

RESPONSE CONTRACT DBE/MBE/WBE/SDVOB SOLICITATION

To:

Contract #:

DBE MBE WBE SDVOB

State Goal

From:

Federal Goal

Contractor

Date:

Response Contract Type: Job/Work Order Where & When Emergency Standby
(Check one) Requirements Other - Describe:

Contract Description:

Contract Locations:

This contract may contain the following requirements (Bidder check all that apply):

24-48 hour Mobilization Night Work Force Account Payment

We are actively seeking DBE/MBE/WBE/SDVOB participation (selected above) for the above contract with the New York State Department of Transportation (NYSDOT). The contract documents are available at: <https://www.dot.ny.gov/portal/page/portal/doing-business/opportunities/const-notice>

DBE/MBE/WBE/SDVOB to Complete Below:

In anticipation of occurrence, and in accordance with contract documents, should the need for subcontracting/material supply/equipment rental/professional services/manufacturing vendor opportunities arise, we need to be fully prepared.

Would you be willing to work/supply on this contract? Yes No

This contract may contain the requirements indicated above. Would you be willing to work/supply under the applicable requirements pending availability of your company's resources and personnel to work on the contract when contacted? Yes No

If yes, please indicate below which work/supply you are willing to participate in:

<u>24-48 Hour Mobilization</u>	<u>Night Work</u>	<u>Force Account Payment</u>
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> No	<input type="checkbox"/> No	<input type="checkbox"/> No

Describe the work/materials/services you are certified to provide as a: DBE MBE WBE SDVOB
Note: Only list the work code certifications applicable to the contract goal selected above.

Name/Title:

Date:

DBE/MBE/WBE/SDVOB