

### MWBE UTILIZATION WORKSHEET

Contract No.	County(ies)	PIN	Project Sponsor	Date Submitted

#### CONTRACTOR INFORMATION

<b>Name</b>		<b>Federal ID No.</b>	
<b>Address 1</b>		<b>Address 2</b>	
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Telephone No.</b>

#### SUBCONTRACTOR INFORMATION

<b>Name</b>		<b>Federal ID No.</b>	
<b>Address 1</b>		<b>Address 2</b>	
<b>City</b>	<b>State</b>	<b>Zip</b>	<b>Telephone No.</b>

**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 This approval may be rescinded at any time in the progress of the work if work of the Subcontractor is determined unsatisfactory.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.

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**Contractor Signature**

**Date**

**Subcontractor Signature**

**Date**

Item No.	Name	< Less Than 100%	\$ Specialty	\$ Non-Specialty	Agreed Amount \$	% to Count
<b>Totals</b>			\$0.00	\$0.00	\$0.00	

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.

<b>Approved For Sponsor By (Name)</b>		<b>Date Approved</b>	
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**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.

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**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
0	0	0	\$0.00	\$0.00
		<b>Totals</b>	\$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**

<b>Original Total Contract Price (Less Specialty Items)</b>		<b>% Original Total Contract Price Approved This Date</b>		<b>Approval #</b>
<b>% Original Total Contract Price Previously Approved</b>		<b>% Original Total Contract Price Approved To Date</b>		

<b>Approved For Sponsor By (Name)</b>		<b>Date Approved</b>	
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**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 speciality item per the Specification, enter the dollar amount here
- \$ Non-Specialty:** If a non-speciality 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