

The parties to the attached contract, license, lease, amendment or other agreement of any kind (hereinafter, "contract") agree to be bound by the following clauses which are hereby made a part of the contract (the word "Contractor" herein refers to any party other than the State or State University of New York, whether a Contractor, licensor, licensee, lessor, lessee or any other party; the State University of New York shall hereinafter be referred to as "SUNY"):

1. **EXECUTORY CLAUSE.** In accordance with Section 41 of the State Finance Law, the State shall have no liability under this contract to the Contractor or to anyone else beyond funds appropriated and available for this contract.

2. **PROHIBITION AGAINST ASSIGNMENT.** In accordance with Section 138 of the State Finance Law, this contract may not be assigned by the Contractor or its right, title or interest therein assigned, transferred, conveyed, sublet or otherwise disposed of without the State's previous written consent, and attempts to do so are null and void. Notwithstanding the foregoing, such prior written consent of an assignment of a contract let pursuant to Article XI of the State Finance Law may be waived at the discretion of SUNY and with the concurrence of the State Comptroller where the original contract was subject to the State Comptroller's approval, where the assignment is due to a reorganization, merger or consolidation of the Contractor's business entity or enterprise. SUNY retains its right to approve an assignment and to require that any Contractor demonstrate its responsibility to do business with SUNY. The Contractor may, however, assign its right to receive payments without SUNY's prior written consent unless this contract concerns Certificates of Participation pursuant to Article 5-A of the State Finance Law.

3. **COMPTROLLER'S APPROVAL.** In accordance with Section 112 of the State Finance Law and Section 355 of the Education Law, if this contract exceeds \$250,000, or, if this is an amendment for any amount to a contract which, as so amended, exceeds said statutory amount, or if, by this contract, the State agrees to give something other than money when the value or reasonably estimated value of such consideration exceeds \$25,000, it shall not be valid, effective or binding upon the State, and the State shall bear no liability, until it has been approved by the State Comptroller and filed in his or her office, or the pertinent pre-audit review period has elapsed. However, such pre-approval shall not be required for any contract established as a centralized contract through the Office of General Services or for a purchase order or other transaction issued under such centralized contract.

4. **WORKERS' COMPENSATION BENEFITS.** In accordance with Section 142 of the State Finance Law, this contract shall be void and of no force and effect unless the Contractor shall provide and maintain coverage during the life of this contract for the benefit of such employees as are required to be covered by the provisions of the Workers' Compensation Law.

5. **NON-DISCRIMINATION REQUIREMENTS.** To the extent required by Article 15 of the Executive Law (also known as the Human Rights Law) and all other State and Federal statutory and constitutional non-discrimination provisions, the Contractor will not discriminate against any employee or applicant for employment, nor subject any individual to harassment, because of age, race, creed, color, national origin, sexual orientation, gender identity or expression, military status, sex, disability, predisposing genetic characteristics, familial status, marital status, or domestic violence victim status or because the individual has opposed any practices forbidden under the Human Rights Law or has filed a complaint, testified, or assisted in any proceeding under the Human Rights Law. Furthermore, in accordance with Section 220-e of the Labor Law, if this is a contract for the construction, alteration or repair of any public building or public work or for the manufacture, sale or distribution of materials, equipment or supplies, and to the extent that this contract shall be performed within the State of New York, Contractor agrees that neither it nor its subcontractors shall, by reason of race, creed, color, disability, sex, or national origin: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. If this is a building service contract as defined in Section 230 of the Labor Law, then, in accordance with Section 239 thereof, Contractor agrees that neither it nor its subcontractors shall by reason of race, creed, color, national origin, age, sex or disability: (a) discriminate in hiring against any New York State citizen who is qualified and available to perform the work; or (b) discriminate against or intimidate any employee hired for the performance of work under this contract. Contractor is subject to fines of \$50.00 per person per day for any violation of Section 220-e or Section 239 as well as possible termination of this contract and forfeiture of all moneys due hereunder for a second or subsequent violation

6. **WAGE AND HOURS PROVISIONS.** If this is a public work contract covered by Article 8 of the Labor Law or a building service contract covered by Article 9 thereof, neither Contractor's employees nor the employees of its subcontractors may be required or permitted to work more than the number of hours or days stated in said statutes, except as otherwise provided in the Labor Law and as set forth in prevailing wage and supplement schedules issued by the State Labor Department. Furthermore, Contractor and its subcontractors must pay at least the prevailing wage rate and pay or provide the prevailing supplements, including the premium rates for overtime pay, as determined by the State Labor Department in accordance with the Labor Law. Additionally, effective April 28, 2008, if this is a public work contract covered by Article 8 of the Labor Law, the Contractor understands and agrees that the filing of payrolls in a manner consistent with Subdivision 3-a of Section 220 of the Labor Law shall be a condition precedent to payment by the State of any State--approved sums due and owing for work done upon the project.

7. **NON-COLLUSIVE BIDDING CERTIFICATION.** In accordance with Section 139-d of the State Finance Law, if this contract was awarded based upon the submission of competitive bids, Contractor affirms, under penalty of perjury, that its bid was arrived at independently and without collusion aimed at restricting competition. Contractor further affirms that, at the time Contractor submitted its bid, an authorized and responsible person executed and delivered to SUNY a non-collusive bidding certification on Contractor's behalf.

8. **INTERNATIONAL BOYCOTT PROHIBITION.** In accordance with Section 220-f of the Labor Law and Section 139-h of the State Finance Law, if this contract exceeds \$5,000, the Contractor agrees, as a material condition of the contract, that neither the Contractor nor any substantially owned or affiliated person, firm, partnership or corporation has participated, is participating, or shall participate in an international boycott in violation of the federal Export Administration Act of 1979 (50 USC App. Sections 2401 *et seq.*) or regulations thereunder. If such Contractor, or any of the aforesaid affiliates of Contractor, is convicted or is otherwise found to have violated said laws or regulations upon the final determination of the United States Commerce Department or any other appropriate agency of the United States subsequent to the contract's execution, such contract, amendment or modification thereto shall be rendered forfeit and void. The Contractor shall so notify the State Comptroller within five (5) business days of such conviction, determination or disposition of appeal (2 NYCRR § 105.4).

9. **SET-OFF RIGHTS.** The State shall have all of its common law, equitable and statutory rights of set-off. These rights shall include, but not be limited to, the State's option to withhold for the purposes of set-off any moneys due to the Contractor under this contract up to any amounts due and owing to the State with regard to this contract, any other contract with any State department or agency, including any contract for a term commencing prior to the term of this contract, plus any amounts due and owing to the State for any other reason including, without limitation, tax delinquencies, fee delinquencies or monetary penalties relative thereto. The State shall exercise its set-off rights in accordance with normal State practices including, in cases of set-off pursuant to an audit, the finalization of such audit by SUNY, its representatives, or the State Comptroller.

10. **RECORDS.** The Contractor shall establish and maintain complete and accurate books, records, documents, accounts and other evidence directly pertinent to performance under this contract (hereinafter, collectively, "the Records"). The Records must be kept for the balance of the calendar year in which they were made and for six (6) additional years thereafter. The State Comptroller, the Attorney General and any other person or entity authorized to conduct an examination, as well as SUNY and any other agencies involved in this contract, shall have access to the Records during normal business hours at an office of the Contractor within the State of New York or, if no such office is available, at a mutually agreeable and reasonable venue within the State, for the term specified above for the purposes of inspection, auditing and copying. SUNY shall take reasonable steps to protect from public disclosure any of the Records which are exempt from disclosure under Section 87 of the Public Officers Law (the "Statute") provided that: (i) the Contractor shall timely inform an appropriate SUNY official, in writing, that said Records should not be disclosed; and (ii) said Records shall be sufficiently identified; and (iii) designation of said Records as exempt under the Statute is reasonable. Nothing contained herein shall diminish, or in any way adversely affect, SUNY's or the State's right to discovery in any pending or future litigation.

11. **IDENTIFYING INFORMATION AND PRIVACY NOTIFICATION.**

(a) Identification Number(s). Every invoice or New York State Claim for Payment submitted to SUNY by a payee, for payment for the sale of goods or services or for transactions (e.g., leases, easements, licenses, etc.) related to real or personal property must include the payee's identification number. The number is any or all of the following: (i) the payee's Federal employer identification number, (ii) the payee's Federal social security number, and/or (iii) the payee's Vendor Identification Number assigned by the Statewide Financial System. Failure to include such number or numbers may delay payment. Where the payee does not have such number or numbers, the payee, on its invoice or Claim for Payment, must give the reason or reasons why the payee does not have such number or numbers.

(b) Privacy Notification. (1) The authority to request the above personal information from a seller of goods or services or a lessor of real or personal property, and the authority to maintain such information, is found in Section 5 of the State Tax Law. Disclosure of this information by the seller or lessor to SUNY or the State is mandatory. The principal purpose for which the information is collected is to enable the State to identify individuals, businesses and others who have been delinquent in filing tax returns or may have understated their tax liabilities and to generally identify persons affected by the taxes administered by the Commissioner of Taxation and Finance. The information will be used for tax administration purposes and for any other purpose authorized by law. (2) The personal information is requested by the purchasing unit of SUNY contracting to purchase the goods or services or lease the real or personal property covered by this contract or lease. The information is maintained in the Statewide Financial System by the Vendor Management Unit within the Bureau of State Expenditures, Office of the State Comptroller, 110 State Street,

Albany, New York 12236.

**12. EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITIES AND WOMEN.**

In accordance with Section 312 of the Executive Law and 5 NYCRR Part 143, if this contract is: (i) a written agreement or purchase order instrument, providing for a total expenditure in excess of \$25,000.00, whereby a contracting agency is committed to expend or does expend funds in return for labor, services, supplies, equipment, materials or any combination of the foregoing, to be performed for, or rendered or furnished to the contracting agency; or (ii) a written agreement in excess of \$100,000.00 whereby a contracting agency is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon; or (iii) a written agreement in excess of \$100,000.00 whereby the owner of a State assisted housing project is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon for such project, then the following shall apply and by signing this agreement the Contractor certifies and affirms that it is Contractor's equal employment opportunity policy that:

(a) The Contractor will not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability or marital status, shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its workforce on State contracts and will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination. Affirmative action shall mean recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation;

(b) at SUNY's request, Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein; and

(c) the Contractor shall state, in all solicitations or advertisements for employees, that, in the performance of the State contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.

Contractor will include the provisions of "a," "b," and "c" above, in every subcontract over \$25,000.00 for the construction, demolition, replacement, major repair, renovation, planning or design of real property and improvements thereon (the "Work") except where the Work is for the beneficial use of the Contractor. Section 312 does not apply to: (i) work, goods or services unrelated to this contract; or (ii) employment outside New York State. The State shall consider compliance by a contractor or sub-contractor with the requirements of any federal law concerning equal employment opportunity which effectuates the purpose of this clause. SUNY shall determine whether the imposition of the requirements of the provisions hereof duplicate or conflict with any such federal law and if such duplication or conflict exists, SUNY shall waive the applicability of Section 312 to the extent of such duplication or conflict. Contractor will comply with all duly promulgated and lawful rules and regulations of the Department of Economic Development's Division of Minority and Women's Business Development pertaining hereto.

**13. CONFLICTING TERMS.** In the event of a conflict between the terms of the contract (including any and all attachments thereto and amendments thereof) and the terms of this Exhibit A, the terms of this Exhibit A shall control.

**14. GOVERNING LAW.** This contract shall be governed by the laws of the State of New York except where the Federal supremacy clause requires otherwise.

**15. LATE PAYMENT.** Timeliness of payment and any interest to be paid to Contractor for late payment shall be governed by Article 11-A of the State Finance Law to the extent required by law.

**16. NO ARBITRATION.** Disputes involving this contract, including the breach or alleged breach thereof, may not be submitted to binding arbitration (except where statutorily authorized) but must, instead, be heard in a court of competent jurisdiction of the State of New York.

**17. SERVICE OF PROCESS.** In addition to the methods of service allowed by the State Civil Practice Law & Rules ("CPLR"), Contractor hereby consents to service of process upon it by registered or certified mail, return receipt requested. Service hereunder shall be complete upon Contractor's actual receipt of process or upon the State's receipt of the return thereof by the United States Postal Service as

refused or undeliverable. Contractor must promptly notify the State, in writing, of each and every change of address to which service of process can be made. Service by the State to the last known address shall be sufficient. Contractor will have thirty (30) calendar days after service hereunder is complete in which to respond.

**18. PROHIBITION ON PURCHASE OF TROPICAL HARDWOODS.** The Contractor certifies and warrants that all wood products to be used under this contract award will be in accordance with, but not limited to, the specifications and provisions of State Finance Law §165 (Use of Tropical Hardwoods), which prohibits purchase and use of tropical hardwoods, unless specifically exempted, by the State or any governmental agency or political subdivision or public benefit corporation. Qualification for an exemption under this law will be the responsibility of the contractor to establish to meet with the approval of the State.

In addition, when any portion of this contract involving the use of woods, whether supply or installation, is to be performed by any subcontractor, the prime Contractor will indicate and certify in the submitted bid proposal that the subcontractor has been informed and is in compliance with specifications and provisions regarding use of tropical hardwoods as detailed in Section 165 of the State Finance Law. Any such use must meet with the approval of the State, otherwise, the bid may not be considered responsive. Under bidder certifications, proof of qualification for exemption will be the responsibility of the Contractor to meet with the approval of the State.

**19. MACBRIDE FAIR EMPLOYMENT PRINCIPLES.** In accordance with the MacBride Fair Employment Principles (Chapter 807 of the Laws of 1992), the Contractor hereby stipulates that the Contractor either (a) has no business operations in Northern Ireland, or (b) shall take lawful steps in good faith to conduct any business operations in Northern Ireland in accordance with the MacBride Fair Employment Principles (as described in Section 165 of the New York State Finance Law), and shall permit independent monitoring of compliance with such principles.

**20. OMNIBUS PROCUREMENT ACT OF 1992.**

It is the policy of New York State to maximize opportunities for the participation of New York State business enterprises, including minority and women-owned business enterprises as bidders, subcontractors and suppliers on its procurement contracts.

Information on the availability of New York State subcontractors and suppliers is available from:

NYS Department of Economic Development  
Division for Small Business

Albany, NY 12245  
Tel: 518-292-5100  
Fax: 518-292-5884  
email: opa@esd.ny.gov

A directory of certified minority and women-owned business enterprises is available from:

NYS Department of Economic Development  
Division of Minority and Women's Business Development  
633 Third Avenue  
New York, NY 10017  
212-803-2414

email: mwbecertification@esd.ny.gov  
<https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp>

The Omnibus Procurement Act of 1992 (Chapter 844 of the Laws of 1992, codified in State Finance Law § 139-i and Public Authorities Law § 2879(3)(n)-(p)) requires that by signing this bid proposal or contract, as applicable, Contractors certify that whenever the total bid amount is greater than \$1 million:

(a) The Contractor has made reasonable efforts to encourage the participation of New York State Business Enterprises as suppliers and subcontractors, including certified minority and women-owned business enterprises, on this project, and has retained the documentation of these efforts to be provided upon request to SUNY;

(b) The Contractor has complied with the Federal Equal Employment Opportunity Act of 1972 (P.L. 92-261), as amended;

(c) The Contractor agrees to make reasonable efforts to provide notification to New York State residents of employment opportunities on this project through listing any such positions with the Job Service Division of the New York State Department of Labor, or providing such notification in such manner as is consistent with existing collective bargaining contracts or agreements. The Contractor agrees to document these efforts and to provide said documentation to the State upon request; and

(d) The Contractor acknowledges notice that the State may seek to obtain offset credits from foreign countries as a result of this contract and agrees to cooperate with the State in these efforts.

**21. RECIPROCITY AND SANCTIONS PROVISIONS.** Bidders are hereby notified that if their principal place of business is located in a country, nation, province, state or political subdivision that penalizes New York State vendors, and if the goods or services they offer will be substantially produced or performed outside New York State, the Omnibus Procurement Act of 1994 and 2000 amendments (Chapter 684 and Chapter 383, respectively, codified in State Finance Law § 165(6) and Public Authorities Law § 2879(5)) require that they be denied contracts which they would otherwise obtain.

NOTE: As of October 2019, the list of discriminatory jurisdictions subject to this provision includes the states of South Carolina, Alaska, West Virginia, Wyoming, Louisiana and Hawaii.

**22. COMPLIANCE WITH BREACH NOTIFICATION AND DATA SECURITY LAWS.** Contractor shall comply with the provisions of the New York State Information Security Breach and Notification Act (General Business Law § 899-aa; State Technology Law § 208) and commencing March 21, 2020 shall also comply with General Business Law § 899-bb.

**23. COMPLIANCE WITH CONSULTANT DISCLOSURE LAW.** If this is a contract for consulting services, defined for purposes of this requirement to include analysis, evaluation, research, training, data processing, computer programming, engineering, environmental health and mental health services, accounting, auditing, paralegal, legal or similar services, then in accordance with Section 163(4)(g) of the State Finance Law (as amended by Chapter 10 of the Laws of 2006), the Contractor shall timely, accurately and properly comply with the requirement to submit an annual employment report for the contract to SUNY, the Department of Civil Service and the State Comptroller.

**24. PURCHASES OF APPAREL AND SPORTS EQUIPMENT.** In accordance with State Finance Law Section 165(7), SUNY may determine that a bidder on a contract for the purchase of apparel or sports equipment is not a responsible bidder as defined in State Finance Law Section 163 based on (a) the labor standards applicable to the manufacture of the apparel or sports equipment, including employee compensation, working conditions, employee rights to form unions and the use of child labor; or (b) bidder's failure to provide information sufficient for SUNY to determine the labor conditions applicable to the manufacture of the apparel or sports equipment.

**25. PROCUREMENT LOBBYING.** To the extent this contract is a "procurement contract" as defined by State Finance Law §§ 139-j and 139-k, by signing this contract the Contractor certifies and affirms that all disclosures made in accordance with State Finance Law §§ 139-j and 139-k are complete, true and accurate. In the event such certification is found to be intentionally false or intentionally incomplete, the State may terminate the contract by providing written notification to the Contractor in accordance with the terms of the contract.

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**THE FOLLOWING PROVISIONS SHALL APPLY ONLY TO THOSE CONTRACTS TO WHICH A HOSPITAL OR OTHER HEALTH SERVICE FACILITY IS A PARTY**

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29. Notwithstanding any other provision in this contract, the hospital or other health service facility remains responsible for insuring that any service provided pursuant to this contract complies with all pertinent provisions of Federal, state and local statutes, rules and regulations. In the foregoing sentence, the word "service" shall be construed to refer to the health care service rendered by the hospital or other health service facility.

