



**UNIVERSITY-WIDE MWBE/SDVOB PROGRAM
UTILIZATION PLAN**

5-1-23 to 4-30-28
\$10,782,600-

SUNY Project No. 22/23-18 MC
Contractor: Liberty Moving + Stg
Address: 350 Marland Rd
Phone Number: 671-234-3001

Bid Date: 2/27/23 enter a date. Agreement/Contract Value: N/A
Primary Contact: Mike Federico
City: Camden State: NJ Zip Code: 11725
Fax Number: _____ E-Mail: mike.f@libertymoving.com
Goals: MBE 20 % WBE 10 % SDVOB 6 % Campus: Stony Brook

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>Baya Inc</u> Street Address: <u>31 Canal Place Bronx</u> Contact Name: <u>Frank Lopez</u> E-Mail Address: <u>bayafrank@icloud.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE <input type="checkbox"/>	<u>N/A</u>	5% <u>5.5%</u>	<u>Moving Services</u>	<u>N/A</u> Click here to enter a date.	<u>N/A</u> Click here to enter a date.
✓ Company Name: <u>CTK Trucking + Logistic</u> Street Address: <u>515 West 143rd St NYC</u> Contact Name: <u>Neal McLeod</u> E-Mail Address: <u>NJ13009@conavis.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE <input type="checkbox"/>	<u>N/A</u>	5% <u>5.5%</u>	<u>Moving Services</u>	<u>N/A</u> Click here to enter a date.	<u>N/A</u> Click here to enter a date.
✓ Company Name: <u>Greenwood + Sons Inc</u> Street Address: <u>100 Box 229</u> Contact Name: <u>Hugh Greenwood</u> E-Mail Address: <u>NJ72108@conavis.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE <input type="checkbox"/>	<u>N/A</u>	5% <u>5.5%</u>	<u>Moving Services</u>	<u>N/A</u> Click here to enter a date.	<u>N/A</u> Click here to enter a date.
✓ Company Name: <u>Hudson Moving + Stg</u> Street Address: <u>2700 Broadway NYC</u> Contact Name: <u>Amy Whitman</u> E-Mail Address: <u>Whitman@fchoe.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input checked="" type="checkbox"/> WBE <input type="checkbox"/>	<u>N/A</u>	5% <u>5%</u>	<u>Moving Services</u>	<u>N/A</u> Click here to enter a date.	<u>N/A</u> 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.

NAME: _____ TITLE: _____ COMPANY OFFICER'S SI: _____ DATE: 2/10/23
Click here to enter a date.

APPROVED: DEFICIENT: DATE: 3-30-2023



**UNIVERSITY-WIDE MWBE/SDVOB PROGRAM
UTILIZATION PLAN**

SUNY Project No. 22/23-1183C
 Contractor: Liberty Moving + Storage
 Address: 350 Newland Rd
 Phone Number: 631-234-3001

Bid Date: 2/21/23 Click here to enter a date. Agreement/Contract Value: N/A
 Primary Contact: Mike Felcico
 City: Connack State: NY Zip Code: 11725
 Fax Number: _____ E-Mail: mike.f@libertymoving.com
 GOALS: MBE 20 % WBE 10 % SDVOB 6 % Campus: Stony Brook

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>Pearson Moving</u> Street Address: <u>1853 Central Park Ave Tonkers</u> Contact Name: <u>Simon Pearson</u> E-Mail Address: <u>pearsonmoving@gmail.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/>	<u>W/A</u>	<u>4%</u>	<u>Moving Services</u>	Click here to enter a date. <u>W/A</u>	Click here to enter a date. <u>W/A</u>
Company Name: <u>Quinn's Storage</u> Street Address: <u>40 Quila Circle East Setauket</u> Contact Name: <u>Denailer Quinn</u> E-Mail Address: <u>quinnstorage@aol.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/>	<u>W/A</u>	<u>3%</u>	<u>Moving Services</u>	Click here to enter a date.	Click here to enter a date.
Company Name: <u>Pressantia + Commercial Services - Santi EXPRESS</u> Street Address: <u>616 Corporate Way Suite 7 Valley Cottage</u> Contact Name: <u>Chery Links</u> E-Mail Address: <u>csanti@santiexpress.com</u> Check One: SDVOB <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input checked="" type="checkbox"/>	<u>W/A</u>	<u>3%</u>	<u>Moving Services</u>	Click here to enter a date.	Click here to enter a date.
Company Name: _____ Street Address: _____ Contact Name: _____ E-Mail Address: _____ Check One: SDVOB <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/>				Click here to enter a date.	Click here to enter a date.

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NAME: _____ TITLE: _____ DATE: 2/10/23
 Click here to enter a date.

APPROVED: DEFICIENT: MWBE PROGRAM COORDINATOR: _____ DATE: _____



UNIVERSITY-WIDE MWBE/SDVOB PROGRAM UTILIZATION PLAN

SUNY Project No. 22/23-118MC
 Contractor: Liberty Moving - STJ
 Address: 350 Shoreland Rd
 Phone Number: 631-234-3001

Bid Date: Click here to enter a date. Agreement/Contract Value: N/A
 Primary Contact: Mike Fedorovic
 City: Commack State: NY Zip Code: 11725
 Fax Number: _____ E-Mail: mikejv@libertymoving.com

GOALS: MBE 20 % WBE 10 % SDVOB 6 % Campus: Shaw Brook

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>American Liberty Services</u> Street Address: <u>84-10 Horse Block rd Yaphank</u> Contact Name: <u>Gary Hall</u> E-Mail Address: <u>Ghall@americanliberty.com</u> <i>W/A</i> Check One: SDVOB <input checked="" type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/>		<u>3 1/2 6%</u>	<u>Moving Services</u>	<u>Click here to enter a date.</u> <i>W/A</i>	<u>Click here to enter a date.</u> <i>W/A</i>
Company Name: <u>Team Relocation Management</u> Street Address: <u>61 Bazarbowme Rd Bethpage</u> Contact Name: <u>Fred Gasior</u> E-Mail Address: <u>fred.gasior@teamrelocation.com</u> <i>W/A</i> Check One: SDVOB <input checked="" type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/>		<u>3%</u>	<u>Moving Services</u>	<u>Click here to enter a date.</u> <i>W/A</i>	<u>Click here to enter a date.</u> <i>W/A</i>
Company Name: _____ Street Address: _____ Contact Name: _____ E-Mail Address: _____ Check One: SDVOB <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/>				<u>Click here to enter a date.</u>	<u>Click here to enter a date.</u>
Company Name: _____ Street Address: _____ Contact Name: _____ E-Mail Address: _____ Check One: SDVOB <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/>				<u>Click here to enter a date.</u>	<u>Click here to enter a date.</u>

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.

NAME: _____ TITLE: President COMPANY OFFICE _____ URE _____ DATE: 2/8/23
 Click here to enter a date.

APPROVED: DEFICIENT: MWBE PROGRAM COORDINATOR: _____ DATE: _____

