DESIGNATION OF AFFIRMATIVE ACTION REPRESENTATIVES BY CONTRACTORS/SUBCONTRACTORS

In accordance with Equal Employment Opportunity (EEO) and Disadvantaged/Minority/ Women's Business Enterprise (D/M/WBE) Utilization participation requirements of the New York State Department of Transportation contract identified below, the following information shall be furnished by the contractor and all subcontractors prior to approval to work.

1.	Contract No. $\frac{455}{}$	<u>25</u>	2. County	Essex	and	Franklin -
3.	Contractor ☐ or Name Address	Subcontractor □: (Kubricky Cons 269 Ballard R	struction Co coad			
	City/State/Zip	Wilton, New Y	ork 12831-1	<u>3</u> 57		
4.	Equal Employment Opportunity Officer:					
	Name	Suzanne Olden	_			
	Title	EEO/AA Office	er			
	Address	269 Ballard R	.oad			
	City/State/Zip	Wilton, New Y	ork 12831-1	<u>3</u> 57		
	Telephone	(518)792-586	4	_		
5.	Contract Site Equal Employment Opportunity Representative:					
	Name	Jeremy Sarger	•	_		
	Title	Construction		_		
	Address City/State/Zip	269 Ballard F Wilton, New Y	load York 12831-1	_ .357		
	Telephone	(518)376-168	9	_		
6.	Disadvantaged/ Mind	ority/Women's Business	Enterprise (D/M/	WBF) Offi	icer.	
	Name	Suzanne Older	• `	WBL) OIII	cor.	
	Title	EEO/AA Office	er	_		
	Address	269 Ballard Road				
	City/State/Zip	Wilton, New Y	ork 12831-1	 .357		
	Telephone	(518)792-586		- -		
7.	Designation Submissi	on: 🖄	Initial	□ Revis	sed	

This form shall accompany D/M/WBE submittals (AAPHC 89 - Part 1) to the Office of Equal Opportunity Development and Compliance (OEODC) and requests for Subcontractor approval (AAPHC 89 - Part 2) to the appropriate Regional Director.