30. (a) In accordance with the 1980 Omnibus Reconciliation Act (Public Law 96-499), Contractor hereby agrees that until the expiration of four years after the furnishing of services under this agreement, Contractor shall make available upon written request to the Secretary of Health and Human Services, or upon request, to the Comptroller General of the United States or any of their duly authorized representatives, copies of this contract, books, documents and records of the Contractor that are necessary to certify the nature and extent of the costs hereunder.

(b) If Contractor carries out any of the duties of the contract hereunder, through a subcontract having a value or cost of \$10,000 or more over a twelve-month period, such subcontract shall contain a clause to the effect that, until the expiration of four years after the furnishing of such services pursuant to such subcontract, the subcontractor shall make available upon written request to the Secretary of Health and Human Services or upon request to the Comptroller General of the United States, or any of their duly authorized representatives, copies of the subcontract and books, documents and records of the subcontractor that are necessary to verify the nature and extent of the costs of such subcontract.

(c) The provisions of this section shall apply only to such contracts as are within the definition established by the Health Care Financing Administration, as may be amended or modified from time to time.

31. Hospital Retained Authority: Hospital Retained Authority: The Hospital retains direct, independent authority over the appointment and/or dismissal, in its sole discretion, of the facility's management level employees (including but not limited to, the Facility/Service Administrator/Director, the Medical Director, the Director of Nursing, the Chief Executive Officer, the Chief Financial Officer and the Chief Operating Officer) and all licensed or certified health care staff. The Hospital retains the right to adopt and approve, at its sole discretion, the facility's operating and capital budgets. The Hospital retains independent control over and physical possession of the facility's books and records. The Hospital retains independent control over and physical possession of the facility's operating policies and procedures. The Hospital retains full authority and responsibility for, and control over, the operations and management of the facility. The Hospital retains the right and authority to independently adopt, approve and enforce, in its sole discretion, policies affecting the facility's delivery of health care services. The Hospital retains the right to independently adopt, approve and enforce, at its sole discretion, the disposition of assets and authority to incur debts. The Hospital retains the right to approve, at its sole discretion, contracts for administrative services,

**26. CERTIFICATION OF REGISTRATION TO COLLECT SALES AND COMPENSATING USE TAX BY CERTAIN STATE CONTRACTORS, AFFILIATES AND SUBCONTRACTORS.** To the extent this contract is a contract as defined by Tax Law § 5-a, if the Contractor fails to make the certification required by Tax Law § 5-a or if during the term of the contract, the Department of Taxation and Finance or SUNY discovers that the certification, made under penalty of perjury, is false, then such failure to file or false certification shall be a material breach of this contract and this contract may be terminated, by providing written notification to the Contractor in accordance with the terms of the contract, if SUNY determines that such action is in the best interests of the State.

**27. IRAN DIVESTMENT ACT.** By entering into this contract, Contractor certifies in accordance with State Finance Law §165-a that it is not on the "Entities Determined to be Non-Responsive Bidders/Offerers pursuant to the New York State Iran Divestment Act of 2012" ("Prohibited Entities List") posted at:

<https://ogs.ny.gov/list-entities-determined--be-non-responsive-biddersofferers-pursuant-nys-iran-divestment-act-2012>

Contractor further certifies that it will not utilize on this contract any subcontractor that is identified on the Prohibited Entities List. Contractor agrees that should it seek to renew or extend this contract, it must provide the same certification at the time the contract is renewed or extended. Contractor also agrees that any proposed Assignee of this contract will be required to certify that it is not on the Prohibited Entities List before the contract assignment will be approved by the State.

During the term of the contract, should SUNY receive information that a person (as defined in State Finance Law §165-a) is in violation of the above-referenced certifications, SUNY will review such information and offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment activity which is in violation of the Act within 90 days after the determination of such violation, then SUNY shall take such action as may be appropriate and provided for by law, rule, or contract, including, but not limited to, imposing sanctions, seeking compliance, recovering damages, or declaring the Contractor in default.

SUNY reserves the right to reject any bid, request for assignment, renewal or extension for an entity that appears on the Prohibited Entities List prior to the award, assignment, renewal or extension of a contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the Prohibited Entities list after contract award.

**28. ADMISSIBILITY OF REPRODUCTION OF CONTRACT.** Notwithstanding the best evidence rule or any other legal principle or rule of evidence to the contrary, the Contractor acknowledges and agrees that it waives any and all objections to the admissibility into evidence at any court proceeding or to the use at any examination before trial of an electronic reproduction of this contract, in the form approved by the State Comptroller, if such approval was required, regardless of whether the original of said contract is in existence.

management and/or clinical services. The Hospital retains the right to approve, at its sole discretion, any facility debt. The Hospital retains the right to approve, at its sole discretion, settlements of administrative proceeding or litigation to which the facility is a party. No powers specifically reserved to the Hospital may be delegated to, or shared by, the Contractor or any other person. In addition, if there is any disagreement between the parties to this Agreement regarding control between the Hospital and the Contractor, the terms of this Section shall control.

**1. DEFINITIONS.** The following terms shall be defined in accordance with Section 310 of the Executive Law:

**STATE CONTRACT** herein referred to as "State Contract", shall mean: (a) a written agreement or purchase order instrument, providing for a total expenditure in excess of twenty-five thousand dollars (\$25,000.00), whereby the State University of New York ("University") is committed to expend or does expend funds in return for labor, services including but not limited to legal, financial and other professional services, supplies, equipment, materials or a combination of the foregoing, to be performed for, or rendered or furnished to the University; (b) a written agreement in excess of one hundred thousand dollars (\$100,000.00) whereby the University is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon; (c) and (d) a written agreement in excess of one hundred thousand dollars (\$100,000.00) whereby the University as an owner of a state assisted housing project is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon for such project.

**SUBCONTRACT** herein referred to as "Subcontract", shall mean any agreement for a total expenditure in excess of \$25,000 providing for services, including non-staffing expenditures, supplies or materials of any kind between a State agency and a prime contractor, in which a portion of the prime contractor's obligation under the State contract is undertaken or assumed by a business enterprise not controlled by the prime contractor.

**WOMEN-OWNED BUSINESS ENTERPRISE** herein referred to as "WBE", shall mean a business enterprise, including a sole proprietorship, partnership or corporation that is: (a) at least fifty-one percent (51%) owned by one or more United States citizens or permanent resident aliens who are women; (b) an enterprise in which the ownership interest of such women is real, substantial and continuing; (c) an enterprise in which such women ownership has and exercises the authority to control independently the day-to-day business decisions of the enterprise; (d) an enterprise authorized to do business in this state and independently owned and operated; (e) an enterprise owned by an individual or individuals, whose ownership, control and operation are relied upon for certification, with a personal net worth that does not exceed fifteen million dollars (\$15,000,000), as adjusted annually on the first of January for inflation according to the consumer price index of the previous year; and (f) an enterprise that is a small business pursuant to subdivision twenty of this section.

A firm owned by a minority group member who is also a woman may be certified as a minority-owned business enterprise, a women-owned business enterprise, or both, and may be counted towards either a minority-owned business enterprise goal or a women-owned business enterprise goal, in regard to any Contract or any goal, set by an agency or authority, but such participation may not be counted towards both such goals. Such an enterprise's participation in a Contract may not be divided between the minority-owned business enterprise goal and the women-owned business enterprise goal.

**MINORITY-OWNED BUSINESS ENTERPRISE** herein referred to as

"MBE", shall mean a business enterprise, including a sole proprietorship, partnership or corporation that is: (a) at least fifty-one percent (51%) owned by one or more minority group members; (b) an enterprise in which such minority ownership is real, substantial and continuing; (c) an enterprise in which such minority ownership has and exercises the authority to control independently the day-to-day business decisions of the enterprise; (d) an enterprise authorized to do business in this state and independently owned and operated; (e) an enterprise owned by an individual or individuals, whose ownership, control and operation are relied upon for certification, with a personal net worth that does not exceed fifteen million dollars (\$15,000,000.00), as adjusted annually on the first of January for inflation according to the consumer price index of the previous year; and (f) an enterprise that is a small business pursuant to subdivision twenty of this section.

**MINORITY GROUP MEMBER** shall mean a United States citizen or permanent resident alien who is and can demonstrate membership in one of the following groups: (a) Black persons having origins in any of the Black African racial groups; (b) Hispanic persons of Mexican, Puerto Rican, Dominican, Cuban, Central or South American of either Indian or Hispanic origin, regardless of race; (c) Native American or Alaskan native persons having origins in any of the original peoples of North America. (d) Asian and Pacific Islander persons having origins in any of the Far East countries, South East Asia, the Indian Subcontinent or Pacific Islands.

**CERTIFIED ENTERPRISE OR BUSINESS** shall mean a business verified as a minority or women-owned business enterprise pursuant to section 314 of the Executive Law. A business enterprise which has been

approved by the New York Division of Minority & Women Business Development ("DMWBD") for minority or women-owned enterprise status subsequent to verification that the business enterprise is owned, operated, and controlled by minority group members or women, and that also meets the financial requirements set forth in the regulations.

**2. TERMS.** The parties to the attached State Contract agree to be bound by the following provisions which are made a part hereof (the word "Contractor" herein refers to any party other than the University:

1(a) Contractor and its Subcontractors shall undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination. For these purposes, affirmative action shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation.

(b) Prior to the award of a State Contract, the Contractor shall submit an equal employment opportunity (EEO) policy statement to the University within the time frame established by the University.

(c) As part of the Contractor's EEO policy statement, the Contractor, as a precondition to entering into a valid and binding State Contract, shall agree to the following in the performance of the State Contract: (i) The Contractor will not discriminate against any employee or applicant for employment, will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination, and shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on State Contracts; (ii) The Contractor shall state in all solicitations or

advertisements for employees that, in the performance of the State Contract, all qualified applicants will be afforded equal employment opportunities without discrimination; (iii) At the request of the University the Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union, or representative will not discriminate, and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.

(d) Form 108 - Staffing Plan To ensure compliance with this Section, the Contractor shall submit a staffing plan to document the composition of the proposed workforce to be utilized in the performance of the Contract by the specified categories listed, including ethnic background, gender, and Federal occupational categories. Contractors shall complete the Staffing plan form and submit it as part of their bid or proposal or within a reasonable time, but no later than the time of award of the contract.

(e) Form 112 - Workforce Employment Utilization Report ("Workforce Report")

(i) Once a contract has been awarded and during the term of Contract, Contractor is responsible for updating and providing notice to SUNY of any changes to the previously submitted Staffing Plan. This information is to be submitted on a quarterly basis during the term of the contract to report the actual workforce utilized in the performance of the contract by the specified categories listed including ethnic background, gender, and Federal occupational categories. The Workforce Report must be submitted to report this information.

(ii) Separate forms shall be completed by Contractor and any subcontractor performing work on the Contract.

(iii) In limited instances, Contractor may not be able to separate out the

workforce utilized in the performance of the Contract from Contractor's and/or subcontractor's total workforce. When a separation can be made, Contractor shall submit the Workforce Report and indicate that the information provided related to the actual workforce utilized on the Contract. When the workforce to be utilized on the contract cannot be separated out from Contractor's and/or subcontractor's total workforce, Contractor shall submit the Workforce Report and indicate that the information provided is Contractor's total workforce during the subject time frame, not limited to work specifically under the contract.

(f) Contractor shall comply with the provisions of the Human Rights Law, all other State and Federal statutory and constitutional non-discrimination provisions. Contractor and subcontractors shall not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

(g) The Contractor shall include the provisions of this section in every Subcontract in such a manner that the requirements of the provisions will be binding upon each Subcontractor as to work in connection with the State Contract, including the requirement that Subcontractors shall undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination, and, when requested, provide to the Contractor information on the ethnic background, gender, and Federal occupational categories of the

employees to be utilized on the State Contract.

(h) To ensure compliance with the requirements of this paragraph, the University shall inquire of a Contractor whether the work force to be utilized in the performance of the State Contract can be separated out from the Contractor's and/or Subcontractors' total work force and where the work of the State Contract is to be performed. For Contractors who are unable to separate the portion of their work force which will be utilized for the performance of this State Contract, Contractor shall provide reports describing its entire work force by the specified ethnic background, gender, and Federal Occupational Categories, or other appropriate categories which the agency may specify.

(i) The University may require the Contractor and any Subcontractor to submit compliance reports, pursuant to the regulations relating to their operations and implementation of their affirmative action or equal employment opportunity program in effect as of the date the State Contract is executed.

(j) If a Contractor or Subcontractor does not have an existing affirmative action program, the University may provide to the Contractor or Subcontractor a model plan of an affirmative action program. Upon request, the Director of DMWBD shall provide a contracting agency with a model plan of an affirmative action program.

(k) Upon request, DMWBD shall provide the University with information on specific recruitment sources for minority group members and woman, and contracting agencies shall make such information available to Contractors

**3.** Contractor must provide the names, addresses and federal identification numbers of certified minority- and women-owned business enterprises which the Contractor intends to use to perform the State Contract and a description of the Contract scope of work which the Contractor intends to structure to

increase the participation by Certified minority- and/or women-owned business enterprises on the State Contract, and the estimated or, if known, actual dollar amounts to be paid to and performance dates of each component of a State Contract which the Contractor intends to be performed by a certified minority- or woman-owned business enterprise. In the event the Contractor responding to University solicitation is joint venture, teaming agreement, or other similar arrangement that includes a minority- and women owned business enterprise, the Contractor must submit for review and approval: i. the name, address, telephone number and federal identification of each partner or party to the agreement; ii. the federal identification number of the joint venture or entity established to respond to the solicitation, if applicable; iii. A copy of the joint venture, teaming or other similar arrangement which describes the percentage of interest owned by each party to the agreement and the value added by each party; iv. A copy of the mentor-protégé agreement between the parties, if applicable, and if not described in the joint venture, teaming agreement, or other similar arrangement.

**4. PARTICIPATION BY MINORITY GROUP MEMBERS AND WOMEN.** The University shall determine whether Contractor has made conscientious and active efforts to employ and utilize minority group members and women to perform this State Contract based upon an analysis of the following factors:

(a) Whether Contractor established and maintained a current list of recruitment sources for minority group members and women, and whether Contractor provided written notification to such recruitment sources that contractor had employment opportunities at the time such opportunities became available.

(b) Whether Contractor sent letters to recruiting sources, labor unions, or authorized representatives of workers with which contractor has

a collective bargaining or other agreement or understanding requesting assistance in locating minority group members and women for employment.

(c) Whether Contractor disseminated its EEO policy by including it in any advertising in the news media, and in particular, in minority and women news media.

(d) Whether Contractor has attempted to provide information concerning its EEO policy to Subcontractors with which it does business or had anticipated doing business.

(e) Whether internal procedures exist for, at a minimum, annual dissemination of the EEO policy to employees, specifically to employees having any responsibility for hiring, assignment, layoff, termination, or other employment decisions. Such dissemination may occur through distribution of employee policy manuals and handbooks, annual reports, staff meetings and public postings.

(f) Whether Contractor encourages and utilizes minority group members and women employees to assist in recruiting other employees.

(g) Whether Contractor has apprentice training programs approved by the N.Y.S. Department of Labor which provides for training and hiring of minority group members and women.

(h) Whether the terms of this section have been incorporated into each Subcontract which is entered into by the Contractor.

**5. PARTICIPATION BY MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISES.** Based upon an analysis of the following factors, the University shall determine whether Contractor has made good faith efforts to provide for meaningful participation by minority-owned and women-owned business enterprises which have been certified by DMWBD:

(a) Whether Contractor has actively solicited bids for Subcontracts from qualified



M/WBEs, including those firms listed on the Directory of Certified Minority and Women-Owned Business Enterprises, and has documented its good faith efforts towards meeting minority and women owned business enterprise utilization plans by providing, copies of solicitations, copies of any advertisements for participation by certified minority- and women-owned business enterprises timely published in appropriate general circulation, trade and minority- or women-oriented publications, together with the listing(s) and date(s) of the publications of such advertisements; dates of attendance at any pre-bid, pre-award, or other meetings, if any, scheduled by the University, with certified minority- and women-owned business enterprises, and the reasons why any such firm was not selected to participate on the project.

(b) Whether Contractor has attempted to make project plans and specifications available to firms who are not members of associations with plan rooms and reduce fees for firms who are disadvantaged.

(c) Whether Contractor has utilized the services of organizations which provide technical assistance in connection with M/WBE participation.

(d) Whether Contractor has structured its Subcontracts so that opportunities exist to complete smaller portions of work.

(e) Whether Contractor has encouraged the formation of joint ventures, partnerships, or other similar arrangements among Subcontractors.

(f) Whether Contractor has requested the services of the Department of Economic Development (DED) to assist Subcontractors' efforts to satisfy bonding requirement.

(g) Whether Contractor has made progress payments promptly to its Subcontractors.

(h) Whether the terms of this section have been incorporated into each Subcontract which is entered into by the Contractor. It shall be the responsibility of Contractor to

ensure compliance by every Subcontractor with these provisions.

#### **6. MWBE Utilization Plan.**

(a) The Contractor represents and warrants that Contractor has submitted an MWBE Utilization Plan prior to the execution of the contract.

(b) MWBE Utilization Plan (Form 7557-107).

Contractors are required to submit a Utilization Plan on Form 7557-107 with their bid or proposal. Complete the following steps to prepare the Utilization Plan:

- i. list NYS Certified minority- and women-owned business enterprises which the Contractor intends to use to perform the State contract;
- ii. insert a description of the contract scope of work which the Contractor intends to structure to increase the participation by NYS Certified minority- and women-owned enterprises on the State contract;
- iii. insert the estimated or, if known, actual dollar amounts to be paid to and performance dates of each component of a State contract which the Contractor intends to be performed by a NYS Certified minority- or women-owned business; and

(c) Any modifications or changes to the agreed participation by NYS Certified MWBEs after the Contract Award and during the term of the contract must be reported on a revised MWBE Utilization Plan and submitted to the SUNY University-wide MWBE Program Office.

