

MSDGC SBE Goal Compliance Plan Cover Page

Project Name:						
Established SBE Participation Goal as Indicated in Legal N	otice:					
BIDDER INF	ORMATION					
Bidder Name:						
Bidder Firm is a: (check) SBE	Joint Venture	N/A				
Bidder's Contact Person:						
Contact Person Telephone Number:						
Contact Person Email Address:						
Contact Person Fax Number:						
Bidder Firm Address:						
City: State:	Zip Cod	de:				
BID AND SBE P	ARTICIPATION					
Total Base Bid Price: \$						
SBE Participation:						
If Bidder is not an SBE Firm, SBE Participation is the						
If Bidder is SBE Firm, SBE Participation Includes SB						
Check one: Will Meet SBE Participation Goal	Will Not Meet SBE Pa					
If the Subcontractor is not Registered with the MSDGC						
Cincinnati Office of Contract Compliance SBE Program						
Visit <u>www.msdgc.org</u> to view the current MSDGC SBE	vendor Listing or <u>www.cinc</u>	<u>Innati-on.gov</u> to view City				
of Circinnali SBE Directory.	of Cincinnati SBE Directory.					
THIS PLAN MUST BE SIGNED AN	ND SUBMITTED WITH	YOUR BID				
I certify that the information included in this SBE Goa	al Compliance Plan is true	and complete to the best				
I certify that the information included in this SBE Good of my knowledge and belief. I further understand an	al Compliance Plan is true nd agree that this SBE Go	and complete to the best pal Compliance Plan shall				
I certify that the information included in this SBE Goa of my knowledge and belief. I further understand as become a part of my Trade Contract with the City of	al Compliance Plan is true nd agree that this SBE Go f Cincinnati as agent for th	and complete to the best bal Compliance Plan shall e County Commissioners				
I certify that the information included in this SBE Goo of my knowledge and belief. I further understand as become a part of my Trade Contract with the City of of Hamilton County, Ohio for operation of the Met	al Compliance Plan is true nd agree that this SBE Go f Cincinnati as agent for th	and complete to the best bal Compliance Plan shall e County Commissioners				
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PROJECT INFORMATION



REQUIREMENTS FOR BID SUBMISSIONS TO MSDGC This Page Should Not Be Submitted with Bid						
Condition(s)	Document / Form(s) to be Submitted	Due				
If There Is No SBE Participation Goal Established For The Project:	MSDGC SBE Goal Compliance Plan Cover Page	With Bid				
	Subcontractor Utilization Plan (Statement of Intent to Utilize Firms) EXCEPTION: Only submitted if subcontractors are used on the project.	At pre-construction or any time during project before subcontractors are used.				
If SBE Participation Goal <u>WILL</u> Be Met:	MSDGC SBE Goal Compliance Plan Cover Page	With Bid				
	Subcontractor Utilization Plan (Statement of Intent to Utilize Firms)	Within 2 Business Days of Bid Opening from ALL Bidders				
If SBE Participation Goal <u>WILL</u> <u>NOT</u> Be Met:	MSDGC SBE Goal Compliance Plan Cover Page	With Bid				
	Waiver Request Form and Affidavit	With Bid				
	SBE Subcontractors Good Faith Efforts Summary Sheets documenting Good Faith Efforts made by bidder.	With Bid				
	Subcontractor Utilization Plan (Statement of Intent to Utilize Firms)	Within 2 Business Days of Bid Opening from ALL Bidders				

Please note: Documentation must support <u>ALL</u> of the areas checked on the Waiver Request Form and Affidavit. The SBE Program review may determine the bid non-responsive if the areas checked cannot be supported. Remember, the Good Faith Efforts Summary has to be granted by MSDGC SBE Program. MSDGC reserves the right to ask for additional information to support documentation.

Failure To Submit the Appropriate Documentation is Cause For Bid To Be Deemed Non-Responsive.

Calculation of the cost of materials and supplies obtained from a SBE toward SBE participation goal:

- A. If the materials or supplies are obtained from a SBE manufacturer, 100% of the cost of the materials or supplies shall count toward SBE goals.
- B. If the materials or supplies are purchased from a SBE supplier (that is not a manufacturer), 60% of the cost of the materials or supplies shall count toward SBE goals.



