

**SUBCONTRACTOR UTILIZATION PLAN**  
(STATEMENT OF INTENT TO UTILIZE FIRMS)



Louisville and Jefferson County  
Metropolitan Sewer District

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**THIS DOCUMENT MUST BE ACCURATELY COMPLETED, SIGNED AND SUBMITTED BY ALL BIDDERS**  
**BY 3:00PM THE NEXT BUSINESS DAY AFTER THE BID OPENING**

Project Name:	Project Description:	
Company Name:	Date Submitted:	Total Value:
Address:	Federal Tax ID#	
Contact Person:	Email:	Phone #:

The above named company will execute a formal agreement with the firms listed below. This form must be submitted by **3:00pm the next business day after the bid opening**. The bidder must list **ALL SUBCONTRACTORS**, Regardless of the amount or service. Failure to complete this form with all the pertinent-requested information [as indicated in each column], shall cause a bid to be non-responsive. This document will be included as part of the contract.

Company Name/Address/Contact Person/Phone/Email	Federal Tax ID#	Describe Exact Type of Work/*Supplier	Check if Supplier Only	*Subconsultant Amount	Consultant/Percentage	MBE	WBE	Non-M/WBE	For Office Use Only (Calculation)
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Please Note: If the materials or supplies are obtained from an MBE/WBE manufacturer, 100% of the cost of the materials or supplies shall count toward MBE/WBE goals. If the materials or supplies are purchased from an MBE/WBE that is not a manufacturer, 60% percentage of the cost of the materials or supplies from a certified M/WBE supplier will be counted toward the MBE/WBE goals. MSD reserves the right to make announced or unannounced field site visits to M/WBE firms' business locations. I certify that the above information is true to the best of my knowledge. The company acknowledges and agrees that if awarded the contract the information provided on this Subcontractor Utilization Plan shall be incorporated into the terms and conditions of the final contract between MSD and the Company. All firms checked MBE/WBE must be registered with MSD's Supplier Diversity Office and certified with national and federal certification organizations as recognized by MSD. I acknowledge and agree that any changes to the above information must be submitted on the MSD Subcontractor Substitution Form and approved in advance by MSD.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_