(d) The University will review the MWBE Utilization Plan and will issue the Contractor a written notice of acceptance or deficiency within twenty (20) day of its receipt. A notice of deficiency shall include the:

- i. list NYS Certified minority- and women-owned business enterprises which the

Contractor intends to use to perform the State contract;

- ii. name of any MWBE which is not acceptable for the purpose of complying with the MWBE participation goals;

- iii. reasons why it is not an acceptable element of the Contract scope of work which the MWBE Program Office has determined can be reasonably structured by the Contractor to increase the likelihood of participation in the Contract by MWBEs; and
- iv. other information which the MWBE Program Office determines to be relevant to the MWBE Utilization Plan.

(e) The Contractor shall respond to the notice of deficiency within seven (7) business days of receipt by submitting to the University a written remedy in response to the notice of deficiency.

- i. If the written remedy that is submitted is not timely or is found to be inadequate, the University-wide MWBE Program Office shall notify the Contractor and direct the Contractor to submit, within five (5) business days, a request for partial or total waiver of MWBE participation goals on forms provided by the University-wide MWBE Program Office.

- ii. Failure to file the waiver form in a timely manner may be grounds for disqualification of the bid or proposal.

(f) The University may disqualify a Contractor as being non-responsive under the following circumstances:

- i. If a Contractor fails to submit a MWBE Utilization Plan;
- ii. If a Contractor fails to submit a written remedy to a notice of deficiency in a MWBE Utilization Plan;
- iii. If a Contractor fails to submit a request for waiver; or



iv. If the MWBE Program Office determines that the Contractor has failed to document Good Faith Efforts.

(g) Contractor agrees to use such MWBE Utilization Plan for the performance of MWBEs on the Contract pursuant to the prescribed MWBE goals set forth in Section III-A of this Appendix.

(h) Contractor further agrees that a failure to submit and/or use such MWBE Utilization Plan shall constitute a material breach of the terms of the Contract. Upon the occurrence of such a material breach, SUNY shall be entitled to any remedy provided herein, including but not limited to, a finding of Contractor non-responsiveness.

#### **7. Waivers.**

(a) For Waiver Requests Contractor should use (Form 7557-114) – Waiver Request.

(b) If the Contractor, after making good faith efforts, is unable to comply with MWBE goals, the Contractor may submit a Request for Waiver form documenting good faith efforts by the Contractor to meet such goals. If the documentation included with the waiver request is complete the University shall evaluate the request and issue a written notice of acceptance or denial within twenty (20) days of receipt.

(c) If University, upon review of the MWBE Utilization Plan and updated Quarterly MWBE Contractor Compliance Reports determines that Contractor is failing or refusing to comply with the Contract goals and no waiver has been issued in regards to such non-compliance, the University may issue a notice of deficiency to the Contractor. The contractor must respond to the notice of deficiency within seven (7) business days of receipt. Such response may include a request for partial or total waiver of MWBE Contract Goals.

#### **8. MWBE Contractor Compliance Report.**

Contractor is required to submit an MWBE Contractor Compliance Report (Form 7557-112) to the University by the 5<sup>th</sup> day following each end of quarter over the term of the Contract documenting the progress made towards achievement of the MWBE goals of the Contract. Compliance Reports for construction contracts (Form 7557-110) must be submitted on a monthly basis.

#### **9. GOALS. (a) GOALS FOR MINORITY AND WOMEN WORK FORCE PARTICIPATION.**

(i) The University shall include relevant work force availability data, which is provided by the DMWBD, in all documents which solicit bids for State Contracts and shall make efforts to assist Contractors in utilizing such data to determine expected levels of participation for minority group members and women on State Contracts.

(ii) Contractor shall exert good faith efforts to achieve such goals for minority and women's participation. To successfully achieve such goals, the employment of minority group members and women by Contractor must be substantially uniform during the entire term of this State Contract. In addition, Contractor should not participate in the transfer of employees from one employer or project to another for the sole purpose of achieving goals for minority and women's participation.

#### **(b) GOALS FOR MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISES PARTICIPATION.**

For all State Contracts in excess of \$25,000.00 whereby the University is committed to expend or does expend funds in return for labor, services including but not limited to legal, financial and other professional services, supplies, equipment, materials or an combination of the foregoing or all State Contracts in excess of \$100,000.00 whereby the University is committed to expend or does expend funds for the acquisition,

construction, demolition, replacement, major repair or renovation of real property and improvements thereon, Contractor shall exert good faith efforts to achieve a participation goal of 21 percent (21%) for Certified Minority-Owned Business Enterprises and 9 percent (9%) for Certified Women-Owned Business Enterprises.

**10. ENFORCEMENT.** The University will be responsible for enforcement of each Contractor's compliance with these provisions. Contractor, and each Subcontractor, shall permit the University access to its books, records and accounts for the purpose of investigating and determining whether Contractor or Subcontractor is in compliance with the requirements of Article 15-A of the Executive Law. If the University determines that a Contractor or Subcontractor may not be in compliance with these provisions, the University may make every reasonable effort to resolve the issue and assist the Contractor or Subcontractor in its efforts to comply with these provisions. If the University is unable to resolve the issue of noncompliance, the University may file a complaint with the DMWBD.

Failure to comply with all of the requirements herein may result in a finding of non-responsiveness, non-responsibility and/or a breach of contract, leading to the withholding of funds or such other actions, remedies or enforcement proceedings as allowed by the Contract.

#### **11. DAMAGES FOR NON COMPLIANCE.**

Where the University determines that Contractor is not in compliance with the requirements of the Contract and Contractor refuses to comply with such requirements, or if Contractor is found to have willfully and intentionally failed to comply with the MWBE participation goals, Contractor shall be obligated to

liquidated damages to the University. Such liquidated damages shall be calculated as an amount equaling the difference between:

- a. All sums identified for payment to MWBEs had the Contractor achieved the contractual MWBE goals; and
- b. All sums actually paid to MWBEs for work performed or materials supplied under the Contract.

In the event a determination has been made which requires the payment of liquidated damages and such identified sums have not been withheld by the University, Contractor shall pay such liquidated damages to the University within sixty (60) days after such damages are assessed, unless prior to the expiration of such sixtieth day, the Contractor has filed a complaint with the Director of the

Division of Minority and Woman Business Development pursuant to Subdivision 8 of Section 313 of the Executive Law in which event the liquidated damages shall be payable if Director renders a decision in favor of the University.

**STATE UNIVERSITY OF NEW YORK  
CONSULTANT AGREEMENT FOR STUDIES**

This Agreement made as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, for Contract Number \_\_\_\_\_ by and between STATE UNIVERSITY OF NEW YORK, \_\_\_\_\_, with its principal office located at \_\_\_\_\_, hereinafter referred to as "University" and \_\_\_\_\_ having its principal office located at \_\_\_\_\_, hereinafter referred to as "Consultant", hereinafter the University and Consultant are collectively referred to as the "Parties".

**WITNESSETH:**

WHEREAS, the University desires to explore the viability of a Project which may include the repair, rehabilitation, reconstruction or improvement of University facilities; and

WHEREAS, the Consultant is an entity that has experience in and is capable of preparing feasibility studies as required herein and desires to provide such services in accordance with the terms and conditions of this Agreement; and

WHEREAS the University desires to engage the Consultant under the terms of this Agreement to provide its experience, skills, and supervision to prepare such a study to determine the viability of a Project to repair, rehabilitation, reconstruction or improvement of the University facilities; and

WHEREAS, said Study is conducted under Project Number \_\_\_\_\_, titled \_\_\_\_\_ at \_\_\_\_\_, Agency Code \_\_\_\_\_, for a total fee of \$ \_\_\_\_\_, ( \_\_\_\_\_), and  
*in figures* *in words*

NOW, THEREFORE, in consideration of the mutual covenants herein, the Parties agree as follows:

**Article I  
CONSULTANT'S BASIC SERVICES**

The Agreement term is \_\_\_\_\_ through \_\_\_\_\_.

The Consultant shall provide such professional services as may be necessary to complete the Study under this Agreement. Unless specifically stated in the Request for Qualifications, the Study shall include, but is not limited to, the following:

**\*\*\*Insert information defining the study and the program or project.**

**SECTION A - GENERAL SERVICES**

1. Determine the staffing and subconsultants necessary for the timely performance of the services required hereunder to meet the University's requirements.
2. Periodically advise the University of the progress of the Study.
3. Attendance, together with its subconsultants, at all meetings reasonably required by the University and the taking, preparation and distribution of minutes of all such meetings.

## **SECTION F - ACTIONS OR PROCEEDINGS AGAINST THE UNIVERSITY**

No action or proceeding shall lie or be maintained by the Consultant, or anyone claiming under or through the Consultant, against the University or any of its trustees, officers, agents or employees, upon any claim arising out of or based upon this Agreement or any breach thereof or by reason of any act or omission of the University or its trustees, officers, agents or employees, unless such action or proceeding is commenced within one (1) year after the University's acceptance of the Study.

## **SECTION G – RELATIONSHIP OF THE PARTIES**

The relationship of the Consultant to the University shall be that of an independent contractor. Nothing within this Agreement or in the activities contemplated by the Parties hereunder shall be deemed to create an agency, partnership, employment or joint venture relationship between the Parties or any of their Subcontractors. The Parties agree that the Consultant shall not be considered the University's exclusive provider of any services provided hereunder. Notwithstanding anything to the contrary herein, nothing within this Agreement shall be construed as a commitment by the University to place future Projects under contract with the Consultant.

## **SECTION H – CONFIDENTIALITY**

The consultant shall not issue any media releases, public announcements, or disclosures relating to this Agreement without prior written authorization by the University.

## **SECTION I – NOTICES**

All notices (including requests, consents or waivers) made under this Agreement shall be in writing and delivered by prepaid means providing proof of delivery to the addresses shown below. Notices are effective upon receipt. No amendment or modification to any provision of this Agreement will be effective unless in writing and signed by a duly authorized representative of both Parties.

### **State University of New York**

Name  
Title  
Address  
Phone

### **Consultant**

Name  
Title  
Address  
Phone

## **SECTION J– SEVERABILITY**

In the event that any of the portion of the Agreement is held by a court or other tribunal of competent jurisdiction to be unenforceable, that portion shall be omitted and a new enforceable provision shall be negotiated by the Parties to accomplish the intent of the omitted portion of the Agreement as nearly as practicable. The remainder of the Agreement shall remain in full force and effect.

## **SECTION K- ENTIRE AGREEMENT**

This Agreement with all attachments, including Exhibit A and Exhibit A-1, and all other applicable attachments, forms the entire agreement between the Parties and supersedes all written or oral, prior or contemporaneous communications between the Parties relating to the subject matter of this Agreement. In the event of any conflict between the terms and conditions set forth in this Agreement, the following order of precedence shall apply: (1) Exhibit A and SUNY Exhibit A-1; (2) this Agreement; (3) Request For Qualifications and Addendums; (4) Consultant's Proposals.

## **SECTION I – GOVERNING LAW**

This Agreement shall be governed, construed and enforced in accordance with the laws of New York State, excluding New York State's choice of law principles, and all claims relating to or arising out of this Agreement or the breach thereof, whether sounding in contract, tort or otherwise, shall likewise be governed by the laws of New York State, excluding the New York choice of law principles. Consultant agrees to submit itself to such courts' jurisdiction.

## **SECTION M – CONSULTANT RESPONSIBILITY**

and such other pertinent data including grants and contracts.

## **Article II ADDITIONAL OBLIGATIONS AND RESPONSIBILITIES**

### **SECTION A - SUBCONSULTANTS**

The Consultant shall not engage, contract with or use the services of any subconsultant without obtaining the prior written approval of the University. The Consultant shall submit for approval a report of the scope of services to be provided by each of its subconsultants. Such report shall include acknowledgement by the subconsultant. No provision of this Agreement and no approval by the University of the scope of the services to be provided by the subconsultants shall be construed as an agreement between the University and any subconsultant of the Consultant or with any person, firm or corporation engaged by, contracted with, or whose services are utilized by the Consultant. Nor shall it in any way affect the responsibilities of the Consultant hereunder. Unless otherwise agreed to in writing by the University the fees of any subconsultants retained by the Consultant shall be deemed covered by the Total Fee to be paid by the University to the Consultant.

### **SECTION B - CONSULTANT'S PERSONNEL**

All personnel assigned by the Consultant to the Study shall be required to cooperate fully with personnel assigned by the University to the Study. In the event the Consultant's personnel fail to so cooperate, they shall be relieved of their duties in connection with the Study at the request of the University.

### **SECTION C - COORDINATION**

The Consultant shall designate one person who, on its behalf, shall be responsible for coordinating all of the services to be rendered by the Consultant hereunder. Such designee shall be subject to approval by the University.

### **SECTION D - GRAPHICS AND REPORTS**

The graphics and reports prepared by the Consultant shall conform with all applicable laws, governmental rules and regulations, and the requirements of the University. The Consultant shall be responsible for obtaining all required permits, approvals and clearances from the appropriate state and local authorities with the exception of those required to be obtained by the contractor or University.

### **SECTION E - PATENTS**

The graphics and reports prepared by the Consultant shall not, without the prior written approval of the University, specify or require any patented article, design or process which is of a proprietary nature or requires payment of royalties for its use by the University.

### **SECTION F - GRANTS AND LOANS**

In the event that the University is a recipient of or applicant for a grant or loan for the Project or Study from any individual, firm, association, corporation or foundation or from any governmental department or agency, the Consultant shall support such efforts without additional compensation for up to forty (40) direct labor cost hours. Support shall include the attendance at all conferences requested by the party making the grant or loan, submittal of all necessary studies, drawings, specifications, documents, forms and estimates for the approval of such party, preparation of reports for grant or loan requirements, and revision of any and all studies, drawings and specifications for the Study to comply with the requirements of the aforesaid party in connection with the grant or loan. If, in the judgment of the University, any of such revisions are caused by a change in the requirements of the party making the grant or loan and are found to be necessary after the Consultant's performance of part of the work to be revised, the Consultant will be entitled to extra compensation in the amount expressly approved by the University.

### **SECTION G - REPRODUCTIONS**

The Consultant, at its own cost and expense, shall supply reproductions of graphics, reports, plans, specifications, and other data and documents pertaining to the Study for its own use and interoffice use with its sub-consultants.

## SECTION B - SPECIFIC SERVICES FOR STUDIES

1. Assist the University in defining all aspects of the scope of the Project. For facility-related studies this includes meetings with the primary space users, the collection of detailed room data, technical aspects of the proposed work, development of a Program Budget, and development of a construction schedule, and phasing and/or surge requirements. For site-related studies this include sufficient utility, topographical, environmental, traffic, and pedestrian aspects of the proposed work, development of a Program Budget, and development of a construction schedule and phasing requirements.
2. Identify all constraints, especially as the same may be affected by Code or environmental requirements, or influence site location, or affect structural, building, mechanical, electrical, plumbing systems.
3. Coordinate and follow the State University Construction Fund (SUCF) Bulletins and Directives, and the State University of New York Space Guidelines ("Facilities Programming Standards") as may be required to successfully complete the Study, or as required by the University.
4. The Study will be in a format that is acceptable to the University and include, but not be limited to:
  - a) A descriptive summary stating the problem to be addressed by the Study in programmatic, non-technical terms. A description of the work indicating where and what will be done to solve the problem. A quantitative description of the Project scope. (i.e., square feet, capacity, etc.).
  - b) A general description of the background material that identifies the purpose, philosophy, goals and objectives of the Study; the condition and utilization of the existing facility; the academic or administrative units to be served; and the Study's role in fulfilling the above.
  - c) A list of Project alternatives and statements about the alternatives, and a justification for the preferred course of action.
  - d) A list of the academic, administrative and support units to be accommodated. A list of the major activities of each unit (i.e., teaching research administration, public service, or other activity), and primary and secondary relationships to each other and other University units and an explanation of contacts with, or relationships to, external entities, if any.
  - e) Space descriptions which include, but are not limited to adjacencies, space area and height, MEP requirements, IT, telephone, data, room finishes, and other special requirements.
  - f) An analysis and basis for recommendation of the structural, mechanical, electrical, plumbing, building systems and site utilities, as well as the identification of environmental issues, and the presence of hazardous materials requiring abatement as applicable.
  - g) General energy conservation measures, Energy Code compliance, compliance with Executive Order 111, and LEED accreditation as/if applicable.
  - h) Demonstrate New York State Building Code compliance through a basic evaluation that identifies Use and Occupancy Classification, Height and Area analysis, Construction Classification, Fire Resistance Ratings, Interior Finishes, Fire Protection systems and Exiting Egress and Handicapped Access.
  - i) Site recommendations for access (general pedestrian, handicapped, emergency vehicle and building services), and landscape and amenities.
  - j) Requirements for construction schedules, project phasing and the identification of surge requirements.
  - k) A system level cost estimate for each of the concepts and options presented. All costing shall be in a format acceptable to the University and in compliance with SUFC's Project Cost Reporting Guide.
  - l) Supporting information, including historical and projected enrollment for students, faculty, support staff,

The University shall be entitled to be supplied with one computer readable copy in accordance with formats specified by the University and a maximum of six (6) hard copy reproductions of any plans, specifications, reports and other data and documents required to be prepared by the Consultant pursuant to Article I.

## **SECTION H – CLAIMS**

In the event any claim is made or any action brought in any way relating to the Study the Consultant, without additional compensation, will diligently render to the University any and all assistance which the University may require of the Consultant. Such assistance shall include but is not limited to, the making of analyses and reports. The Consultant shall not be required by the University, to prepare mock-ups, make tests or testify at a trial or pre-trial proceeding without extra compensation. Notwithstanding the foregoing, the Consultant shall furnish such services at its own cost and expense in the event the claim or action has arisen from the negligence of the Consultant or the failure of the Consultant to properly and fully perform its obligations and responsibilities under this Agreement.

## **SECTION I - CHANGES AND/OR REVISIONS**

At any time during the term of this Agreement the Consultant shall change and/or revise any and all drawings and specifications, graphics, and text of the Study, upon the request of the University.

## **SECTION J – SUPERVISION AND DIRECTION**

The services to be performed by the Consultant shall at all times be subject to the general supervision and direction of the University. The University shall determine every question of fact which may arise in relation to the interpretation of this Agreement and performance by the Parties of their respective obligations and responsibilities. Any such decision by the University shall be final, conclusive and binding upon the Consultant unless determined by a court of competent jurisdiction to have been fraudulent, capricious, arbitrary or so grossly erroneous as to necessarily imply bad faith.

The University reserves the right to have the State University Construction Fund (Fund) act on its behalf at any time or during any phase of the Study authorized by this Agreement. Such designation of the Fund to act on behalf of the University shall be in writing addressed to the Consultant and signed by the University.

