NEW YORK STATE OF OPPORTUNITY.

Office of General Services
Office of Business Diversity

Design and Construction
AN ISO 9001:2015 CERTIFIED ORGANIZATION
Office of Business Diversity, 29th Floor, Corning Tower
The Governor Nelson A. Rockefeller Empire State Plaza
Albany, New York 12242
Phone: (518) 486-9284 FAX: (518) 486-9285

CONTRACTOR'S SDVOB UTILIZATION PLAN

☐ Revised Plan

Contract No.: **Q1822-C**

Making false representations or including information evidencing a lack of good faith as part of, or in conjunction with, the submission of a Utilization Plan is prohibited by law and may result in penalties including, but not limited to, termination of a contract for cause, loss of eligibility to submit future bids, and/or withholding of payments. Firms that do not perform commercially useful functions may not be counted toward SDVOB utilization.
Submit completed responses to DCSDVOB@ogs.ny.gov

Contractor's Name, Address and Federal ID No.:	Contract Description/Location:	Date Proposal Approved:	Date Printed:	Bid Date:	SDVOB GOAL
Arold Construction Co., Inc. **51 Powder Mill Bridge Rd.** **Kingston, NY 12401** Federal ID No.: **14-1643021**	**Remove/Replace Fuel Oil Tank** **Woodbourne Correctional Facility**	**2/1/23**		**11/30/22**	**6%**
	Work/Job Order:	OGS Project Number: **Q1822C**	Work Order Value:	Contract Amount: **1,095,825.00**	

Certified SDVOB Name, Address and Phone No.	Description of Subcontracting/Supplies	Anticipated performance/purchase date(s)	Dollar Value of Subcontract/Supplies	FOR OGS USE ONLY	SEE BDC 328.1S
B.C. Trucking **62 River Glen Rd., Wallkill, NY 12589** Federal ID No.: **80-0156079**	**Haul Stone & Asphalt**	**5/1/23**	**$65,750.00**		☐
Federal ID No.:					☐
Federal ID No.:					☐
Federal ID No.:					☐

Pursuant to Executive Law Article 17-B, my firm will engage in a good faith effort to achieve the SDVOB goals on this contract.

Contractor's Signature:

Enter Name: **Karen A. Tobias**

Title: **Contract Administrator**

E-Mail Address: **karen.tobias@arold.us** Date: **2/6/23**

Contractor's Comments:

FOR OGS USE ONLY

☒ Accepted ☐ Accepted as Noted ☐ Notice of Deficiency Issued

SDVOB % _____ $ _____

OGS Authorized Signature: Enter Name: Shafia Booker Date: 2/7/2023

BDC 328S (Rev01)