SUBCONTRACTOR UTILIZATION PLAN (STATEMENT OF INTENT TO UTILIZE FIRMS) Submit form via email to msd.procurement@cincinnati-oh.gov

Page of										
THIS DOCUMENT MU	IST BE ACCURATED	Y COMPLETED	D, SIGNED	AND SUBMITT	ED WITHIN 2	BUSI	NESS DA	YS OF E	BID OPEN	ING
Procurement Description:			Project N	ame (if applica	ıble):					
Company Name:			Date Subi	mitted:	-		Total Co	ntract \	/alue: \$	
Address:			Federal T	ax ID#:		-				
Contact Person:		E-mail:					Telepho	ne #:		
The Above Named Company Will Opening By ALL Bidders. The Bid Pertinent-Requested Information Contract.	der Must List <u>ALL S</u>	<u>UBCONTRACTO</u>	DRS , Regard	less Of The Am	ount Or Service	e. Fa	ilure To	Complet	e This Forr	m With All Th
Company Name/Address/Contact Person/Telephone/Email	Federal Tax ID#	Describe Exact T Work/*Supplier	ype of	*Subcontract Dollars	*Subcontract Percentage	SBE	MBE	WBE	Non- SMWBE	For Office Use Only (Calculation)
*Please note: If the materials or s goals. If the materials or supplies SBE goals. I certify that the above information is executed with the companies listed al	are purchased from	an SBE that is not have a second of the seco	ot a manufa	acturer, 60% of knowledges and	the cost of the agrees that if aw	mate arded	rials or s	upplies s	hall count	toward
Signature:	nce Plan	Title: Clic		nter text. Print Na		o ent	er text. c	ate: Click	here to en	iter text.



Waiver Request Form and Affidavit

Bidders who do not meet the <i>contract goal for SBE parti</i>	cipation must earn a minimum of eighty-five (85) points
in the following categories to determine if adequate "Go	od Faith Efforts" (GFE) to meet the Established SBE
Participation Goal were made. MSDGC SBE Office must	approve the Waiver Request.
Affidavit of:	
	being first duly cautioned and sworn, states as
follows:	
	(Name of bidder) has made
Good Faith Efforts to comply with the contract goals und	er the following areas checked and as established in the
attached documentation:	
accessed www.msdgc.org/listsbe_vendors and written notices) the interest of all certified SBEs contract. To be considered reasonable, the bidd days prior to the bid submission deadline, in order	, , , , , , , , , , , , , , , , , , , ,
· · · · · · · · · · · · · · · · · · ·	•
3 − (15 pts.) Provided interested MSDGC register adequate information about the plans, specificat manner to assist them in responding to a solicita	ions, and requirements of the contract in a timely
Cincinnati SBEs. It is the bidder's responsibility to subcontractors and suppliers and to select those the available SBE subcontractors and suppliers, s negotiation includes the names, addresses, and t Certified City of Cincinnati SBEs that were consid the plans and specifications for the work selected	sted MSDGC registered SBEs and/or Certified City of o make a portion of the work available to SBE portions of the work or material needs consistent with o as to facilitate SBE participation. Evidence of such selephone numbers of MSDGC registered SBEs and/or ered, a description of the information provided regarding d for subcontracting. [To receive credit for this effort, the thy additional agreements could not be reached for SBEs
that there may be some additional costs involved for a bidder's failure to meet the contract SBE go	s negotiation with potential SBEs, and took SBE the contract goals, into consideration. However, the fact d in finding and using SBEs is not itself sufficient reason hals, as long as such additional costs are not manifestly entractor to perform the work of the contract within its



own organization does not relieve the bidder of the responsibility to make good faith efforts. Prime contractors are not, however, required to accept higher quotes from SBEs if the price difference is manifestly unreasonable. In this regard, bids submitted by other bidders and their proposed SBE utilization may be considered in determining whether a price difference is manifestly unreasonable. ■ 6 – (10 pts.) If participation of specific MSDGC registered SBEs and/or Certified City of Cincinnati SBEs was considered, the bidder did not reject SBEs as being unqualified without sound reasons based on a thorough investigation of their capabilities. An SBE subcontractor's standing within its industry, membership in specific groups, organizations, or associations and political or social affiliations (for example, union vs. non-union employee status) are not legitimate causes for the rejection or nonsolicitation of SBE subcontractor proposals when considering the contractor's efforts to meet the project goal. ☐ 7 – (20 pts.) Made efforts to assist interested MSDGC registered SBEs and/or Certified City of Cincinnati SBEs in obtaining bonding, lines of credit, or insurance as required by MSDGC or the contractor. ■ 8 – (25 pts.) Made efforts to assist interested MSDGC registered SBEs and/or Certified City of Cincinnati SBEs in obtaining necessary equipment, supplies, materials, or related assistance or services. 9 – (15 pts.) Effectively used the services of community organizations, contractors' groups, local, state and federal business assistance offices, and other organizations as allowed on a case-by-case basis to provide assistance in the recruitment and placement of SBEs. ■ 10 – (30 pts.) The bidder is actively participating in an ongoing mentor/protégé relationship with an MSDGC registered SBE and/or Certified City of Cincinnati SBEs in the assistance of their business growth and development. The undersigned hereby affirms, upon personal knowledge, that the good faith efforts indicated above were performed by the bidder prior to the submission of the bid. The undersigned hereby agrees to provide any additional documentary evidence of its good faith efforts as requested by MSDGC. Name of Bidder: Signature _____ **SEAL** State of ______ Subscribed and sworn to before me on this______ day of ______, 20____ Notary Public _____ My commission expires