## **Article III PAYMENT FOR SERVICES**

### **SECTION A - BASIC COMPENSATION**

1. During the duration of the Study, the University shall make monthly installment payments to the Consultant. The amount of the monthly installment payments shall be in proportion to the amount of services rendered by the Consultant as determined by the University on its receipt of reports from the Consultant as to the progress of the services furnished in the respective phases.
2. For the purposes of this Agreement, the term "Total Fee" shall mean the total compensation payable to the Consultant under the provisions of subdivisions (1), (2) and (3) of this Section. The Total Fee shall be a negotiated lump sum and shall include any and all costs for subconsultants, telephone, postage, travel and meals, provided in connection with the Study. All of the services required to be provided by the Consultant hereunder shall be deemed to be covered by the Total Fee and the Consultant shall not be entitled to extra compensation or reimbursement of unauthorized additional expenses.

The University reserves the right to obtain certified payroll records in support of any application for payment from both the Consultant and any subconsultants.

3. Notwithstanding the foregoing, in the event that the University, elects to suspend all or any part of the Study, the Consultant shall be paid for its services as follows: (1) for services performed by the Consultant prior to such suspension, a sum equal to the percentage of completion prior to the suspension; and (2) for services performed by the Consultant following the resumption of all or any part of the services, a renegotiated sum determined by University and the Consultant. Substantive program changes made by the University shall, in no way, affect previous payments made to the Consultant.



#### **Article IV OWNERSHIP OF DOCUMENTS**

The plans, drawings, specifications, reports, renderings, models, and other documents to be prepared and furnished by the Consultant pursuant to this Agreement shall be the property of the University. The Consultant shall not publish or disseminate to third parties information pertaining to the Project or Study, or any part or aspect thereof, without first obtaining written approval from the University.

#### **Article V SURVEYS, BORINGS AND TEST DATA**

The University shall furnish the Consultant such topographic, utility and property surveys, borings and test pit data as it may have and the Consultant shall obtain such additional topographic, utility and property surveys, borings and test pit data as may be required to complete the study. Such additional surveys, borings and data, the obtainment of which is approved in writing by the University, shall be paid for by the University in the amount expressly approved by the University. The Consultant agrees that it will make no claim against the University by reason of such surveys, borings and data unless the same are found to be inaccurate and in the opinion of the University, the Consultant is caused to revise all or any part of the Study solely as a result of its inaccuracy. In such case the University will compensate the Consultant in the amount expressly approved by the University. ).

#### **Article VI TERMINATION OF AGREEMENT**

##### **SECTION A - PERSONAL SERVICES**

It is understood between the Parties that this Agreement is intended to secure the personal services of the Consultant or Consultants (if a partnership) because of its or their ability or reputation and that this Agreement shall not be assigned, sublet or transferred without the prior written consent of the University.

##### **SECTION B - DEATH OR DISABILITY**

In case of the death or disability of one or more but not all of the persons referred to as Consultant, the rights and duties of the Consultant shall, at the election of the University, devolve upon the survivor or survivors of them who shall be obligated to perform the services required under this agreement and the University shall make all payments due under this Agreement to the survivors.

##### **SECTION C – DISSOLUTION OR BANKRUPTCY OF THE CONSULTANT**

In the event of the dissolution or bankruptcy of the Consultant, the University may terminate this Agreement and all drawings, specifications, reports and other data and records pertaining to the Study, in the custody or control of the Consultant, shall be delivered to the University. The University shall pay the legal representative of the Consultant as directed by the bankruptcy trustee all amounts due by the University to the Consultant, to the date of termination, in accordance with the provisions of this Agreement.

##### **SECTION D – TERMINATION**

1. The University shall have the right to terminate this contract early for: (i) unavailability of funds; (ii) cause; (iii) convenience, (iv) in the event the State Finance Law sections 139-j and 139-k certifications are found to be false or incomplete or (v) or if applicable, the Department of Taxation and Finance Contractor Certification form, ST 220-CA, statements are found to be false or incomplete. The University may also postpone, delay, suspend or abandon all or any part of any Study placed under this Agreement.

In the event of such termination, postponement, delay, suspension or abandonment, the Consultant shall deliver to the University all plans, drawings, specifications, reports and other data and records pertaining to the Project or

Study. The University shall pay to the Consultant all amounts due for actual work performed. If the University postpones, delays or suspends the Study after commencement of the Consultant's performance of services and subsequently, after a lapse of time, directs the resumption of performance of services by the Consultant if in the judgment of the University, the Consultant is caused to do extra work as a result thereof, which it would not have otherwise had to do, it will be entitled to extra compensation for such extra work in the amount expressly approved by the University. Except as expressly provided herein such termination, postponement, delay, suspension or abandonment shall not give rise to any cause of action or claim against the University for damages, extra remuneration or loss of anticipated profits. In the event such termination, postponement, delay, suspension or abandonment is caused by the Consultant's failure to fulfill its obligations or responsibilities under this Agreement, the Consultant shall remain liable to the University for all damages suffered by it by reason of such failure, including, but not limited to, any excess costs incurred in completing the Study by the use or employment of other Consultants or otherwise.

## **Article VII**

### **LIABILITY OF THE CONSULTANT**

1. To the fullest extent permitted by law, in addition to any liability or obligations of the Consultant to the University that may exist under any other provisions of this Agreement or by statute or otherwise, the Consultant shall assume all risks of liability for its performance, and that of any of its officers, employees, suppliers, subconsultants, subcontractors or agents and shall be solely responsible and liable for all liabilities, losses, damages, costs or expenses, including attorney's fees, arising from any claim, action or proceeding relating to or in any way connected with the performance of this Agreement and covenants and agrees to defend if requested, indemnify and hold harmless the State of New York, State University of New York, the State University Construction Fund, its agents, officers and employees, from any and all liability, demands, claims, suits, causes of action and losses of whatever kind and nature, arising out of or in connection with its performance of any service or contract resulting from this Agreement, including negligence, active or passive or improper conduct of the Consultant, its officers, subconsultants, agents, suppliers, subcontractors or employees, errors or omissions of the Consultants, its subconsultants, suppliers, agents or employees, or the failure by the Consultant, its officers, subconsultants, agents, subcontractors or employees to perform any obligations or commitments to the State of New York, the State University of New York, the State University Construction Fund, its agents, officers, and employees, or third parties arising out of or resulting from this Agreement, the performance of the services, or the work.

2. To the fullest extent permitted by law, the Consultant shall also indemnify the State of New York, State University of New York, the State University Construction Fund, its agents, officers and employees for breach of contract not related to professional services.

3. The Consultant represents it and its subconsultants, subcontractors, agents, employees and officers shall possess the license, experience, knowledge and character necessary to qualify them individually for the particular duties they perform in connection with the Project. For the purpose of this Agreement, the terms "inspection" and/or "administration" shall not be interpreted as the Consultant's guarantee of any contractor's workmanship or that such contractors will not breach their construction contract.

4. Prior to the commencement of the work to be performed by the Consultant, the Consultant shall submit to the University, certificates of insurance showing evidence of compliance with all insurance requirements contained in the contract. Certificates of Insurance (with the exception of Workers' Compensation and Disability) must be provided on an ACORD 25 Certificate of Insurance, or an equivalent form, and shall reference the project, contract or agreement number. Certificates of Insurance shall disclose any deductible, self insured retention, aggregate limit or any exclusion to the policy that materially changes the coverage required by the contract; specify the additional insureds and named insureds as required therein; and be signed by an authorized representative of the insurance carrier or producer. Deductibles or self-insured retentions above \$250,000 are subject to approval by the University and additional security may be required. Only original documents will be accepted.

5. All insurance shall provide that the required coverage apply on a primary and not on an excess or contributing basis as to any other insurance that may be available to the University for any claim arising from the Consultant's work under this Agreement, or as a result of Consultant's activities. Any other insurance maintained by the University shall be in excess of and shall not contribute to the Consultant's insurance regardless of any "other insurance" clause contained in the University's own policy of insurance.

6. All insurance shall be maintained with insurance carriers authorized to do business in New York State and rated at least "A-" by A.M. Best Company. The Consultant shall cause all insurance to be in full force and effect as of the commencement date of this contract and to remain in full force and effect throughout the term of the contract and as further required by the contract. Not less than thirty days prior to the expiration date or renewal date, the

Consultant shall supply the University with updated replacement certificates of insurance and endorsements. The Consultant shall advise the University of any letter or notification that cancels, materially changes, or non- renews the policy and Consultant shall require the insurance carrier(s) to copy the University on any letter or notification that cancels, materially changes, or non- renews the policy. If required by the University, Consultant shall deliver to the University within forty-five (45) days of such request, a copy of any or all policies of insurance not previously provided, certified by the insurance carrier as true and complete.

7. Should the Consultant engage a subconsultant or subcontractor, the Consultant shall impose the insurance requirements in this document on those entities. Consultant shall keep the subconsultant certificates of insurance on file and produce them upon the demand of the University.

8. The Consultant shall obtain and maintain in full force and effect, the following insurance with limits not less than those described below and as required by the terms of the contract, or as required by law, whichever is greater. The Commercial General Liability policy, and any umbrella/excess policies used to meet the "Each occurrence" limits specified below, must be endorsed to be primary with respects to the coverage afforded the Additional Insureds.

i. Commercial General Liability Insurance

Which coverage shall include, but not be limited to coverage for bodily injury, property damage, personal/advertising injury, premises liability, independent contractors, blanket contractual liability including tort liability of another assumed in contract, liability arising from all work and operations under this Agreement, defense and indemnification obligations, including those assumed under contract, cross liability coverage for additional insureds, products/completed operations for a term no less than three years commencing upon acceptance of the work, explosion, collapse, and underground hazards, contractor means and methods, liability resulting from Section 240 or Section 241 of the NYS Labor Law, and products/completed operations with a limit of not less than \$2,000,000 for each occurrence and general aggregate limit of not less than \$2,000,000.

ii. Workers Compensation and Disability Benefits as required by New York State.

Consultant shall procure and maintain Workers Compensation and Disability Benefits Coverage for the life of this Agreement for the benefit of employees required to be covered by the New York State Workers Compensation Law and the New York State Disability Benefits Law. Evidence of coverage must be provided on forms specified by the Chariman of the Workers Compensation Board.

iii. Comprehensive Business Automobile Liability Insurance with a limit of no less than (\$1,000,000) each accident covering liability arising out of the use of any motor vehicle in connection with the work, including owned, leased, hired, and non owned vehicles bearing, or, under the circumstances under which they are being used, required by the Motor Vehicle Laws of the State of New York to bear license plates. Such policy shall name the State of New York, State University of New York, and the State University Construction Fund as additional insureds. If the contract involves the removal of hazardous waste from the project site or otherwise transporting hazardous materials, pollution liability coverage for covered autos shall be provided by form CA 99 48 03 06 or CA 00 12 03 06 and the Motor Carrier Act Endorsement (MCS90) shall be attached.

iv. Consultant shall procure and maintain during and for a period of three (3) years after the completion of the contract, Professional Liability insurance (Errors and Omissions) with a limit of \$2,000,000.

Such insurance shall apply, but not be limited to, any negligent act, error, or omission in the rendering or failing to render professional services required under the contract and if the project involves abatement, removal, repair, replacement, enclosure, encapsulation, and/or disposal of any hazardous material or substance, it may not exclude bodily injury, property damage, pollution or asbestos related claims, testing, monitoring, measuring, or laboratory analyses. If applicable, the Consultant shall provide coverage of the Consultant's negligent act, error, or omission in rendering or failing to render professional services required by this Contract arising out of specifications, installation, modification, abatement, replacement or approval of products, materials or processes containing pollutants, and the failure to advise of or detect the existence or the proportions of pollutants. The professional liability insurance may be issued on a claims-made policy form, in which case the Professional shall procure at its sole expense, extended Discovery Clause coverage of up to three (3) years after work is completed if coverage is cancelled or not renewed. Written proof of this extended reporting period must be provided to the University prior to expiration or cancellation.

9. When the limits of the CGL, Auto, and/or Employers Liability policies procured are insufficient to meet the limits specified, the Consultant shall procure and maintain commercial Umbrella and/or Excess Liability policies with limits in excess of the primary, provided, however, that the total amount of insurance coverage is at least equal to

the requirements set forth above. Such policies shall follow the same form as the primary.

10. Unless otherwise agreed to in writing by the University, policies must be endorsed to provide that there shall be no right of subrogation against the University. To the extent that any of the policies of insurance prohibit such a waiver of subrogation, Consultant shall secure the necessary permission to make this waiver.

11. Except as otherwise specifically provided herein or agreed in writing, policies must be written on an occurrence basis. The insurance policy(ies) shall name the State University Construction Fund, State University of New York, and State of New York, its officers, agents, and employees as additional insureds thereunder. The additional insured requirement does not apply to Workers' Compensation, Disability or Professional Liability coverage.

13. Neither the procurement nor the maintenance of such insurance shall in any way affect or limit the obligations, responsibilities or liabilities of the Consultant hereunder.

14. Nothing in this Article or in this Agreement shall create or give to third parties any claim or right of action against the Consultant or the University beyond such as may legally exist irrespective of this Article or this Agreement.

### **Article VIII AFFIRMATIVE ACTION**

The Consultant agrees to comply with the requirements of the attached Exhibit A-I.

### **Article IX RELEASE OF THE UNIVERSITY**

The acceptance of final payment by the Consultant, or any person claiming under the Consultant, shall operate as and shall be a release of the University from all claims by and liability to the Consultant, its successors, legal representatives and assigns, for anything done or furnished under the provisions of this Agreement or in connection with the Study.

### **Article X GENERAL PROVISIONS**

#### **SECTION A – APPROVAL**

Wherever in this Agreement action is to be taken by or approval given by the University, such action or approval may be taken or given by any officer or employee of the University duly designated to act on behalf of the University.

#### **SECTION B – DEFINITION**

In the event that the principals of the party referred to in the Agreement as the "Consultant" are architects, engineers, landscape consultants or surveyors, then and in that event, wherever the word or designation "Consultant" appears in this Agreement, such word or designation shall be deemed to be "Architect", "Engineer", "Landscape Consultant", or "Surveyor", as the case may be.

#### **SECTION C - DELAYS OR OMISSIONS**

No delay or omission by the Parties to exercise any right or remedy accruing to it under the terms of this Agreement or existing at law or in equity or by statute or otherwise shall be construed as a waiver of any of the provisions of this Agreement or of any such right or remedy. No such delay or omission shall impair any such right or remedy or be construed to be a waiver of or acquiescence of such right or remedy, nor shall it affect the Parties rights or remedies upon the occurrence of any subsequent event of the same or of a different nature.

#### **SECTION D – CAPTIONS**

The captions of Articles and Sections of this Agreement are intended for convenience and for reference purposes only and in no way define, limit or describe the scope or intent thereof, or of this Agreement or in any way affect this Agreement.

(a) *General Responsibility.* The Consultant shall at all times during the term of this Agreement remain responsible. The Consultant agrees, if requested by the SUNY Chancellor or his or her designee, to present evidence of its continuing legal authority to do business in New York State, integrity, experience, ability, prior performance, and organizational and financial capacity. (b) *Suspension of Work for Non-Responsibility.* The SUNY Chancellor, in his or her sole discretion, reserves the right to suspend any or all activities under this Agreement at any time when he or she discovers information that calls into question the responsibility of the Consultant. In the event of such suspension, the Consultant will be given written notice outlining the particulars of such suspension. Upon issuance of such notice, the Consultant must comply with the terms of the suspension order. Activity under this Agreement may resume at such time as the SUNY Chancellor or his or her designee issues a written notice authorizing a resumption of performance under the Agreement. (c) *Termination for Non-Responsibility.* Upon written notice to the Consultant and a reasonable opportunity to be heard with appropriate SUNY officials or staff, this Agreement may be terminated by the SUNY Chancellor or his or her designee at the Consultant's expense, where the Consultant is determined by the SUNY Chancellor or his or her designee to be non-responsible. In such event, the SUNY Chancellor or his or her designee may complete the contractual requirements in any manner he or she may deem advisable and pursue available legal or equitable remedies for breach.

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the day and year first above written.

**STATE UNIVERSITY OF NEW YORK:**

By \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

**CONSULTANT:**

Company or Consultant Name \_\_\_\_\_

By \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Federal ID Number  
(If Corporation, affix Corporate Seal)**Attachments:**

Exhibit A – Standard Contract Clauses

Exhibit A-1 – Affirmative Action Clauses

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## ACKNOWLEDGMENTS

### (ACKNOWLEDGMENT BY INDIVIDUAL)

STATE OF NEW YORK )  
 ) SS.:  
COUNTY OF )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me personally came \_\_\_\_\_

\_\_\_\_\_, to me known and known to me to be the person described in and who  
executed the foregoing instrument and he acknowledged to me that he executed the same.

\_\_\_\_\_  
Notary Public

### (ACKNOWLEDGMENT BY PARTNERSHIP)

STATE OF NEW YORK )  
 ) SS.:  
COUNTY OF )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me personally came \_\_\_\_\_

\_\_\_\_\_, to me known and known to me to be the person who executed the  
above instrument, who, being duly sworn by me, did for h self depose and say that he is a

member of the firm of \_\_\_\_\_ consisting of h self and \_\_\_\_\_

\_\_\_\_\_, that he executed the foregoing

instrument in the firm name of \_\_\_\_\_, and that he had authority to  
sign same, and he did duly acknowledge to me that he executed the same as the act and deed of

said firm of \_\_\_\_\_, for the uses and purposes mentioned  
therein.

\_\_\_\_\_  
Notary Public

### (ACKNOWLEDGMENT BY CORPORATION)

STATE OF NEW YORK )  
 ) SS.:  
COUNTY OF )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me personally came \_\_\_\_\_

\_\_\_\_\_, to me known, who,

being duly sworn, did depose and say that he resides in

\_\_\_\_\_ ; that he is the \_\_\_\_\_ of the \_\_\_\_\_

\_\_\_\_\_, the corporation described in and which executed the foregoing instrument; that he knows the seal of said corporation;  
that the seal affixed to said instrument was such corporate seal; that it was so affixed by the order of the Board of Directors of said  
corporation, and that he signed his name thereto by like order.

