



C003492

UNIVERSITY-WIDE MWBE/SDVOB PROGRAM
UTILIZATION PLAN

SUNY Project No. 22/23-041MC Bid Date: 11/1/22 Click here to enter a date. Agreement/Contract Value: \$1,253,725.00

Contractor: Park Line Asphalt Maintenance, Inc. Primary Contact: Robert Mailand

Address: 1877 Montauk Highway City: Brookhaven State: New York Zip Code: 11719

Phone Number: 631-286-4726 Fax Number: 631-286-4763 E-Mail: parklineasphalt@optonline.net

GOALS: MBE 20 % SDVOB 6 % WBE 10 % Campus: Stony Brook University

SUBCONTRACTOR	FEDERAL ID #	DOLLAR VALUE OF CONTRACT OR PURCHASE ORDER	DESCRIPTION OF WORK OR SUPPLIES	SUBCONTRACTOR/SUPPLIER SCHEDULE	
				START DATE	COMPLETION DATE
Company Name: <u>Infinite Energy Corp.</u> Street Address: <u>641 Lexington Ave., NYC</u> Contact Name: <u>Deborah Pinto</u> E-Mail Address: <u>dpinto@infiniteenergycorp.com</u> Check One: ☐ SDVOB ☐ MBE ☒ WBE	13-3527977	<u>9%</u> \$ 112,781.25	Fuel Oil	Click here to enter a date.	Click here to enter a date.
Company Name: <u>Holbrook Pipe</u> Street Address: <u>790 Grundy Ave., Holbrook, NY</u> Contact Name: <u>Paul Noonan</u> E-Mail Address: <u>631-588-6880</u> Check One: ☐ SDVOB ☐ MBE ☒ WBE	11-2347292	<u>4%</u> \$ 50,149.00	Parts	Click here to enter a date.	Click here to enter a date.
Company Name: <u>S&B Computer Office Products</u> Street Address: <u>17 Wood Rd., Round Lake, NJ</u> Contact Name: <u>Seema Nepal</u> E-Mail Address: <u>518-877-9500</u> Check One: ☐ SDVOB ☐ MBE ☒ WBE	14-1752798	<u>1%</u> \$ 12,537.25	Office Products	Click here to enter a date.	Click here to enter a date.
Company Name: <u>Warrior Rebar Corp.</u> Street Address: <u>374 Silva Street</u> Contact Name: <u>Holbrook, NY 117141</u> E-Mail Address: <u>warriorbar1@gmail.com</u> Check One: ☒ SDVOB ☐ MBE ☐ WBE	11-00216543	<u>6%</u> \$ 75223.50	Rebar fabrication/products Trucking, etc.	Click here to enter a date.	Click here to enter a date.

In accordance with the SUNY Contract Documents and Executive Law Article 15-A, my firm seriously expects to use the NYS certified MBE/WBE certified firms listed above. The Contractor shall immediately notify and request approval prior to any changes to this plan from the University-wide MWBE Program Office. ☐

Type text here

NAME: Robert Mailand TITLE: President DATE: 11/1/22

Click here to enter a date.

APPROVED: ☒ DEFICIENT: ☐ MWBE PROGRAM COORDINATOR DATE: 8-1-23



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Company Name: <u>Island Concrete Construction</u> Street Address: <u>68 Horseblock Road</u> Contact Name: <u>Centereach, NY 11720</u> E-Mail Address: _____ Check One: ☐ SDVOB ☐ MBE ☒ WBE ☐	11-2964258	<u>163</u> \$ 200,596.00	Abatement, Concrete, Paving	Click here to enter a date.	Click here to enter a date.
Company Name: _____ Street Address: _____ Contact Name: _____ E-Mail Address: _____ Check One: ☐ SDVOB ☐ MBE ☐ WBE ☐				Click here to enter a date.	Click here to enter a date.
Company Name: _____ Street Address: _____ Contact Name: _____ E-Mail Address: _____ Check One: ☐ SDVOB ☐ MBE ☐ WBE ☐				Click here to enter a date.	Click here to enter a date.
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