (Name)							Date Approved			

APPROVAL TO SUBCONTRACT

Contract No.		County(ies)		PIN		Project Sponsor		Date Submitted	
0		0		0		0			
CONTRACTOR INFORMATION									
Name		0				Federal ID No.		0	
Address 1		0				Address 2		0	
City		0	State	0	Zip	00000	Telephone No.		-
SUBCONTRACTOR INFORMATION									
Name		0				Federal ID No.		0	
Address 1		0				Address 2		0	
City		0	State	0	Zip	00000	Telephone No.		-
Estimated Beginning Date					Estimated Completion Date				
The Prime Contractor shall inform the Sponsor's Engineer-in-Charge (EIC) of the dates when the Subcontractor starts and completes all work under the subcontract. When the work performed by the Subcontractor is included in an estimate for payment, labor affidavits, copies of payrolls, etc., are to be submitted in the same manner and numbers as required of the Prime Contractor. This approval may be rescinded at any time in the progress of the work if work of the Subcontractor is determined unsatisfactory.									
No work may be assigned by the Subcontractor to a second tier Subcontractor. No work may be performed by a Subcontractor other than that specifically approved by the Sponsor. The signators below agree that violations of the foregoing may result in no payment by the Sponsor for the related work.									
No work shall be started by the Subcontractor prior to filing the required insurances. The Contractor and Subcontractor hereby certify that the subcontract is in writing, and contains all the pertinent provisions of the prime contract in regard to Federal and State Laws and Regulations.									
Contractor Signature		Date		Subcontractor Signature		Date			
Item No.	Name	< Less Than 100%		\$ Specialty	\$ Non-Specialty				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
0	0	0		\$0.00	\$0.00				
		Totals		\$0.00	\$0.00				
The Subcontractor named above is authorized to perform work on the above noted contract for the items listed herein; however, a subcontract shall be of no force or effect until approved below.									
BELOW FOR PROJECT SPONSOR USE ONLY									
Original Total Contract Price (Less Specialty Items)				% Original Total Contract Price Approved This Date				Approval #	
% Original Total Contract Price Previously Approved				% Original Total Contract Price Approved To Date					
Approved For Sponsor By (Name)						Date Approved			

**INSTRUCTIONS FOR COMPLETING FORM AAP 20LL NYS AND CONR 89LL NYS
MWBE UTILIZATION WORKSHEET AND APPROVAL TO SUBCONTRACT**

The Sponsor's contract specifications require that, prior to contract award, Prime Contractors must obtain written consent of the Sponsor's CEO (or designee) to a utilization plan that identifies certified Minority/Womens Business Enterprises (MWBEs) that have committed to perform work on a proposed contract. The MWBE Utilization Worksheet (AAP 20LL NYS) is used to describe in item detail the utilization plan for each proposed MWBE firm.

The Sponsor's contract specifications require Prime Contractors to obtain written consent of the Sponsor's CEO (or designee) prior to subletting or otherwise assigning any part of the contract. **The Approval to Subcontract** (CONR 89LL NYS) is used for that purpose.

The MWBE Utilization Worksheet and Approval to Subcontract have been designed for use as related forms, AAP 20LL NYS and CONR 89LL NYS. When submitting forms for firms included in the Contractor's Schedule of Utilization, prepare a signed, two part set of both pages, as described below. Entries made on the Utilization Worksheet will automatically provide data for an Approval to Subcontract except that item-level MWBE agreed amounts will not be shown on the second page. When submitting forms for firms not included in the Contractor's Utilization Plan, only an Approval to Subcontract is to be completed. All MWBE Utilization Worksheets (AAP 20LL NYS) are to be submitted as attachments to the Contractor's Schedule of Utilization, form AAP 19LL NYS.

Approval of the Utilization Worksheet conveys only the Sponsor's concurrence in the use of the named subcontractor for the items specified, and application of the MWBE Agreed Amount to the participation goals of the contract. THE SPONSOR'S APPROVAL TO SUBCONTRACT IS REQUIRED PRIOR TO SUBLETTING OR OTHERWISE ASSIGNING ANY PART OF THE CONTRACT.