\_\_\_\_\_  
Notary Public





## PROSPECTIVE BIDDERS NOTICE

### MINORITY AND WOMEN-OWNED BUSINESS ENTERPRISE REQUIREMENTS: CONSTRUCTION-RELATED CONSULTANT SERVICES CONTRACTS

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To Prospective Bidders:

Consistent with the State University of New York (SUNY)'s commitment and in accordance with Article 15-A of the New York State Executive Law, Consultants are required to ensure that good faith efforts are made to include meaningful participation by Minority and Women-Owned Business Enterprises (MWBE). These requirements apply to all SUNY construction-related consultant services contracts in excess of \$25,000.

**Receipt of MWBE documentation is required with submittal of qualifications for construction related consultants service contracts.** Such documentation shall be submitted on the forms listed below in sub-parts (a) and (b). The MWBE Program Coordinator is given the statement of qualifications and short list of qualified consultants developed by the evaluation/selection committee for review and approval.

- a. Receipt of the Sub-consultant Staffing List
  - i. Architecture/Engineering Design Sub-consultant Staffing List ([7555-15](#))
  - ii. Construction Management Sub-consultant Staffing List ([7555-16](#))
  - iii. Commissioning Services Sub-consultant Staffing List ([7555-17](#))
- b. MWBE-EEO Policy Statement ([7557-104](#)) or the Vendor/Consultant's own EEO Policy Statement

The campus MWBE Program Coordinator will enter sub-plans and payment plans into the SUNY PRISM Compliance Management (PCM) system. This requirement applies to construction consultant contracts in excess of \$25,000.

If the Consultant's MWBE participation rate shown on its MWBE Utilization Plan is below 30%, the campus MWBE Program Coordinator will provide a written notice of deficiency of the Utilization Plan within twenty (20) business days of its submission to the Consultant, as required under 5 NYCRR §142.4.

The notice will include but not be limited to the following:

- a. A list of NYS certified MWBEs that the Consultant could potentially use within the contract scope of work;
- b. The name of any MWBE which is not acceptable for the purpose of complying with the MWBE participation goals; and
- c. Any other information which the MWBE Program Coordinator determines to be relevant to develop an approvable MWBE Utilization Plan.

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

If the deficiency is not corrected and the MWBE participation rate on the MWBE Utilization Plan is still below 30%, the Consultant should request a waiver.

The Waiver Request Form submitted by the Consultant will include, but not be limited to, the following:

- a. A request for partial or total waiver of MWBE goals as required by 5 NYCRR Part §142.6 (f) on Request for Waiver Form ([Form 7557-114](#)) provided by the University-wide MWBE Program Office.
- b. Copy of the deficient Utilization Plan.
- c. Work Scope of this contract. If there are sub-consulting opportunities, please provide documentation d, e, and f.
- d. Screenshot of searching result for available MWBEs in [NYS M/WBE Directory](#).
- e. Copy of email messages containing the request for quote, along with the responses from MWBEs.
- f. Forms required to obtain this information are:  
[7557-101](#) – MWBE Consultant Solicitation Letter  
[7557-102](#) – MWBE Participation Quote  
[7557-103](#) – MWBE Consultant Unavailability Certification

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

Please submit the above documentation to the campus MWBE Program Coordinator:

Lula Curanovic  
Procurement Specialist/MWBE Coordinator  
Purchase College  
State University of New York  
Campus Center South 3rd Floor  
735 Anderson Hill Road  
Purchase, NY 10577-1402  
Tel: (914) 251-6071  
Email: [Lula.Curanovic@purchase.edu](mailto:Lula.Curanovic@purchase.edu)

- OR -

Elizabeth Pleva  
Director of Procurement & Accounts Payable  
Purchase College  
State University of New York  
735 Anderson Hill Road  
Purchase, NY 10577-1402  
Tel: (914) 251-6070  
Email: [Elizabeth.Pleva@purchase.edu](mailto:Elizabeth.Pleva@purchase.edu)

Please submit the above documentation to the University-wide MWBE Program Office:

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](mailto:MWBEProgram@suny.edu)

Information regarding this legislation may be found at: [Participation by Minority Group Members and Women \(MWBEs\) with Respect to State University of New York Contracts](#) on the [State University of New York](#) web site.

**STATE UNIVERSITY OF NEW YORK  
MWBE UTILIZATION PLAN INSTRUCTIONS  
(FOR ALL CONTRACT TYPES)**

A letter of explanation and documentation of efforts should accompany any MBE/WBE Utilization Plan that falls short of the stated goals. Without an approved MBE/WBE Utilization Plan, SUNY's Notice of Award and Contract may be withheld.

If you have questions or need assistance related to the SUNY's Minority and Women's Business requirements call the University-wide MWBE Program Office at 518-320-1189 or email [MWBEprogram@suny.edu](mailto:MWBEprogram@suny.edu).

1. The three low bidding Consultants ("Consultants") are required to submit a Utilization Plan (107) to the MWBE Program Coordinator within seven (7) calendar days after the opening of bids for construction contracts exceeding \$100,000.
2. The MWBE Program Coordinator is required to submit the mandatory MWBE documentation to the University-wide MWBE Program Office web based contract management system for commodity, service and construction related consultant service contracts exceeding \$25,000 and for construction project exceeding \$100,000 upon contract execution.
3. The MBE and WBE goals are separate and not to be treated as one combined goal.
4. The MBE and WBE firms included are businesses the bidder *seriously expects* to include in the project activity.
5. The Consultant reasonably commits to the dollar values included in the plan for participation by MBE and WBE subConsultants and suppliers.
6. MBE and WBE firms ***must be certified*** by the New York State Department of Economic Development, Division of Minority and Women Business Development. A directory of certified minority and women-owned business enterprises is available on the internet at <https://ny.newnycntracts.com/FrontEnd/VendorSearchPublic.asp>.
7. Consultants utilizing MWBE firms for supplies/materials/equipment whose NYS certification profile designates them as Broker will receive an MWBE utilization credit for the actual monetary value of the broker fees or the actual markup percentage of the items brokered.
8. MBE and WBE Participation:

The actual services provided by the MBE or WBE must be essential in the performance of the scope of work for the applicable contract. Utilization of a certified MBE or WBE as a conduit or pass through for participation credit is ***strictly prohibited***. It is the discretion of University-wide MWBE Program to determine whether services are essential in the performance of the scope of work and offer a determination of the appropriateness of work allowed for lower tier Sub-consulting in accordance with practices generally accepted in the construction industry. The services the MBE or WBE will provide must be among those explicitly identified in the profile (codes) of firm as listed in the NYS Empire State Development Directory of Certified MWBEs. Firms submitted or who participate in the project outside of these conditions and without specific prior approval by SUNY will not be credited toward the MWBE Utilization Plan and goals for the contract.
9. Prior to submitting the Plan, the bidders should confirm the following:
  - a. MBE and WBE firms are NYS certified;
  - b. MBE **or** WBE designation ~ Dual certified firms may be used as *either* but **not** both;
  - c. MBE and WBE firms are being used for item(s) within their certification product codes;
  - d. MBE and WBE firms will perform work for which they have been submitted; and
  - e. 2nd tier subConsultants and/or suppliers are noted as such and an MWBE Utilization credit shall be given for 60% of the total contract value of supply purchases or services rendered (for example, when an electrical subConsultant purchases from a 3rd party supplier an MWBE utilization credit will be given for 60% credit of the total contract value).

The prime Consultant is responsible for ensuring participation provided by subConsultants for 2nd and 3rd tier MBE and WBE participation.

Submission of a Utilization Plan which fails to meet or exceed each goal shall be accompanied by documentation of specific efforts undertaken both pre and post bid. The campus MWBE Program Coordinator will review and notify Consultant of its assessment.

The University-wide MWBE Program Office in collaboration with the campus MWBE Program Coordinator will review the Utilization Plan and notify the Consultant of any deficiencies and determine necessary actions to bring the Plan into compliance. The University-wide MWBE Program Office reserves the right to require the Consultant to provide sufficient documentation of

the efforts made in the development of the Utilization Plan. The documentation should meet the good faith efforts standard under 5 NYCRR Part §141.6, and demonstrate the Consultant's commitment to providing opportunities for MBE and WBE firms in the development of the Utilization Plan.

A copy of the approved Utilization Plan will be provided to the Consultant after issuance of Notice of Award.

### **MWBE FORM (107) INSTRUCTIONS**

Requested information must be completed and submitted within seven (7) days after the bid opening.

**SubConsultant Name & Address**

Name & Address of each MBE/WBE subConsultant or supplier

**MBE or WBE**

Minority (MBE) or Women (WBE) Designation

**Federal ID**

Provide accurate Federal ID number of each MBE/WBE subConsultant or supplier

**Dollar Value of Subcontract or Purchase Order**

This is the total value of the signed subcontract. If this value is different from the amount in the approved MBE/WBE utilization plan, an explanation should be provided.

**Description of Work or Supplies**

Brief description of work performed or supplies provided by the MBE/WBE subConsultant or supplier

**Schedule**

This is the anticipated start and completion dates for each MBE/WBE subConsultant or supplier. Do not include the construction schedule for the life of the entire project.

**Signature**

To be signed by an Officer of the Company

- The information included on the form is subject to verification by the campus MWBE Program Coordinator.
- The campus MWBE Program Coordinator must be notified prior to changes made to the approved MBE/WBE Utilization Plan.

Questions regarding this form should **first** be directed to the [campus MWBE Program Coordinator](#) (click the link and be directed to the SUNY MWBE Campus Contacts directory on the University-wide MWBE web site).

Questions regarding this form should be directed to the University-wide MWBE Program Office at (518) 320- 1189 or via e-mail: [MWBEprogram@suny.edu](mailto:MWBEprogram@suny.edu).

***Submit To:***

State University of New York  
Office of Diversity, Equity and Inclusion University-wide MWBE Program  
353 Broadway  
Albany, NY 12246  
Or [MWBEProgram@suny.edu](mailto:MWBEProgram@suny.edu)



## PROSPECTIVE BIDDERS NOTICE

### SERVICE DISABLED VETERAN-OWNED BUSINESS ENTERPRISE REQUIREMENTS: CONSTRUCTION-RELATED CONSULTANT SERVICES CONTRACTS

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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 and its implementing regulations, state agencies and Consultants are required to ensure that good faith efforts are made to include meaningful participation by Service Disabled Veteran-Owned Business (SDVOB). The requirements apply to all SUNY construction-related consultant services contracts in excess of \$25,000.

**Receipt of SDVOB documentation is required with submittal of qualifications for construction related consultants service contracts.** Such documentation shall be submitted on the forms listed below in sub-parts (a) and (b). The MWBE Program Coordinator is given the statement of qualifications and short list of qualified consultants developed by the evaluation/selection committee for review and approval.

- a. Receipt of the Sub-consultant Staffing List
  - i. Architecture/Engineering Design Sub-consultant Staffing List ([7555-15](#))
  - ii. Construction Management Sub-consultant Staffing List ([7555-16](#))
  - iii. Commissioning Services Sub-consultant Staffing List ([7555-17](#))

The campus MWBE Program Coordinator will enter sub-plans and payment plans into the SUNY PRISM Compliance Management (PCM) system. This requirement applies to construction consultant contracts in excess of \$25,000.

If the Consultant's SDVOB participation rate shown on its SDVOB Utilization Plan is below 6%, the campus MWBE Program Coordinator will provide a written notice of deficiency of the Utilization Plan within twenty (20) business days of its submission to the Consultant, as required under 9 NYCRR 252.2(l)(3).

The notice will include but not be limited to the following:

- a. A list of NYS certified SDVOBs that the Consultant could potentially use within the contract scope of work;
- b. The name of any SDVOB which is not acceptable for the purpose of complying with the SDVOB participation goals; and
- c. Any other information which the MWBE Program Coordinator determines to be relevant to developing an approvable SDVOB Utilization Plan.

The Consultant shall respond to the notice of deficiency by submitting a revised SDVOB Utilization Plan within seven (7) business days, as required by 9 NYCRR § 252.2(l)(5).to the MWBE Program Coordinator.

If the deficiency is not corrected and the SDVOB participation rate on the SDVOB Utilization Plan is still below 6%, the Consultant should request a waiver.

The Waiver Request Form submitted by the Consultant will include but not limited to the following:

- a. A request for partial or total waiver of SDVOB goals are required by (9 NYCRR § 252.2(m) (2) on Request for Waiver Form ([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 sub-consulting opportunities, please provide documentation d, e, and f.
- d. Screenshot of searching result for available SDVOBs in [Directory of NYS Certified SDVOBs](#).
- e. Copy of email messages containing the request for quote along with the responses from SDVOBs.
- f. Forms required to obtain this information are:
  - [7564-101](#) – SDVOB Consultant Solicitation Letter
  - [7564-102](#) – SDVOB Participation Quote
  - [7564-103](#) – SDVOB Consultant Unavailability Certification

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

Please submit the above documentation to the campus MWBE Program Coordinator:

Lula Curanovic  
Procurement Specialist/MWBE Coordinator  
Purchase College  
State University of New York  
Campus Center South 3rd Floor  
735 Anderson Hill Road  
Purchase, NY 10577-1402  
Tel: (914) 251-6071  
Email: [Lula.Curanovic@purchase.edu](mailto:Lula.Curanovic@purchase.edu)

- OR -

Elizabeth Pleva  
Director of Procurement & Accounts Payable  
Purchase College  
State University of New York  
735 Anderson Hill Road  
Purchase, NY 10577-1402  
Tel: (914) 251-6070  
Email: [Elizabeth.Pleva@purchase.edu](mailto:Elizabeth.Pleva@purchase.edu)

Please submit the above documentation to the University-wide MWBE Program Office:

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](mailto:MWBEProgram@suny.edu)

Information regarding this legislation may be found at: [Division of Service-Disabled Veterans' Business Development](#) on the New York State Office General Services web site.

**STATE UNIVERSITY OF NEW YORK  
SDVOB UTILIZATION PLAN**

A letter of explanation and documentation of efforts must accompany any SDVOB Utilization Plan that falls short of the stated goals. Without an approved SDVOB Utilization Plan, SUNY's Notice of Award and Contract may be withheld.

If you have questions or need assistance related to the SUNY's Service-Disabled Veteran-Owned Business requirements call the University-wide MWBE Program Office at 518-320-1452 or email [MWBEprogram@suny.edu](mailto:MWBEprogram@suny.edu).

1. The three low bidding Consultants ("Consultants") are required to submit a Utilization Plan (Form 7564-107) to the MWBE Program Coordinator within seven (7) calendar days after the opening of bids for construction contracts exceeding \$100,000.
2. The MWBE Program Coordinator is required to submit the mandatory SDVOB documentation to the University-wide MWBE Program Office web based contract management system for commodity, service and construction related consultant service contracts exceeding \$25,000 and for construction project exceeding \$100,000 upon contract execution .
3. The SDVOB firms included are businesses the Consultant *seriously expects* to include in the project activity.
4. The Consultant must reasonably commit to the dollar values included in the Utilization Plan for participation by SDVOB Sub-consultants and suppliers.
5. SDVOB firms ***must be certified*** by the Division of Service-Disabled Veterans' Business Development. A directory of certified minority and women-owned business enterprises is available on the internet at [http://ogs.ny.gov/Core/Docs/CertifiedNYS\\_SDVOB.pdf](http://ogs.ny.gov/Core/Docs/CertifiedNYS_SDVOB.pdf). If you would like to receive an excel file containing the current the List of NYS Certified Service-Disabled Veteran-Owned Businesses and sign up to receive updates whenever we certify new businesses, please send a request to [veteransdevelopment@ogs.ny.gov](mailto:veteransdevelopment@ogs.ny.gov).
6. Consultants utilizing SDVOB firms for supplies/materials/equipment whose NYS certification profile designates them as Broker will receive an SDVOB utilization credit for the actual monetary value of the broker fees or the actual markup percentage of the items brokered.
7. SDVOB Participation:

The actual services provided by the SDVOB must be essential in the performance of the scope of work for the applicable contract. Utilization of a certified SDVOB as a conduit or pass through for participation credit is strictly prohibited. It is the discretion of SUNY University-wide MWBE Program to determine whether services are essential in the performance of the scope of work and to offer a determination of the appropriateness of work allowed for lower tier subcontracting, in accordance with practices generally accepted in the construction industry. The services the SDVOB will provide must be among those explicitly identified in the profile (codes) of the firm as listed in the SDVOB directory [Division of Service-Disabled Veterans' Business Development](#). Firms submitted or firms that participate in the project outside of these conditions and without specific prior approval by SUNY will not be credited toward the SDVOB Utilization Plan and goals for the contract.
8. Prior to submitting the Utilization Plan, the bidders should confirm the following:
  - a. SDVOB firms are NYS certified;
  - b. SDVOB firms are being used for item(s) within their certification product codes as indicated in their SDVOB Directory firm profile;
  - c. SDVOB firms will perform work for which they have been submitted; and
  - d. 2nd tier Sub-consultants and/or suppliers are noted as such and an SDVOB Utilization credit shall be given for 60% of the total contract value of supply purchases or services rendered (for example, when an electrical Sub-consultant purchases from a 3<sup>rd</sup> party supplier an SDVOB utilization credit will be given for 60% credit of the total contract value).

The prime Consultant is responsible for ensuring participation provided by Sub-consultants for 2nd and 3rd tier SDVOB participation.

Submission of a Utilization Plan which fails to meet or exceed each goal shall be accompanied by documentation of specific efforts undertaken both pre- and post-bid. The campus MWBE Program Coordinator will review and notify Consultant of its assessment.



The University-wide MWBE Program Office in collaboration with the campus MWBE Program Coordinator will review the Utilization Plan and notify the Consultant of any deficiencies and determine necessary actions to bring the Utilization Plan into compliance. The University-wide MWBE Program Office reserves the right to require the Consultant to provide sufficient documentation of the efforts made in the development of the Utilization Plan. The documentation should meet the good faith efforts standard under 9 NYCRR § 252.2, and demonstrate the Consultant's commitment to providing opportunities for SDVOB firms in the development of the Utilization Plan.

A copy of the approved Utilization Plan will be provided to the Consultant after issuance of Notice of Award.

### **SDVOB FORM (7564-107) UTILIZATION PLAN INSTRUCTIONS**

Requested information must be completed and submitted within seven (7) days after the bid opening.

#### **Sub-consultant Name & Address**

Name & Address of each SDVOB Sub-consultant or supplier.

#### **Federal ID**

Provide accurate Federal ID number of each SDVOB Sub-consultant or supplier.

#### **Dollar Value of Subcontract or Purchase Order**

This is the total value of the signed subcontract. If this value is different from the amount in the approved SDVOB Utilization Plan, an explanation should be provided.