Page of								
THIS DOC	UMENT MUST BE AC	CURATELY CO	MPLETED, SIG	NED AND SUBMITTE	O WITH THE BIG	O OR PROPOSA	AL	
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Procurement Description:				ne and ID (if appli	cable):			
Company Name:			Date Subm			Total Contr	ract Value: \$	
Address:			Federal Tax	(ID#				
Contact Person:		E-mail:				Telephone	#:	
1 - (10 pts.) Solicited, through a www.cincinnati-oh.gov SBE Dir who have the capability to peri (14) days prior to the bid subm bidder must determine with ce For each MSDGC registered SBE and/ above Project. If additional space is re Company Name/Address/Contact Person/Telephone/Email	ectory, advertising form the work of the hission deadline, in ertainty if the SBEs a or Certified City or	and/or writt ne contract. order to allo are intereste f Cincinnati : may be dupl	ten notices) the To be conside the SBEs sufficed by docume SBE firm cont	ne interest of all MS ered reasonable, the ent time to respone nting and taking the	SDGC Register e bidder should to the solicit e appropriate	ed and/or Ce Id solicit this cation. [To re steps to follo nformation re Solicitation mit bid, no	rtified City of C interest not lest ceive credit for w up initial soli	Cincinnati SBEs ss than fourtee or this effort, the licitations.]
It is hereby certified that the above firms was a true account of all firms' responses to ou		• •	•	•	•	her certify that	the above state	ments are
Signature	Title	e		Print Na	me		Date	<u>:</u>



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THIS DOCUMENT MUST BE ACC	URATELY COMPL	ETED, SIGNED AND SUBMITTED W	ITH THE BID	OR PROPOSAL	
Procurement Description:		Project Name and ID (if app	licable):		
Company Name:		Date Submitted:		Total Contract Value: \$	
Address:		Federal Tax ID#			
Contact Person:	E-mail:			Telephone #:	
 2 – (10 pts.) Selected portions of the work to be performed by SBEs in order to increase the likelihood that the SBE goals will be achieved. This includes, where appropriate, breaking out contract work items into economically feasible units to facilitate SBE participation, even when the prime contractor might otherwise prefer to perform these work items with its own forces. List all information requested below related to the above Project. If additional space is required, this form may be duplicated. 					
Portion of Work to be Performed by SBEs:					
It is hereby certified that the above firms were contacted and offered an opportunity to respond on the above project. We further certify that the above statements are a true account of all firms' responses to our solicitation. Copies of all bids and/or quotes will be made available upon request.					
Signature	Title	Print Name		Date	



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THIS DOCUMENT MUST BE ACC	URATELY COMP	LETED, SIGNED AND SUBMITT	ED WITH THE BID OR PROPOS	SAL
Procurement Description:		Project Name and ID (if	annlicable):	
Company Name:		Date Submitted:		ntract Value: \$
Address:		Federal Tax ID#	Total Col	Tiract value. 9
Contact Person:	E-mail:	1000.01.107.107.	Telephor	ne #:
3 – (15 pts.) Provided interested MSDGC registers specifications, and requirements of the contract of For each SBE firm contacted, list the name(s) and all inform may be duplicated.	in a timely mar	nner to assist them in respor	iding to a solicitation for SE	BE participation.
Company Name/Address/Contact Person/Telephone/Em	ail			Date Provided
It is hereby certified that the above firms were contacted and ca true account of all firms' responses to our solicitation. Copies	• •	•		hat the above statements are
Signature	Title	Prin	t Name	Date



