

SERVICE DISABLED VETERAN-OWNED BUSINESS ENTERPRISE REQUIREMENTS FOR COMMODITY AND SERVICE CONTRACTS

To Prospective Bidders:

Consistent with the State University of New York (SUNY) 's commitment and in accordance with Article 17-B of the New York State Executive Law, contractors are required to ensure that good faith efforts are made to include meaningful participation by Service Disabled Veteran-Owned Business in SUNY's SDVOB Program. The requirements apply to all SUNY contracts in excess of \$ 25,000.00 for commodities and services and in excess of \$ 100,000.00 for construction.

Receipt of SDVOB documentation is required with submittal of the bid or proposal for commodities and services related contracts. The SDVOB forms identified below shall be submitted by the low bidders.

- a. SDVOB Utilization Plan (Form 7564-107) provided by the University-wide MWBE Program Office.
- b. SDVOB MWBE EEO Staffing Plan (Form 7564-108) provided by the University-wide MWBE Program Office.
- c. Vendor/Contractor EEO Policy (Form 7564-104) provided by the University-wide MWBE Program Office.

If the SDVOB participation rate on SDVOB Utilization Plan is below 6%, the contractor will receive a written notice of deficiency of the Utilization Plan from the campus within twenty (20) business days of its submission, as required under 5 NYCRR Part 142.6(c).

The notice will include but not limited to the following:

- a. A list of NYS certified SDVOBs that the contractor could potentially use inside the work scope of the contract.
- b. Any other information which the MWBE Program Coordinator determines to be relevant to developing an approvable SDVOB Utilization Plan.

The contractor shall respond to the notice of deficiency by submitting to the MWBE Program Coordinator a revised SDVOB Utilization Plan within seven (7) business days, as required by 5 NYCRR Part 142.6 (e).

If the deficiency is not rectified and the SDVOB participation rate on the SDVOB Utilization Plan is still below 6%, the contractor should request a Waiver or Partial Waiver. The

Waiver Request submitted by the contractor will include but not limited to the following:

A request for partial or total waiver of MWBE goals are required by 5 NYCRR Part 142.6
 (f) on Request for Waiver (Form 7564-114) provided by the University-wide MWBE Program Office.

- b. Copy of the deficient Utilization Plan.
- c. Work Scope of this contract. If there are subcontracting opportunities, please provide documentation d, e, and f.
- d. Screenshot of searching result for available SDVOBs in <u>Directory of NYS Certified</u> <u>SDVOBs</u>.
- e. Copy of email messages containing the request for quote along with the responses from MWBEs.
- Forms recommended to obtain this information are: <u>7564-101</u> – MWBE Contractor Solicitation Letter <u>7564-102</u> – MWBE Participation Quote <u>7564-103</u> – SDVOB Contractor Unavailability Certification

Please submit the above documentations by mail, fax, or email:

SUNY System Administration at State University Plaza, Office of Diversity, Equity and Inclusion University-wide MWBE Program Albany, NY 12246 Fax: (518)-320-1548 Tel: (518)-320-1452 Email: MWBEProgram@suny.edu

- AND -

Please submit the above documentation to the Campus MWBE/SDVOB Program Coordinator:

Noelle Leli MWBE/SDVOB Program Coordinator Stony Brook University Hospital 2000 Ocean Avenue, Suite 1 Ronkonkoma, NY 11779 Tel: (631) 444-4350 Email: <u>Noelle.Leli@Stonybrookmedicine.edu</u>

Information regarding this legislation may be found at: <u>Division of Service-Disabled Veterans'</u> <u>Business Development</u> on the New York State Office General Services web site.