#### **Description of Work or Supplies**

Brief description of work performed or supplies provided by the SDVOB Sub-consultant or supplier.

#### **Schedule**

This is the anticipated start and completion dates for each SDVOB Sub-consultant or supplier. Do not include the construction schedule for the life of the entire project.

#### **Signature**

To be signed by an Officer of the Company

- The information included on Form 7564-107 is subject to verification by the campus MWBE Program Coordinator.
- The campus MWBE Program Coordinator must be notified prior to changes made to the approved SDVOB Utilization Plan.

Questions regarding this form should **first** be directed to the [campus MWBE Program Coordinator](#) (click the link and be directed to the SUNY MWBE Campus Contacts directory on the University-wide MWBE web site).

Questions regarding this form should be directed to the University-wide MWBE Program Office at (518) 320- 1340 or via e-mail: [MWBEprogram@suny.edu](mailto:MWBEprogram@suny.edu).

#### ***Submit To:***

State University of New York  
Office of Diversity, Equity and Inclusion University-wide MWBE Program  
353 Broadway  
Albany, NY 12246  
Or [MWBEProgram@sunv.edu](mailto:MWBEProgram@sunv.edu)

**FORM A**  
**Summary: Policy and Procedure of the State University of New York**  
**Relating to State Finance Law §§139-j and 139-k**

State Finance Law §§139-j and 139-k, enacted by Ch. 1 L. 2005, as amended by Ch. 596 L. 2005, effective January 1, 2006, regulate lobbying on government procurement, including procurements by State University to obtain commodities and services and to undertake real estate transactions.

Generally, the law restricts communications between a potential vendor or a person acting on behalf of the vendor, including its lobbyist, to communications with the officers and employees of the procuring agency designated in each solicitation to receive such communications. Further, the law prohibits a communication (a “Contact”) which a reasonable person would infer as an attempt to unduly influence the award, denial or amendment of a contract. These restrictions apply to each contract in excess of \$15,000 during the “restricted period” (the time commencing with the earliest written notice of the proposed procurement and ending with the later of approval of the final contract by the agency, or, if applicable, the State Comptroller). The agency must record all Contacts, and, generally, must deny an award of contract to a vendor involved in a knowing and willful Contact. Each agency must develop guidelines and procedures regarding Contacts and procedures for the reporting and investigation of Contacts. The agency’s procurement record must demonstrate compliance with these new requirements.

Accordingly, neither a potential vendor nor a person acting on behalf of the vendor should contact any individual at State University other than the person designated in this solicitation as State University’s Designated Contact, nor attempt to unduly influence award of the contract. State University will make a record of all Contacts, and such records of Contact will become part of the procurement record for this solicitation. A determination that a vendor or a person acting on behalf of the vendor has made intentionally a Contact or provided inaccurate or incomplete information as to its past compliance with State Finance Law §§139-j and 139-k is likely to result in denial of the award of contract under this solicitation. Additional sanctions may apply.

A complete copy of the State University of New York Procurement Lobbying Policy and Procedure is available for review at [www.suny.edu/sunypp/](http://www.suny.edu/sunypp/).

**FORM B**  
**Affirmation with respect to State Finance Law §§139-j and 139-k**

A complete copy of the State University of New York Procurement Lobbying Policy and Procedure is available for review at [www.suny.edu/sunypp/](http://www.suny.edu/sunypp/).

Procurement Description/ID No.

Offerer **AFFIRMS** that it has reviewed and understands the Policy and Procedure of the State University of New York, relating to State Finance Law §§139-j and 139-k, and agrees to comply with State University's procedure relating to Contacts with respect to this procurement.

Name of Offerer:  
Address:  
Person Submitting Form:  
Name:  
Title:

**FORM C**  
**Disclosure and Certification with respect to State Finance Law §§139-j and 139-k**

Procurement Description/ID No. \_\_\_\_\_

1. Has a Governmental Entity, as defined in State Finance Law §139-j(1)(a), made a determination of non-responsibility with respect to the Offerer within the previous four years where such finding was due to a violation of State Finance Law §139-j or the intentional provision of false or incomplete information with respect to previous determinations of non-responsibility?

No \_\_\_\_  
Yes \_\_\_\_

If yes, provide the following details:  
Governmental Entity which made the finding:  
Date of finding:  
Basis of finding:

2. Has a Governmental Entity terminated or withheld a procurement contract with the Offer because of violations of State Finance Law §139-j or the intentional provision of false or incomplete information with respect to previous determinations of non-responsibility?

No \_\_\_\_  
Yes \_\_\_\_

If yes, identify the following:  
Governmental Entity which terminated the contract:  
Date of contract termination or withholding:  
Identify the related procurement contract:

Offerer **CERTIFIES** that all information provided by Offerer with respect to its compliance with State Finance Law §§139-j and 139-k is complete, true and accurate.

Name of Offerer:

Address:

Signature of Person Submitting Form: \_\_\_\_\_  
Name:  
Title:  
Date:

### Subconsultant Staffing List – Architecture and Engineering

**Consultant Name:**
**Campus:**
*List your firm's name for self-performed work. List all Subconsultants. Complete page two for MBE or WBE Subconsultants.*
**SUNY Project No.:**
**Project Title:**
**Date:**

GOALS:      % MBE      % WBE (As specified in the Project Advertisement)

| Consultant / Subconsultant /<br>Design Area<br>Name and Address | Federal<br>ID No. | <u>MBE</u> or<br><u>WBE</u> | SDVOB<br>Y or N | NYS<br>Business<br>Y or N | Contract<br>Value<br>Percentage<br>% | Contract<br>Dollar<br>Value \$<br><b>Include<br/>ONLY IF<br/>this form is<br/>being<br/>submitted<br/>as part of a<br/>COST<br/>PROPOSAL</b> | Partner in Charge and/or Key<br>Staff | Phase<br>or date<br>service<br>begins |
|---|-------------------|-----------------------------|-----------------|---------------------------|--------------------------------------|--|---------------------------------------|---------------------------------------|
| Architecture  |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Civil Engineering   |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Landscape Architecture  |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Structural  |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Plumbing / Fire Protection                                      |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| HVAC  |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Electrical  |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Cost Estimating   |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Asbestos / Hazmat   |                   |                             |                 |                           |                                      |  | License #                             |                                       |
| Other (Please Specify)  |                   |                             |                 |                           |                                      |  | License #                             |                                       |

Will New York State Businesses be used in the performance of this contract?      Yes      No

## Minority and Women Owned Business Enterprises

|   |                   |                          |   |
|---|-------------------|--------------------------|---|
| <u><b>Firm Name</b></u>   | <b>MBE or WBE</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                   |                          |   |
| <u><b>Firm Name</b></u>   | <b>MBE or WBE</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                   |                          |   |
| <u><b>Firm Name</b></u>   | <b>MBE or WBE</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                   |                          |   |
| <u><b>Firm Name</b></u>   | <b>MBE or WBE</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                   |                          |   |
| <u><b>Firm Name</b></u>   | <b>MBE or WBE</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                   |                          |   |

Certification: I hereby certify that the information provided on this form is true, accurate and complete. I understand that the information provided is to be used to comply with the reporting requirements of Article 15-A of the Executive Law.

Signature (Officer of the Company): \_\_\_\_\_  
 Name: \_\_\_\_\_  
 Title: \_\_\_\_\_

Date: \_\_\_\_\_

*For internal use only.*

MWBE Program Coordinator Approval: \_\_\_\_\_

Date: \_\_\_\_\_

## Service Disabled Veteran Owned Business Enterprises

|   |                                    |                          |   |
|---|------------------------------------|--------------------------|---|
| <u><b>Firm Name</b></u>   | <u><b>Type</b></u><br><b>SDVOB</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                                    |                          |   |
| <u><b>Firm Name</b></u>   | <u><b>Type</b></u><br><b>SDVOB</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                                    |                          |   |
| <u><b>Firm Name</b></u>   | <u><b>Type</b></u><br><b>SDVOB</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                                    |                          |   |
| <u><b>Firm Name</b></u>   | <u><b>Type</b></u><br><b>SDVOB</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                                    |                          |   |
| <u><b>Firm Name</b></u>   | <u><b>Type</b></u><br><b>SDVOB</b> | <u><b>Discipline</b></u> | Has your firm held contracts with this firm in the past? Y or N |
| Brief summary of services to be provided with justification of estimated participation: |                                    |                          |   |

Certification: I hereby certify that the information provided on this form is true, accurate and complete. I understand that the information provided is to be used to comply with the reporting requirements of Article 17-B of the Executive Law.

Signature (Officer of the Company): \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

*For internal use only.*

Program Coordinator Approval: \_\_\_\_\_

Date: \_\_\_\_\_



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**Instructions for completing form 7555-15:**

1. Fill in all requested information including your firm name, SUNY Project No., Project Title, Campus, date and the Minority and Women Owned Business Enterprise goals as specified in the Project Advertisement.
2. In the Consultant/Subconsultant fields, enter both your firm as prime and any proposed subconsultant firms. Firms located out of New York State should have the appropriate approvals in place to practice in NYS. If a firm, including your firm provides service in multiple disciplines, list them for each area of expertise. Discipline areas may be modified as appropriate. Add additional pages if necessary.
3. Enter the Federal ID number for your firm and any subconsultant firms.
4. Enter "M" or "W" if your firm or any proposed subconsultant firms are certified by NY State as a Minority or Woman-Owned Business Enterprise. Identify if a firm is a Service Disabled Veteran Owned Business Enterprise.
5. **With the submittal of qualifications:** Enter the estimated **percentage** of the work scope for your firm and any identified subconsultants. **Do not enter dollar values. Do not enter "TBD"**. The sum of the individual percentages should add up to 100%.
6. Enter the name of the Partner in Charge and/or Key Staff member from your firm and subconsultants firms. Also include the individual's license number if providing professional services.
7. Complete page 2 with the name of each certified MBE or WBE subconsultant identified on page 1 of the Subconsultant staffing list, note whether the firm is an MBE or WBE and their discipline. Provide a brief summary of the services to be provided by the certified MBE or WBE with justification to support the estimated participation.
8. Complete page 3 with the name of each certified Service Disabled Veteran Owned Business Enterprise subconsultant identified on page 1 of the Subconsultant staffing list. Provide a brief summary of the services to be provided by the certified MBE or WBE with justification to support the estimated participation.
9. The certification must be signed and dated by an individual from your firm who is authorized to sign on behalf of your company.
10. Retain a copy for your files and as a reference for proposing any future changes. Any proposed changes to an approved Subconsultant Staffing list must be reviewed with the Project Coordinator and approved by SUNY.
11. **If your firm is selected, at the time the cost proposal is submitted an updated Subconsultant Staffing List with Dollar Values is required.**

**MINORITY AND WOMEN'S BUSINESS - EQUAL EMPLOYMENT  
OPPORTUNITY PROGRAM POLICY STATEMENT**

**Policy Statement**

The \_\_\_\_\_ commits to carrying out the intent of the New York State  
(Name of Campus, Consultant, Contractor)  
Executive Law, Article 15-A which assures the meaningful participation of minority and  
women's business enterprises in contracting and the meaningful participation of minorities and  
women in the workforce on activities financed by public funds.

**Minority Business Officer**

\_\_\_\_\_ is designated as the Minority Business Enterprise Officer  
(Name of Designated Officer)  
responsible for administering the Minority and Women's Business-Equal Employment  
Opportunity (M/WBE-EEO) program.

Phone \_\_\_\_\_

Email \_\_\_\_\_

**M/WBE Contract Goals**

\_\_\_\_\_ % Minority Business Enterprise Participation

\_\_\_\_\_ % Women's Business Enterprise Participation

**EEO Contract Goals**

10% Minority Labor Force Participation

10% Female Labor Force Participation

\_\_\_\_\_  
(Authorized Representative)

Title: \_\_\_\_\_

Date: \_\_\_\_\_

**EEO STAFFING PLAN****Instructions on page 2**

|                           |                          |  |
|---------------------------|--------------------------|--|
| <b>Solicitation No.:</b>  | <b>Reporting Entity:</b> | <b>Report includes Contractor's/Subcontractor's:</b><br><input type="checkbox"/> Work force to be utilized on this contract<br><input type="checkbox"/> Total work force |
| <b>Offeror's Name:</b>    |                          | <input type="checkbox"/> Offerer<br><input type="checkbox"/> Subcontractor<br><b>Subcontractor's name</b> _____  |
| <b>Offeror's Address:</b> |                          |  |

Enter the total number of employees for each classification in each of the EEO-Job Categories identified

| EEO-Job Category         | Total Work force | Work force by Gender |                  | Work force by Race/Ethnic Identification |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
|--------------------------|------------------|----------------------|------------------|--|--|---------------|--|------------------|--|---------------|--|-------------------------|--|------------------|--|-----------------|--|
|                          |                  | Total Male (M)       | Total Female (F) | White (M) (F)                            |  | Black (M) (F) |  | Hispanic (M) (F) |  | Asian (M) (F) |  | Native American (M) (F) |  | Disabled (M) (F) |  | Veteran (M) (F) |  |
| Officials/Administrators |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Professionals            |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Technicians              |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Sales Workers            |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Office/Clerical          |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Craft Workers            |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Laborers                 |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Service Workers          |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Temporary /Apprentices   |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |
| Totals                   |                  |                      |                  |  |  |               |  |                  |  |               |  |                         |  |                  |  |                 |  |

|  |  |              |
|--|--|--------------|
| <b>PREPARED BY (Signature):</b>                    | <b>TELEPHONE NO.:</b><br><b>EMAIL ADDRESS:</b> | <b>DATE:</b> |
| <b>NAME AND TITLE OF PREPARER (Print or Type):</b> | <b>Submit completed with bid or proposal</b>   |              |

**General instructions:** All Offerors and each subcontractor identified in the bid or proposal must complete an EEO Staffing Plan (ADM/EEO 100) and submit it as part of the bid or proposal package. Where the work force to be utilized in the performance of the State contract can be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form only for the anticipated work force to be utilized on the State contract. Where the work force to be utilized in the performance of the State contract cannot be separated out from the contractor's and/or subcontractor's total work force, the Offeror shall complete this form for the contractor's and/or subcontractor's total work force.

**Instructions for completing:**

1. Enter the Solicitation number that this report applies to along with the name and address of the Offeror.
2. Check off the appropriate box to indicate if the Offeror completing the report is the contractor or a subcontractor.
3. Check off the appropriate box to indicate work force to be utilized on the contract or the Offerors' total work force.
4. Enter the total work force by EEO job category.
5. Break down the anticipated total work force by gender and enter under the heading 'Work force by Gender'
6. Break down the anticipated total work force by race/ethnic identification and enter under the heading 'Work force by Race/Ethnic Identification'. Contact the M/WBE Permissible contact(s) for the solicitation if you have any questions.
7. Enter information on disabled or veterans included in the anticipated work force under the appropriate headings.
8. Enter the name, title, phone number and email address for the person completing the form. Sign and date the form in the designated boxes.

**RACE/ETHNIC IDENTIFICATION**

Race/ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. For the purposes of this form, an employee may be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. However, no person should be counted in more than one race/ethnic group. The race/ethnic categories for this survey are:

- **WHITE** (Not of Hispanic origin) All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- **BLACK** a person, not of Hispanic origin, who has origins in any of the black racial groups of the original peoples of Africa.
- **HISPANIC** a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
- **ASIAN & PACIFIC ISLANDER** a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.
- **NATIVE INDIAN (NATIVE AMERICAN/ ALASKAN NATIVE)** a person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.

**OTHER CATEGORIES**

- **DISABLED INDIVIDUAL** any person who:
  - has a physical or mental impairment that substantially limits one or more major life activity(ies)
  - has a record of such an impairment; or
  - is regarded as having such an impairment.
- **VIETNAM ERA VETERAN** a veteran who served at any time between and including January 1, 1963 and May 7, 1975.
- **GENDER** Male or Female

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

You have selected the For-Profit Non-Construction questionnaire which may be printed and completed in this format or, for your convenience, may be completed online using the New York State VendRep System.

**COMPLETION & CERTIFICATION**

The person(s) completing the questionnaire must be knowledgeable about the vendor's business and operations. An owner or owner's official representative authorized to legally bind the Reporting Entity must certify the truth of the questionnaire answers.

**NEW YORK STATE VENDOR IDENTIFICATION NUMBER (VENDOR ID)**

The Vendor ID is a ten-digit identifier issued by New York State when the vendor is registered on the Statewide Vendor File. This number must now be included on the questionnaire. If the business entity has not obtained a Vendor ID, contact the IT Service Desk at [ITServiceDesk@osc.state.ny.us](mailto:ITServiceDesk@osc.state.ny.us) or call 866-370-4672.

**DEFINITIONS**

All underlined terms are defined in the "New York State Vendor Responsibility Definitions List," found at <https://www.osc.state.ny.us/files/vendors/2017-11/vendor-questionnaire-definitions.pdf>. These terms may not have their ordinary, common or traditional meanings. Each vendor must read the respective definitions for any and all underlined terms. By submitting this questionnaire, the vendor agrees to be bound by the terms as defined in the "New York State Vendor Responsibility Definitions List" existing at the time of certification.

**RESPONSES**

Every question must be answered fully. Each response must provide all relevant information to appropriately explain the answer. If you have concerns as to the legal requirements behind your answers, please seek clarification from your counsel. However, information regarding a determination or finding made in error which was subsequently corrected or overturned, and/or was withdrawn by the issuing government entity is not required to be identified. Individuals and Sole Proprietors may use a Social Security Number but are encouraged to obtain and use a federal Employer Identification Number (EIN).

**REPORTING ENTITY**

Each vendor must indicate if the questionnaire is filed on behalf of the entire Legal Business Entity or an Organizational Unit within or operating under the authority of the Legal Business Entity and having the same EIN. Generally, the Organizational Unit option may be appropriate for a vendor that meets the definition of "Reporting Entity" but due to the size and complexity of the Legal Business Entity, is best able to provide the required information for the Organizational Unit, while providing more limited information for other parts of the Legal Business Entity and Associated Entities.

**ASSOCIATED ENTITY**

An Associated Entity is one that owns or controls the Reporting Entity, or any entity owned or controlled by the Reporting Entity. However, the term Associated Entity does **not** include "sibling organizations" (i.e., entities owned or controlled by a parent company that owns or controls the Reporting Entity), unless such sibling entity has a direct relationship with or impact on the Reporting Entity. Please refer to the Definitions List for the complete definition.