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THIS DOCUMENT MUST BE ACC	IRATELY COMPL	ETED, SIGNED AND SUBMITTED W	ITH THE RID OR PROPC	NSAI
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Company Name:		Date Submitted:	Total Co	ontract Value: \$
Address:		Federal Tax ID#		
Contact Person:	E-mail:		Telepho	one #:
needs consistent with the available SBE subcontrated the names, addresses, and telephone numbers of specifications for the work selected for subcontrated additional agreements could not be reached for SP For each SBE firm contacted, list the name(s) and all inform may be duplicated.	f SBEs that were acting. [To receiv BBEs to perform	e considered, a description of the ve credit for this effort, the bidd the work.]	e information provide er shall also submit v	ed regarding the plans and written evidence as to why
Company Name/Address/Contact Person/Telephone/Em	ail	Description of information provided		If Agreement Reached, Yes. If No, Why Not?
It is hereby certified that the above firms were contacted and of a true account of all firms' responses to our solicitation. Copies			•	that the above statements are
Signature	Title	Print Name	·	Date



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THIS DOCUMENT MUST BE ACCU	JRATELY COM	PLETED, SIGNED AND SUBMITTED	WITH THE BID OR PROPO	SAL
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Contact Person:	E-mail:	•	Telepho	ne #:
or desire of a prime contractor to perform the wo make good faith efforts. Prime contractors are no unreasonable. In this regard, bids submitted by or price difference is manifestly unreasonable. For each SBE firm contacted, list the name(s) and all inform may be duplicated.	ot, however, r ther bidders a	required to accept higher quoto and their proposed SBE utilizat	es from SBEs if the price ion may be considered in	difference is manifestly n determining whether a
Company Name/Address/Contact Person/Telephone/Email		Type of Work / S	ervice(s) Considered	If Agreement Reached, Yes. If No, Why Not?
				103. If 100, why 110t:
It is hereby certified that the above firms were contacted and of a true account of all firms' responses to our solicitation. Copies	• •	, ,		that the above statements are
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Address:		Federal Tax	ID#		
Contact Person:	E-mail:				Telephone #:
thorough investigation of their capabilities. An S associations and political or social affiliations (fo non-solicitation of SBE subcontractor proposals of For each SBE firm contacted, list the name(s) and all inform may be duplicated.	r example, unio when considerir	n vs. non-union	n employee stat or's efforts to n	tus) are not le neet the proje ove Project. I	gitimate causes for the rejection or ect goal. If additional space is required, this
Company Name/Address/Contact Person/Telephone/Email				If Agreemen Why Not?	t Reached, Yes. If No, List Sound Reasons
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Signature MSDGC SBE Goal Compliance Plan	Title	00 41 06-11	Print Name Rev. 0509201		Date



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Address:		Federal Ta	x ID#		
Contact Person:	E-mail:			Telephone #	t:
 7 – (20 pts.) Made efforts to assist interested insurance as required by MSDGC or the contraction of the contracti	ctor.				space is required, this form
Company Name/Address/Contact Person/Telephone/Email			Type of Assistance		If Agreement Reached, Yes. If No, Why Not?
It is hereby certified that the above firms were contacted at a true account of all firms' responses to our solicitation. Co		•		•	t the above statements are
Signature	Title		Print Name		Date

Page _____ of ____



THIS DOCUMENT MUST BE ACC	URATELY COMPLET	ED, SIGNED AND SUBMITTED W	VITH THE BID OR PROPO	SAL		
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Company Name:		Date Submitted:	Total Co	ntract Value: \$		
Address:	F	ederal Tax ID#				
Contact Person:	E-mail:		Telepho	ne #:		
 8 – (25 pts.) Made efforts to assist interested MS supplies, materials, or related assistance or servi For each SBE firm contacted, list the name(s) and all inf may be duplicated. Company Name/Address/Contact Person/Telephone/Email 	ces.					
company vame, vaaress, contact reison, reiephone, Enan		Type of Assistance		Not?		
It is hereby certified that the above firms were contacted and a true account of all firms' responses to our solicitation. Copi	· ·		•	y that the above statements are		
Signature	, Title	Print Name_		Date		

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Contact Person:	E-mail:		Telephon	Telephone #:	
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It is hereby certified that the above firms a true account of all firms' responses to o				y that the above statements	



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Procurement Description:		Project Name and ID (if applicable):				
Company Name:		Date Submitted:	Total Contract	Value: \$		
Address:		Federal Tax ID#				
Contact Person:	E-mail:		Telephone #:			
 10 – (30 pts.) The bidder is actively development. For each SBE firm participating in your madditional space is required, this form made 	entor/protégé relationshi					
Company Name/Address/Contact Person/Te	ephone/Email		Type of Business			
It is hereby certified that the above firms we	are contacted and offered an o	opportunity to respond on the abo	ve project. We further certify that t	he ahove statements are		
a true account of all firms' responses to our				ne above statements are		
Signature	Title	Print N	lame	Date		