

# REQUEST FOR WAIVER

Please see page two for documentation requirements. By submitting this form and the required information, the offeror/contractor certifies that every Good Faith Effort has been taken to promote M/WBE participation pursuant to the M/WBE participation requirements set forth under the contract.

**Contract Overview**

Offeror/ Contractor Name: _____	Telephone: _____
Address: _____	Federal ID No. _____ SFS Vendor ID: _____
City, State, Zip: _____	Solicitation/Contract No: _____
Type of Procurement:      Competitive Bid <input type="checkbox"/> Other <input type="checkbox"/> Bid Response Due Date: _____ Est. or Actual Cost: _____	

**Waiver Request: Fill ALL boxes with an X or N/A and provide justification (attach additional pages if needed):**

1.     MBE Waiver- A waiver of the MBE Goal for this procurement is requested.  Total       Partial
2.     WBE Waiver - A waiver of the WBE Goal for this procurement is requested.  Total       Partial
3.     Waiver- Pending ESD Certification - Check here if subcontractors or suppliers of Contractor are not certified M/WBE but an application for certification has been filled with Empire State Development). Subcontractor/Supplier Name: \_\_\_\_\_ Date of filling: \_\_\_\_\_ Reference submission instruction on page 2, item 1.
4.     Vendor does not subcontract construction/professional services.
5.     Vendor subcontracts some of this type of work but at lower % than bids/solicitation describes.
6.     Vendor has solicited NYS Certified M/WBE firms for purposes in complying with participation goals without success. Please see requirements: Reference submission instruction on page 2, items 2-10.
7.     Other: \_\_\_\_\_

Provide a summary of your justification for requesting a waiver.

By checking this box you verify that you went through the NYS ESD M/WBE Directory of Certified firms to view companies that you may be currently using or may use on this bid.

SUBMISSION OF THIS FORM CONSTITUTES THE OFFEROR/CONTRACTOR'S ACKNOWLEDGEMENT AND AGREEMENT TO COMPLY WITH THE M/WBE REQUIREMENTS SET FORTH UNDER NYS EXECUTIVE LAW, ARTICLE 15-A, 5 NYCRR PART 142, AND THE ABOVE REFERENCED SOLICITATION. FAILURE TO SUBMIT COMPLETE AND ACCURATE INFORMATION MAY RESULT IN A FINDING OF NONCOMPLIANCE AND/OR TERMINATION OF THE CONTRACT.

**VENDOR CERTIFICATION:** I hereby affirm that the information supplied in support of this waiver request is true and correct, and that this request is made in good faith.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Print Name \_\_\_\_\_

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

Title \_\_\_\_\_

Seal:

Company \_\_\_\_\_

## REQUIREMENTS AND DOCUMENT SUBMISSION INSTRUCTIONS

To be considered, the Request for Waiver form must be accompanied by supporting documentation for items 1-10, as listed below. If a Waiver Pending ESD Certification is requested, please see note below. Copies of the following information and all relevant supporting documentation must be submitted along with the request.

**Supporting Documentation:**

1. Provide any other information you deem relevant which may help us in evaluating your request for a waiver.
2. Provide the names of general circulation, trade association, and MWBE-oriented publications in which you solicited certified MWBEs for the purposes of complying with your participation goals.
3. Provide a list identifying the date(s) that all solicitations for certified MWBE participation were published in any of the above publications and the text of said solicitation(s).
4. Provide a list of all certified MWBEs appearing in the NYS Directory of Certified Firms that were solicited in writing for purposes of complying with the certified MWBE participation levels.
5. Provide copies of notices, dates of contact, letters and other correspondence as proof that solicitations were made in writing and copies of such solicitations, or a sample copy of the solicitation, if an identical solicitation was made to all certified MWBEs.
6. Provide copies of responses made by certified MWBEs to your solicitations.
7. Provide a description of any contract documents, plans or specifications made available to certified MWBEs for purposes of soliciting their bids, and the date and manner in which these documents were made available.
8. Provide documentation of any negotiations between the Offeror/Contractor, and/or MWBE(s) undertaken for purposes of complying with the certified MWBE participations goals.
9. Provide the name, title, address, telephone number, and email address of the Offeror/Contractor's representative authorized to discuss this waiver request.
10. Copy of notice of application receipt issued by Empire State Development (ESD).

**NOTE:** Unless a Total Waiver has been granted, Offeror/Contractor will be required to submit all reports and documents pursuant to the provisions set forth in the Contract, as deemed appropriate by the State, to determine MWBE compliance.

FOR AUTHORIZED USE ONLY

Reviewed By: _____	Date: _____	Waiver Granted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Total Waiver	<input type="checkbox"/> Partial Waiver	<input type="checkbox"/> Conditional Waiver	<input type="checkbox"/> ESD Certification Waiver
			Date of Deficiency Issued: _____