**STRUCTURE OF THE QUESTIONNAIRE**

The questionnaire is organized into eleven sections. Section I is to be completed for the Legal Business Entity. Section II requires the vendor to specify the Reporting Entity for the questionnaire. Section III refers to the individuals of the Reporting Entity, while Sections IV-VIII require information about the Reporting Entity. Section IX pertains to any Associated Entities, with one question about their Officials/Owners. Section X relates to disclosure under the Freedom of Information Law (FOIL). Section XI requires an authorized contact for the questionnaire information.

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

| <b>I. LEGAL BUSINESS ENTITY INFORMATION</b>   |      |  |  |
|---|------|--|--|
| <u>Legal Business Entity Name*</u>  |      | <u>EIN</u>   |  |
| Address of the <u>Principal Place of Business</u> (street, city, state, zip code)   |      | <u>New York State Vendor Identification Number</u> |  |
|   |      | Telephone<br>Ext.                                  | Fax  |
| Email   |      | Website  |  |
| Additional <u>Legal Business Entity</u> Identities: If applicable, list any other <u>DBA</u> , <u>Trade Name</u> , <u>Former Name</u> , Other Identity, or <u>EIN</u> used in the last five (5) years and the status (active or inactive).                          |      |  |  |
| Type  | Name | EIN  | Status   |
|   |      |  |  |
|   |      |  |  |
| 1.0 <u>Legal Business Entity</u> Type – Check appropriate box and provide additional information:   |      |  |  |
| <input type="checkbox"/> <u>Corporation</u> (including <u>PC</u> )  |      | Date of Incorporation                              |  |
| <input type="checkbox"/> <u>Limited Liability Company</u> (LLC or PLLC)   |      | Date of Organization                               |  |
| <input type="checkbox"/> <u>Partnership</u> (including <u>LLP</u> , <u>LP</u> or <u>General</u> )   |      | Date of Registration or Establishment              |  |
| <input type="checkbox"/> <u>Sole Proprietor</u>   |      | How many years in business?                        |  |
| <input type="checkbox"/> Other  |      | Date Established                                   |  |
| If Other, explain:  |      |  |  |
| 1.1 Was the <u>Legal Business Entity</u> formed or incorporated in New York State?  |      |  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If 'No,' indicate jurisdiction where <u>Legal Business Entity</u> was formed or incorporated and attach a <u>Certificate of Good Standing</u> from the applicable jurisdiction or provide an explanation if a <u>Certificate of Good Standing</u> is not available. |      |  |  |
| <input type="checkbox"/> United States   State   _____  |      |  |  |
| <input type="checkbox"/> Other   Country   _____  |      |  |  |
| Explain, if not available:  |      |  |  |
| 1.2 Is the <u>Legal Business Entity</u> publicly traded?  |      |  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide <u>CIK Code</u> or Ticker Symbol  |      |  |  |
| 1.3 Does the <u>Legal Business Entity</u> have a <u>DUNS</u> Number?  |      |  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," Enter <u>DUNS</u> Number  |      |  |  |

\*All underlined terms are defined in the "New York State Vendor Responsibility Definitions List," which can be found at <https://www.osc.state.ny.us/files/vendors/2017-11/vendor-questionnaire-definitions.pdf>

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**I. LEGAL BUSINESS ENTITY INFORMATION**

1.4 If the Legal Business Entity's Principal Place of Business is not in New York State, does the Legal Business Entity maintain an office in New York State?  
(Select "N/A," if Principal Place of Business is in New York State.)

☐ Yes   ☐ No  
☐ N/A

If "Yes," provide the address and telephone number for one office located in New York State.

1.5 Is the Legal Business Entity a New York State certified Minority-Owned Business Enterprise (MBE), Women-Owned Business Enterprise (WBE), Service-Disabled Veteran-Owned Business (SDVOB), New York State Small Business (SB) or a federally certified Disadvantaged Business Enterprise (DBE)?

☐ Yes   ☐ No

If "Yes," check all that apply:

- ☐ New York State certified Minority-Owned Business Enterprise (MBE)  
☐ New York State certified Women-Owned Business Enterprise (WBE)  
☐ New York State certified Service-Disabled Veteran-Owned Business (SDVOB)  
☐ New York State Small Business (SB)  
☐ Federally certified Disadvantaged Business Enterprise (DBE)

1.6 Identify Officials and Principal Owners of the Reporting Entity, if applicable. For each person, include name, title, date of birth, and percentage of ownership. For each Business Entity that is a Principal Owner, include name, address, EIN, and percentage ownership. Identify all Business Entities owning 25% or more of the Reporting Entity and include name, address, EIN and percentage of ownership. Attach additional pages if necessary. If applicable, reference to relevant SEC filing(s) containing the required information is optional. Each Business Entity identified as a Principal Owner must also submit a vendor responsibility questionnaire.

If there is no person or Business Entity that owns 25% or more of the Reporting Entity (or 10% or more if the Reporting Entity is publicly traded), check here. ☐

| Name of Officials and Principal Owners (for each person, please include a middle initial) | Title   | Date of Birth | Percentage Ownership<br>(Enter 0% if not applicable) |
|---|---------|---------------|--|
|   |         |               |  |
|   |         |               |  |
|   |         |               |  |
|   |         |               |  |
| Name of each Business Entity owning 25% or more of Reporting Entity                       | Address | EIN           | Percentage Ownership                                 |
|   |         |               |  |
|   |         |               |  |
|   |         |               |  |
|   |         |               |  |



**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**II. REPORTING ENTITY INFORMATION**

2.0 The Reporting Entity for this questionnaire is:

Note: Select only one.

☐ Legal Business Entity

*Note: If selecting this option, “Reporting Entity” refers to the entire Legal Business Entity for the remainder of the questionnaire. (SKIP THE REMAINDER OF SECTION II AND PROCEED WITH SECTION III.)*

☐ Organizational Unit within and operating under the authority of the Legal Business Entity

SEE DEFINITIONS OF “REPORTING ENTITY” AND “ORGANIZATIONAL UNIT” FOR ADDITIONAL INFORMATION ON CRITERIA TO QUALIFY FOR THIS SELECTION.

*Note: If selecting this option, “Reporting Entity” refers to the Organizational Unit within the Legal Business Entity for the remainder of the questionnaire. (COMPLETE THE REMAINDER OF SECTION II AND ALL REMAINING SECTIONS OF THIS QUESTIONNAIRE.)*

**IDENTIFYING INFORMATION**

a) Reporting Entity Name

Address of the Primary Place of Business (street, city, state, zip code)

Telephone

ext.

b) Describe the relationship of the Reporting Entity to the Legal Business Entity

c) Attach an organizational chart

d) Does the Reporting Entity have a DUNS Number?

☐ Yes ☐ No

If “Yes,” enter DUNS Number

e) Identify the designated manager(s) responsible for the business of the Reporting Entity.  
*For each person, include name and title. Attach additional pages if necessary.*

| Name | Title |
|------|-------|
|      |       |
|      |       |

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**INSTRUCTIONS FOR SECTIONS III THROUGH VII**

For each “Yes,” provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). For each “Other,” provide an explanation which provides the basis for not definitively responding “Yes” or “No.” Provide the explanation at the end of the section or attach additional sheets with numbered responses, including the Reporting Entity name at the top of any attached pages.

**III. LEADERSHIP INTEGRITY**

*Within the past five (5) years, has any current or former reporting entity official or any individual currently or formerly having the authority to sign, execute or approve bids, proposals, contracts or supporting documentation on behalf of the reporting entity with any government entity been:*

|  |   |
|--|---|
| 3.0 <u>Sanctioned</u> relative to any business or professional permit and/or license?  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other |
| 3.1 <u>Suspended, debarred, or disqualified</u> from any <u>government contracting process</u> ?   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other |
| 3.2 The subject of an <u>investigation</u> , whether open or closed, by any <u>government entity</u> for a civil or criminal violation for any business-related conduct?   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other |
| 3.3 Charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a <u>judgment</u> for:<br>a) Any business-related activity; or<br>b) Any crime, whether or not business-related, the underlying conduct of which was related to truthfulness? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other |

For each “Yes” or “Other” provide an explanation for the response and attach additional sheets with numbered responses if necessary:

**IV. INTEGRITY – CONTRACT BIDDING**

*Within the past five (5) years, has the reporting entity:*

|  |  |
|--|--|
| 4.0 Been <u>suspended or debarred</u> from any <u>government contracting process</u> or been <u>disqualified</u> on any government procurement, permit, license, concession, franchise or lease, including, but not limited to, <u>debarment</u> for a violation of New York State Workers’ Compensation or Prevailing Wage laws or New York State Procurement Lobbying Law? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4.1 Been subject to a denial or revocation of a government prequalification?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4.2 Been denied a contract award or had a bid rejected based upon a <u>non-responsibility finding</u> by a <u>government entity</u> ?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4.3 Had a bid rejected on a <u>government contract</u> for failure to <u>make good faith efforts</u> on any <u>Minority-Owned Business Enterprise, Women-Owned Business Enterprise, Service-Disabled Veteran-Owned Business or Disadvantaged Business Enterprise</u> goal or <u>statutory affirmative action requirements</u> on a previously held contract?                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4.4 Agreed to a voluntary exclusion from bidding/contracting with a <u>government entity</u> ?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4.5 Initiated a request to withdraw a bid submitted to a <u>government entity</u> in lieu of responding to an information request or subsequent to a formal request to appear before the <u>government entity</u> ?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |

For each “Yes,” provide an explanation for the response and attach additional sheets with numbered responses if necessary:

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**V. INTEGRITY – CONTRACT AWARD**

*Within the past five (5) years, has the reporting entity:*

- |   |  |
|---|--|
| 5.0 Been <u>suspended</u> , cancelled or <u>terminated for cause</u> on any <u>government contract</u> including, but not limited to, a <u>non-responsibility finding</u> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5.1 Been subject to an <u>administrative proceeding</u> or civil action seeking specific performance or restitution in connection with any <u>government contract</u> ?     | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5.2 Entered into a formal monitoring agreement as a condition of a contract award from a <u>government entity</u> ?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |

For each “Yes,” provide an explanation for the response and attach additional sheets with numbered responses if necessary:

**VI. CERTIFICATIONS/LICENSES**

*Within the past five (5) years, has the reporting entity:*

- |  |  |
|--|--|
| 6.0 Had a revocation, <u>suspension</u> or <u>disbarment</u> of any business or professional permit and/or license?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6.1 Had a denial, decertification, revocation or forfeiture of New York State certification of <u>Minority-Owned Business Enterprise</u> , <u>Women-Owned Business Enterprise</u> , <u>Service-Disabled Veteran-Owned Business</u> or federal certification of <u>Disadvantaged Business Enterprise</u> status for other than a change of ownership? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

For each “Yes,” provide an explanation for the response and attach additional sheets with numbered responses if necessary:

**VII. LEGAL PROCEEDINGS**

*Within the past five (5) years, has the reporting entity:*

- |  |  |
|--|--|
| 7.0 Been the subject of an <u>investigation</u> , whether open or closed, by any <u>government entity</u> for a civil or criminal violation?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7.1 Been the subject of an indictment, grant of immunity, <u>judgment</u> or conviction (including entering into a plea bargain) for conduct constituting a crime?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7.2 Received any OSHA citation and Notification of Penalty containing a violation classified as <u>serious or willful</u> ?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7.3 Had a <u>government entity</u> find a willful prevailing wage or supplemental payment violation or any other willful violation of New York State Labor Law?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7.4 Entered into a consent order with the New York State Department of Environmental Conservation, or received an enforcement determination by any <u>government entity</u> involving a violation of federal, state or local environmental laws?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7.5 Other than previously disclosed:<br>a) Been subject to fines or penalties imposed by <u>government entities</u> which in the aggregate total \$25,000 or more; or<br>b) Been convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any <u>government entity</u> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

For each “Yes,” provide an explanation for the response and attach additional sheets with numbered response if necessary:

**NEW YORK STATE**  
**VENDOR RESPONSIBILITY QUESTIONNAIRE**  
**FOR-PROFIT BUSINESS ENTITY**

**VIII. FINANCIAL AND ORGANIZATIONAL CAPACITY**

|   |  |
|---|--|
| <b>8.0</b> Within the past five (5) years, has the <u>Reporting Entity</u> received any <u>formal unsatisfactory performance assessment(s)</u> from any <u>government entity</u> on any contract?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide an explanation of the issue(s), relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.   |  |
| <b>8.1</b> Within the past five (5) years, has the <u>Reporting Entity</u> had any <u>liquidated damages</u> assessed over \$25,000 for any reason, including failure to meet <u>Minority-Owned Business Enterprise</u> , <u>Women-Owned Business Enterprise</u> , <u>Service-Disabled Veteran-Owned Business</u> , or <u>Disadvantaged Business Enterprise goals</u> ? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide an explanation of the issue(s), relevant dates, contracting party involved, the amount assessed and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.   |  |
| <b>8.2</b> Within the past five (5) years, have any <u>liens, claims</u> or <u>judgments</u> (not including UCC filings) over \$25,000 been filed against the <u>Reporting Entity</u> which remain undischarged?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide an explanation of the issue(s), relevant dates, the Lien holder or Claimant's name(s), the amount of the <u>lien(s)</u> , the current status of the issue(s), and the balance of the <u>lien</u> or <u>judgment</u> not yet paid. Provide answer below or attach additional sheets with numbered responses.   |  |
| <b>8.3</b> In the last seven (7) years, has the <u>Reporting Entity</u> initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide the bankruptcy chapter number, the court name and the docket number. Indicate the current status of the proceedings as "Initiated," "Pending" or "Closed." Provide answer below or attach additional sheets with numbered responses.  |  |
| <b>8.4</b> During the past three (3) years, has the <u>Reporting Entity</u> failed to file or pay any tax returns required by <u>federal</u> , state or local tax laws?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide the taxing jurisdiction, the type of tax, the liability year(s), the tax liability amount the <u>Reporting Entity</u> failed to file/pay and the current status of the tax liability. Provide answer below or attach additional sheets with numbered responses.   |  |
| <b>8.5</b> During the past three (3) years, has the <u>Reporting Entity</u> failed to file or pay any New York State unemployment insurance returns?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes," provide the years the <u>Reporting Entity</u> failed to file/pay the insurance, explain the situation and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.  |  |
| <b>8.6</b> During the past three (3) years, has the <u>Reporting Entity</u> had any <u>government audit(s)</u> completed?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| a) If "Yes," did any audit of the <u>Reporting Entity</u> identify any reported significant deficiencies in internal control, fraud, illegal acts, significant violations of provisions of contract or grant agreements, significant abuse or any <u>material disallowance</u> ?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If "Yes" to 8.6 a), provide an explanation of the issue(s), relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.   |  |

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**IX. ASSOCIATED ENTITIES**

*This section pertains to any entity(ies) that either controls or is controlled by the reporting entity.  
(See definition of “associated entity” for additional information to complete this section.)*

|  |  |
|--|--|
| <p>9.0 Does the <u>Reporting Entity</u> have any <u>Associated Entities</u>?</p> <p>Note: All questions in this section must be answered if the <u>Reporting Entity</u> is either:</p> <ul style="list-style-type: none"> <li>– An <u>Organizational Unit</u>; or</li> <li>– The entire <u>Legal Business Entity</u> which controls, or is controlled by, any other entity(ies).</li> </ul> <p>If “No,” SKIP THE REMAINDER OF SECTION IX AND PROCEED WITH SECTION X.</p> <p>If “Yes,” provide the name, address and EIN of each Associated Entity and its relationship to the <u>Reporting Entity</u>.</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>9.1 Within the past five (5) years, has any <u>Associated Entity Official</u> or <u>Principal Owner</u> been charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a <u>judgment</u> for:</p> <p>a) Any business-related activity; or</p> <p>b) Any crime, whether or not business-related, the underlying conduct of which was related to truthfulness?</p>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>If “Yes,” provide an explanation of the issue(s), the individual involved, their title and role in the <u>Associated Entity</u>, identify the <u>Associated Entity</u>’s name(s), <u>EIN</u>(s), primary business activity, the individual’s relationship to the <u>Reporting Entity</u>, relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s).</p>   |  |
| <p>9.2 Does any <u>Associated Entity</u> have any currently undischarged <u>federal</u>, New York State, New York City or New York local government <u>liens</u> or <u>judgments</u> (not including UCC filings) over \$50,000?</p>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>If “Yes,” provide an explanation of the issue(s), identify the <u>Associated Entity</u>’s name(s), <u>EIN</u>(s), primary business activity, relationship to the <u>Reporting Entity</u>, relevant dates, the Lien holder or Claimant’s name(s), the amount of the <u>lien</u>(s) and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.</p>   |  |
| <p>9.3 Within the past five (5) years, has any <u>Associated Entity</u>:</p>   |  |
| <p>a) Been <u>disqualified</u>, <u>suspended</u> or <u>debarred</u> from any <u>federal</u>, New York State, New York City or other New York local <u>government contracting process</u>?</p>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>b) Been denied a contract award or had a bid rejected based upon a <u>non-responsibility finding</u> by any <u>federal</u>, New York State, New York City, or New York local <u>government entity</u>?</p>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>c) Been <u>suspended</u>, <u>cancelled</u> or <u>terminated for cause</u> (including for <u>non-responsibility</u>) on any <u>federal</u>, New York State, New York City or New York local <u>government contract</u>?</p>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>d) Been the subject of an <u>investigation</u>, whether open or closed, by any <u>federal</u>, New York State, New York City, or New York local <u>government entity</u> for a civil or criminal violation with a penalty in excess of \$500,000?</p>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>e) Been the subject of an indictment, grant of immunity, <u>judgment</u>, or conviction (including entering into a plea bargain) for conduct constituting a crime?</p>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>f) Been convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any <u>federal</u>, New York State, New York City, or New York local <u>government entity</u>?</p>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>g) Initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?</p>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**IX. ASSOCIATED ENTITIES**

*This section pertains to any entity(ies) that either controls or is controlled by the reporting entity.*

*(See definition of “associated entity” for additional information to complete this section.)*

For each “Yes,” provide an explanation of the issue(s), identify the Associated Entity’s name(s), EIN(s), primary business activity, relationship to the Reporting Entity, relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.

**X. FREEDOM OF INFORMATION LAW (FOIL)**

10. Indicate whether any information supplied herein is believed to be exempt from disclosure under the Freedom of Information Law (FOIL).

☐ Yes ☐ No

Note: A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL.

