|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **application for Waiver of mwbe participation goal**  (must be submitted before requesting final payment on the contract) | | | | | | | | | |
| **Section 1: Basic Information** | | | | | | | | | |
| Contractor’s Name: | | | | Federal Identification Number: | | | | | |
| Street Address: | | | | E-Mail Address: | | | | | |
| City, State, Zip Code: | | | | Telephone:  **()  -** | | | | | |
| Contract Number: | | | MWBE CONTRACT GOALS | | | | | | |
| MBE % | | WBE % | | | | |
|  | |  | | | | |
| **Section 2: Type of MWBE Waiver Requested** | | | | | | | | | |
| MBE Waiver  Total | Partial | If partial waiver, please enter the revised MBE percentage: | | | | | |  | |
| WBE Waiver  Total | Partial | If partial waiver, please enter the revised WBE percentage: | | | | | |  | |
| Please explain the reason for the waiver request: | | | | | | | | | |
|  | | | | | | | | | |
| **Section 3: Supporting Documentation** | | | | | | | | | |
| Provide the following documentation as evidence of your good faith efforts to meet the MWBE goals set forth in the contract and in support of your waiver application. If Attachment F is applicable, you must include the date on the space provided and also copies of the notice of application receipt.   * **Attachment A.** List of the general circulation, trade and MWBE-oriented publications and dates of publications soliciting for certified MWBE participation as a subcontractor/supplier and copies of such solicitation. * **Attachment B.** List of the certified MWBEs appearing in the Empire State Development MWBE directory that were solicited for this contract. Provide proof of dates or copies of the solicitations and copies of the responses made by the certified MWBEs. Describe specific reasons that responding certified MWBEs were not selected. * **Attachment C.** Descriptions of the contract documents/plans/specifications made available to certified MWBEs by the contractor when soliciting their participation and steps taken to structure the scope of work for the purpose of subcontracting with or obtaining supplies from certified MWBEs. * **Attachment D.** Description of the negotiations between the contractor and certified MWBEs for the purposes of complying with the MWBE goals of this contract. * **Attachment E.** Identify dates of any pre-bid, pre-award or other meetings attended by contractor, if any, scheduled by OGS with certified MWBEs whom OGS determined were capable of fulfilling the MWBE goals set in the contract * **Attachment F.** Waiver Pending ESD Certification (Check here if subcontractors or suppliers of Contractor are not certified M/WBE, but an application for certification has been filed with Empire State Development). Date of such filing with Empire State Development: . Must provide a copy of notice of application receipt issued by Empire State Development (ESD). * **Attachment G.** Other information deemed relevant to the request. | | | | | | | | | |
| **Section 4: Signature and Contact Information** | | | | | | | | | |
| **By signing and submitting this form, the contractor certifies that a good faith effort has been made to promote MWBE participation pursuant to the MWBE requirements set forth under the contract. Failure to submit complete and accurate information may result in a finding of noncompliance, non-responsibility, and a suspension or termination of the contract.** | | | | | | | | | |
| Prepared By: (Signature) | | | | | | | Date: | | |
| Name and Title of Preparer (Print or Type) | | | | | | | | | |
| **FOR OGS USE ONLY** | | | | | | | | | |
| Reviewed By: | | | | | | Date: | | |
| Decision:  Full MBE waiver granted  Partial MBE waiver granted; revised MBE goal: \_\_\_\_\_\_\_ %  MBE waiver denied  Full WBE waiver granted  Partial WBE waiver granted; revised WBE goal: \_\_\_\_\_\_\_%  WBE waiver denied | | | | | | | | |
| Approved By: | | | | | | Date: | | |
| Date Notice of Determination Sent: | | | | | | | | |
| Comments: | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **FOR DMWBD USE ONLY** | | |
| Reviewed By: | Date: |
| Waiver Granted:  Yes  No  MBE  WBE  Total Waiver  Partial Waiver  ESD Certification Waiver  \*Conditional  \*Notice of Deficiency Issued | |
| Comments | |