Both Forms:

Contract Number:	Enter contract number
County(ies):	Enter county or counties in which the project is located
PIN:	Enter Project Identification Number
Page No.:	Enter page number of current AAP 20LL NYS/CONR 89LL NYS and total number of forms being submitted
Project Sponsor:	Enter name of municipality or agency that is letting the project
Date Submitted:	Enter date completed forms are submitted to the Sponsor. For firms included in the Contractor's Schedule of Utilization, the dates on both pages must agree. If they do not, the request will not be processed.
Names/Addresses:	Enter all contact information for the Contractor and Subcontractor, including Federal ID number and telephone number with area code
Signatures & Dates:	Authorized representatives of the Contractor and Subcontractor must sign and date the form(s)
Est. Beginning Date:	Enter estimated date when Subcontractor will begin work
Est. Completion Date:	Enter estimated date when Subcontractor will complete work
Item No. and Name:	Enter each item by Specification number and name. If only part of an item is to be subcontracted, check the "Less Than 100%" box and attach a description of the specific work to be performed to both pages of this form.
< Less Than 100%:	Place an X if the Subcontractor is performing less than the complete item of work
\$ Specialty:	If a specialty item per the Specification, enter the dollar amount here
\$ Non-Specialty:	If a non-specialty item per the Specification, enter the dollar amount here

AAP 20 LL:

Agreed Amount \$:	Enter the amount to be paid to the MWBE
% To Count:	Enter 100% for subcontracting, manufacturing, fabricating, professional or trucking services; 60% for material supply; or, the % fee or commission for brokering

MWBE SCHEDULE OF UTILIZATION
Part 1 - MBE Utilization

Contract No.	PIN	Project Sponsor	
County(ies):			
_____ Initial	_____ Amendment	Contractor Name	
Contract Bid Amount:			
Contract MBE Goal %:		Contractor Fed ID No.	
Contract MBE Goal \$:			
UTILIZATION INFORMATION			
MBE Name	Fed ID No.	Work Category	MBE Utilization
		Total Commitments:	
		Contract MBE Goal:	
		Difference:	

TO BE COMPLETED BY PROJECT SPONSOR			
The Bidder _____ has _____ has not demonstrated good faith efforts to secure MBE utilization in satisfaction of the contract goal as required by the contract specification.			
Signature		Date	

MWBE SCHEDULE OF UTILIZATION
Part 2 - WBE Utilization

Contract No.	PIN	Project Sponsor	
County(ies):			
_____ Initial	_____ Amendment	Contractor Name	
Contract Bid Amount:			
Contract WBE Goal %:		Contractor Fed ID No.	
Contract WBE Goal \$:			
UTILIZATION INFORMATION			
WBE Name	Fed ID No.	Work Category	WBE Utilization
		Total Commitments:	
		Contract WBE Goal:	
		Difference:	

TO BE COMPLETED BY PROJECT SPONSOR			
The Bidder _____ has _____ has not demonstrated good faith efforts to secure WBE utilization in satisfaction of the contract goal as required by the contract specification.			
Signature		Date	

INSTRUCTIONS - AAP 19LL NYS	
Contract No:	Enter the Sponsor's contract number.
PIN:	Enter the Project Identification Number.
Project Sponsor:	Enter the name of the Sponsor who released the contract (e.g., Albany County).
County(ies):	Enter the name(s) of the county(ies) where the contract is located (e.g., Albany County).
Initial:	Place a check mark if this is the initial schedule for contract award.
Amendment:	Place a check mark if this is a schedule amending utilization after contract award.
Contractor Name:	Enter the business name for the prime contracting firm.
Contractor Fed ID No:	Enter the Federal Identification number associated with the prime contracting firm.
Contract Bid Amount:	Enter the contract's low bid amount in US dollars.
Contract MBE or WBE Goal %:	Enter the MBE or WBE goal that is assigned to this contract, expressed as a percentage.
Contract MBE or WBE Goal \$:	The MBE or WBE goal will be expressed in US dollars; <i>Excel will calculate and fill automatically.</i>
UTILIZATION INFORMATION SECTION	
MBE or WBE Name:	Enter the business name for the MBE or WBE firm.
Fed ID No:	Enter the Federal Identification number associated with the MBE or WBE firm.
Work Category:	This field has a drop down menu; select one category from the list.
WBE Utilization:	Enter the total amount of the work assigned to the MBE or WBE in US dollars.
Total Commitments:	The MBE or WBE total utilization will be expressed in US dollars; <i>Excel will calculate and fill automatically.</i>
Contract MBE or WBE Goal:	The MBE or WBE goal will be expressed in US dollars; <i>Excel will copy from above section and fill automatically.</i>
Difference:	The difference between utilization and the goal expressed in US dollars; <i>Excel will calculate and fill automatically.</i>

NYSDOT DBE CHECKLIST OF FORMS

The following is a list of DBE related forms to be returned within 10 days to the MWBE Officer, Constance Jefferson constance.jefferson@cityofrochester.gov

Electronic forms can be obtained at the NYSDOT webpage at the following links:

<https://www.dot.ny.gov/forms>

- AAP 10LL – DBE Solicitation Log/Responses
- AAP 19LL – DBE Schedule of Utilization
- AAP 20LL and CONR 89 - DBE Utilization Worksheet and Approval to Subcontract