If “Yes,” indicate the question number(s) and explain the basis for the claim.

**XI. AUTHORIZED CONTACT FOR THIS QUESTIONNAIRE**

|       |                   |     |
|-------|-------------------|-----|
| Name  | Telephone<br>ext. | Fax |
| Title | Email             |     |

**NEW YORK STATE  
VENDOR RESPONSIBILITY QUESTIONNAIRE  
FOR-PROFIT BUSINESS ENTITY**

**Certification**

The undersigned: (1) recognizes that this questionnaire is submitted for the express purpose of assisting New York State government entities (including the Office of the State Comptroller (OSC)) in making responsibility determinations regarding award or approval of a contract or subcontract and that such government entities will rely on information disclosed in the questionnaire in making responsibility determinations; (2) acknowledges that the New York State government entities and OSC may, in their discretion, by means which they may choose, verify the truth and accuracy of all statements made herein; and (3) acknowledges that intentional submission of false or misleading information may result in criminal penalties under State and/or federal law, as well as a finding of non-responsibility, contract suspension or contract termination.

It being acknowledged and agreed that all responses included in this questionnaire are to the knowledge, information and belief of the Business Entity, the undersigned certifies under penalties of perjury that they:

**The undersigned certifies that he/she:**

- are knowledgeable about the submitting Business Entity's business and operations;
- have legal authority to bind the Business Entity;
- have read and understand all of the questions contained in the questionnaire, including all definitions;
- have not altered the content of the questionnaire in any manner;
- have reviewed and/or supplied full and complete responses to each question;
- have provided true, accurate and complete responses, including all attachments, if applicable;
- understand that New York State government entities will rely on the information disclosed in the questionnaire when entering into a contract with the Business Entity; and
- are under an obligation to update the information provided herein to include any material changes to the Business Entity's responses at the time of bid/proposal submission through the contract award notification, and may be required to update the information at the request of the New York State government entities or OSC prior to the award and/or approval of a contract, or during the term of the contract.

Signature of Owner/Official \_\_\_\_\_

Printed Name of Signatory \_\_\_\_\_

Title \_\_\_\_\_

Name of Business \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Date \_\_\_\_\_



## Bidder's Certifications

### NY HUMAN RIGHTS LAW EXECUTIVE ORDER 177 CERTIFICATION

In accordance with Executive Order No. 177, the Bidder hereby certifies that it does not have institutional policies or practices that fail to address the harassment and discrimination of individuals on the basis of their age, race, creed, color, national origin, sex, sexual orientation, gender identity, disability, marital status, military status, or other protected status under the Human Rights Law.

Executive Order No. 177 and this certification do not affect institutional policies or practices that are protected by existing law, including but not limited to the First Amendment of the United States Constitution, Article 1, Section 3 of the New York State Constitution, and Section 296(11) of the New York State Human Rights Law.

Bidder Name: \_\_\_\_\_

By (signature): \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_

## Bidder's Certifications

### NEW YORK STATE FINANCE LAW 139-L CERTIFICATION

By submission of this bid, each Bidder and each person signing on behalf of any Bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that the Bidder has and has implemented a written policy addressing sexual harassment prevention in the workplace and provides annual sexual harassment prevention training to all of its employees. Such a policy shall, at a minimum, meet the requirements of section two hundred one-g of the Labor Law.

If the Bidder cannot make the foregoing certification, such Bidder shall so state and shall furnish with the bid a signed statement that sets forth in detail the reasons that the Bidder cannot make the certification.

Bidder Name: \_\_\_\_\_

By (signature): \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_, 20\_\_

## Bidder's Certifications

### NON-COLLUSIVE BIDDING CERTIFICATION

By submission of this bid, Bidder and each person signing on behalf of Bidder certifies, and in the case of a joint bid, each party thereto certifies as to its own organization, under penalty of perjury, that to the best of their knowledge and belief:

1. The prices of this bid have been arrived at independently, without collusion, consultation, communication, or agreement, for the purposes of restricting competition, as to any matter relating to such prices with any other Bidder or with any competitor;
2. Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by the Bidder prior to opening, directly or indirectly, to any other Bidder or to any competitor; and
3. No attempt has been made or will be made by the Bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

A bid shall not be considered for award nor shall any award be made where [1], [2], [3] above have not been complied with; provided however, that if in any case the Bidder(s) cannot make the foregoing certification, the Bidder shall so state and shall furnish below a signed statement which sets forth in detail the reasons therefor:

Subscribed to under penalty of perjury under the laws of the State of New York, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ as the act and deed of said corporation or partnership.

IF BIDDER IS A SOLE PROPRIETER OR PARTNERSHIP, COMPLETE THE FOLLOWING:

| NAMES OF PARTNERS OR PRINCIPALS | LEGAL RESIDENCE |
|---------------------------------|-----------------|
| _____                           | _____           |
| _____                           | _____           |
| _____                           | _____           |
| _____                           | _____           |

IF BIDDER IS A CORPORATION, COMPLETE THE FOLLOWING:

| NAME             | LEGAL RESIDENCE |
|------------------|-----------------|
| President: _____ | _____           |
| Secretary: _____ | _____           |
| Treasurer: _____ | _____           |

*Joint or combined bids by companies or firms must be certified separately on behalf of each participant.*

## Bidder's Certifications

### Identifying Data:

|  |  |
|--|--|
| Bidder                                 |  |
| Address                                |  |
| Telephone                              |  |
| Name of Responsible Corporate Officer  |  |
| Title of Responsible Corporate Officer |  |

*Joint or combined bids by companies or firms must be certified separately on behalf of each participant.*

\_\_\_\_\_  
Legal name of person, firm or corporation

By (signature): \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

# **Certification Under Executive Order No. 16**

## **Prohibiting State Agencies and Authorities from Contracting with Businesses Conducting Business in Russia**

Executive Order No. 16 provides that “all Affected State Entities are directed to refrain from entering into any new contract or renewing any existing contract with an entity conducting business operations in Russia.” The complete text of Executive Order No. 16 can be found [here](#).

The Executive Order remains in effect while sanctions imposed by the federal government are in effect. Accordingly, vendors who may be excluded from award because of current business operations in Russia are nevertheless encouraged to respond to solicitations to preserve their contracting opportunities in case the sanctions are lifted during a solicitation or even after award in the case of some solicitations.

As defined in Executive Order No. 16, an “entity conducting business operations in Russia” means an institution or company, wherever located, conducting any commercial activity in Russia or transacting business with the Russian Government or with commercial entities headquartered in Russia or with their principal place of business in Russia in the form of contracting, sales, purchasing, investment, or any business partnership.

Is Vendor an entity conducting business operations in Russia, as defined above? Please answer by checking one of the following boxes:

- ☐ 1. No, Vendor does not conduct business operations in Russia within the meaning of Executive Order No. 16.
- ☐ 2.a. Yes, Vendor conducts business operations in Russia within the meaning of Executive Order No. 16 but has taken steps to wind down business operations in Russia or is in the process of winding down business operations in Russia. (Please provide a detailed description of the wind down process and a schedule for completion.)
- ☐ 2.b. Yes, Vendor conducts business operations in Russia within the meaning of Executive Order No. 16 but only to the extent necessary to provide vital health and safety services within Russia or to comply with federal law, regulations, executive orders, or directives. (Please provide a detailed description of the services being provided or the relevant laws, regulations, etc.)
- ☐ 3. Yes, Vendor conducts business operations in Russia within the meaning of Executive Order No. 16.

The undersigned certifies under penalties of perjury that they are knowledgeable about the Vendor’s business and operations and that the answer provided herein is true to the best of their knowledge and belief.

Vendor Name: \_\_\_\_\_  
(legal entity)

By: \_\_\_\_\_  
(signature)

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

## Insurance Forms

Evidence of insurance **MUST** be submitted on the ACORD Certificate of Liability Insurance Form (ACORD 25) and NYS required Workers' Compensation/NYS Disability Insurance forms. The certificates:

- **MUST** be signed by an authorized representative of the insurance carrier or producer authorized to write coverage in the State of New York
  - Excess Line, or non admitted carriers are NOT permitted \*
- **MUST** disclose any deductible, self-insured retention or aggregate limit
- **MUST** indicate the Additional Insureds and Named Insureds on the form
  - An additional insured endorsement CG 20 10 11 85 or equivalent is provided
  - Additional Insureds must include the State of New York, State University of New York, and State University Construction Fund
- **MUST** make reference to the project, contract or agreement number on the form

SUNY will accept insurance forms by electronic submission to the campus representative identified as the designated contact within the IFB or RFQ.

- All attachments must be in adobe .pdf format
- ACORD Forms will only be accepted if the email is sent directly by the insurance company, agent or broker to the designated contact
- Insurance forms received via email by the Campus from, or forwarded by consultants and contractors will not be accepted
- Disability and Worker's Compensation forms may be emailed by consultants, contractors, agents or carriers to the designated contact
- The campus representative reviewing the certificate will take reasonable steps to verify that the email is from an authorized insurance company, agent or broker. For example, the domain (e.g. "@insurance broker.com") may be verified on the NYS DFS insurance licensing public website where the brokers email address and license number can be found.

SUNY's Insurance Checklist must be completed by the campus representative responsible for reviewing insurance certificates, and kept as part of the procurement record.

### Required documentation includes:

1. ACORD 25 - Certificate of Liability Insurance Form
2. NYS-required Workers' Compensation/NYS Disability Insurance Forms
3. SUNY Insurance Checklist (see page 3 of this form)

The Council of Contracting Agencies is developing guidance to state agencies on the ACORD 855 NY - Construction Certificate of Liability Addendum form. Once guidance is available SUNY will provide information and training on how to use and review the ACORD 855 form, and it will be added as an insurance requirement for SUNY's construction contracts.

### Expiration and Renewal of Insurance Policies:

If any policies will expire during the term of the agreement, the campus representative responsible for reviewing insurance certificates must request proof of renewal 30 days prior to the expiration of the insurance policy. At that time, if

proof of renewal or replacement of coverage has not been received, the campus will send a letter to the Contractor stating that the Agency requires receipt of a new Certificate of Insurance before the existing coverage expires.

\*In the event that insurance cannot be obtained from an insurance company authorized to write coverage in the State of New York the campus may consider the use of an excess line or non admitted carrier only if the following conditions are met.

- The insurance agent or broker has provided written evidence of no less than five requests for insurance quotes made to insurance carriers authorized to write coverage in the State of New York, and has provided copies of the written responses from those insurance carriers indicating those carriers are declining to offer coverage.
- The insurance agent or broker has provided an excess line insurance affidavit (Form - Exhibit A.10 of the Council of Contracting Agencies Insurance Procedure Manual).
- Campus Counsel has approved such documentation.

**Notice of a potential claim:**

When a campus learns of a potential lawsuit, whether by receipt of a communication or pleading from a private attorney or by a communication from the Office of the Attorney General, it should immediately identify any applicable insurance and notify all applicable insurance carrier(s) of the potential lawsuit. This notification needs to be done even if the accident or incident was previously reported to the same carrier or carriers.

In addition, upon receipt of a Notice of Intention, Claim, Summons with Notice, or Complaint or letter threatening litigation, the campus must notify Albany Claims Bureau or the New York City Claims Bureau of the Office of the Attorney General, depending where the incident occurred. Provide proof of insurance coverage and notification to the applicable insurance company(s).

Liability insurance policies typically have two notification provisions. The first is notification of an incident, i.e., the insurance company requires that it be notified of an accident or incident at the time of or shortly after it occurs. The second notification is that of a potential or existing lawsuit. Both notification provisions require the insurance company to be notified as soon as "reasonably practical" or as set forth in the policy. Campuses should establish procedures for identifying any applicable insurance and providing written notice to all applicable insurance carriers of situations causing potential claims. Failure to notify the insurance company under one or both of these required notification provisions allows the insurance company to argue denial of coverage. Campuses should also, in consultation with campus counsel, establish a process for preserving evidence.



## INSURANCE REVIEW CHECKLIST

### *Risk Management Review Checklist for Insurance Certificates For Construction and Construction Related Consultant Services Contracts*

Name of Contractor/Professional/Vendor \_\_\_\_\_

Project Name \_\_\_\_\_

Contract # \_\_\_\_\_ Project # \_\_\_\_\_ Date Contract Rec'd \_\_\_\_\_

Contract Type: \_\_\_\_\_ Construction \_\_\_\_\_ Design \_\_\_\_\_ Other (Specify) \_\_\_\_\_

|                         |   |           |          |
|-------------------------|---|-----------|----------|
| Insurance Requirements: | Standard per SUNY Contract                | Yes _____ | No _____ |
|                         | Environmental Liability Coverage required | Yes _____ | No _____ |
|                         | Renewal Certificates                      | Yes _____ | No _____ |

#### Insurance Carriers Licensed in NYS (Rating must be A- or better)

- |                         |           |          |              |
|-------------------------|-----------|----------|--------------|
| • Carrier A             | Yes _____ | No _____ | Rating _____ |
| • Carrier B             | Yes _____ | No _____ | Rating _____ |
| • Carrier C             | Yes _____ | No _____ | Rating _____ |
| • Carrier D             | Yes _____ | No _____ | Rating _____ |
| • Carrier E             | Yes _____ | No _____ | Rating _____ |
| • Worker's Comp Carrier | Yes _____ | No _____ | Rating _____ |
| • Disability Carrier    | Yes _____ | No _____ | Rating _____ |

#### Per the Certificate(s) provided, the following insurance is in compliance with the contract documents:

- |   | <u>Initials</u>    | <u>Date</u>         |
|---|--------------------|---------------------|
| • General Liability   | _____              | _____               |
| ○ Additional Insureds include the<br>State of New York, State University of New York, and<br>State University Construction Fund |                    |                     |
| ○ Occurrence based policy   |                    |                     |
| ○ Limits are adequate   |                    |                     |
| • Automobile Liability (Endorsements included)  | _____              | _____               |
| • Excess/Umbrella Liability   | _____              | _____               |
| • Workers' Compensation and Disability  | _____              | _____               |
| ○ SUNY is listed as certificate holder  |                    |                     |
| ○ Campus verified coverage on the Workers Compensation<br>Board Website   |                    |                     |
| ○ Endorsements of the policy are included   |                    |                     |
| • Builder's Risk (for Construction)   | _____              | _____               |
| • Owners Protective Liability (for Construction)  | _____              | _____               |
| ○ SUNY is listed as a named insured   |                    |                     |
| • Asbestos (where applicable)   | _____              | _____               |
| ○ Limits are in addition to required CGL/Excess Limits  |                    |                     |
| ○ Limits match the contract,  |                    |                     |
| ○ SUNY is a named insured   |                    |                     |
| • Professional Liability (for architecture and engineering)   | Per Claim \$ _____ | Deductible \$ _____ |

\_\_\_\_\_  
Name and signature (Campus Representative)

\_\_\_\_\_  
Date Reviewed

**BUILDERS RISK INSURANCE BREAKDOWN**

Date: \_\_\_\_\_

Title of Project:  
Location of Project:  
Project No.:

Name of Contractor:  
Address of Contractor:  
Estimated Completion Date:

Contract Amount: \$ \_\_\_\_\_

Non-insurable items  
(amounts to be determined from Contractor's  
approved breakdown):

1. Cost of the contractor's Performance and Labor and Materials Bonds \$ \_\_\_\_\_
2. Cost of trees, shrubbery, lawn grass, plants and the maintenance of same \$ \_\_\_\_\_
3. Cost of demolition \$ \_\_\_\_\_
4. Cost of excavation
5. Cost of foundations, piers or other supports which are below the undersurface of the lowest basement floors, or where there is no basement, which are below the surface of the ground. Concrete and Masonry Work \$ \_\_\_\_\_
6. Cost of Underground flues, pipes or wiring \$ \_\_\_\_\_
7. Cost of earthmoving, grading, and the cost of paving, roads, walks, parking lots and athletic fields \$ \_\_\_\_\_
8. Cost of bridges, tunnels, dams, piers, wharves, docks, retaining walls and radio and/or television towers and antennas \$ \_\_\_\_\_

Total Non-insurable items: \$ \_\_\_\_\_

Amount of Builder's Risk Insurance to be procured: \$ \_\_\_\_\_

**State University of New York  
Public Officers Law**

**Form XIII**

**Purchasing and Contracting Procedures  
(Procurement)**

**Inquiry to determine compliance with the provisions of Public Officers Law  
§ 73 (4)**

**Please indicate if you or any officer of your organization, or any party owning or controlling more than 10 percent of your stock if you are a corporation, or any member if you are a firm or association, is an officer or employee of the State of New York or of a public benefit corporation of the State of New York.**

\_\_\_\_\_ Yes

\_\_\_\_\_ No

**OSC Use Only:**

Reporting Code:

Category Code:

Date Contract Approved:

**FORM A****State Consultant Services - Contractor's Planned Employment  
From Contract Start Date Through The End Of The Contract Term**

State Agency Name:

Agency Code:

Contractor Name:

Contract Number:

Contract Start Date:    /    /

Contract End Date:    /    /

| Employment Category | Number of Employees | Number of hours to be worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------------|-----------------------------------|
|                     |                     |                              |                                   |
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| Grand Total         |                     |                              |                                   |

Name of person who prepared this report:

Title:

Phone #:

Preparer's Signature:

Date Prepared:    /    /

(Use additional pages, if necessary)

Page    of

**FORM B**

**OSC Use Only:**

Reporting Code:

Category Code:

**State Consultant Services**  
**Contractor's Annual Employment Report**  
**Report Period: April 1,            to March 31,**

Contracting State Agency Name:

Agency Code:

Contract Number:

Contract Term:    /    /        to    /    /

Contractor Name:

Contractor Address:

Description of Services Being Provided:

**Scope of Contract (Choose one that best fits):**

Analysis ☐ Evaluation ☐ Research ☐ Training ☐

Data Processing ☐ Computer Programming ☐ Other IT consulting ☐

Engineering ☐ Architect Services ☐ Surveying ☐ Environmental Services ☐

Health Services ☐      Mental Health Services ☐

Accounting ☐ Auditing ☐ Paralegal ☐ Legal ☐ Other Consulting ☐

| Employment Category | Number of Employees | Number of Hours Worked | Amount Payable Under the Contract |
|---------------------|---------------------|------------------------|-----------------------------------|
|                     |                     |                        |                                   |
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| Grand Total         |                     |                        |                                   |

Name of person who prepared this report:

Preparer's Signature: \_\_\_\_\_

Title:

Phone #:

Date Prepared:     /     /