OFFICE OF EQUAL OPPORTUNITY
AND
PUBLIC CONTRACT ASSISTANCE

MUNICIPAL FINANCE
AND
CONSTRUCTION ELEMENT

SED PARTICIPATION
BUILDING PHASE
QUARTERLY REPORTING FORM
FOR
CONTRACTING AGENCIES & CONTRACTORS

(OEO-002)

New Jersey Department of Environmental Protection
REPORTING REQUIREMENTS ON SOCIALLY AND ECONOMICALLY DISADVANTAGED (SED) BUSINESS UTILIZATION

These instructions apply to reporting on the utilization of Socially and Economically Disadvantaged Businesses (MBEs/WBEs/SEDs) under the New Jersey Department of Environmental Protection and the New Jersey Environmental Infrastructure Financing Programs. They are intended to provide guidance to Project Sponsors and Contractors in filling out the Building Phase (SED) Utilization Form. The reporting requirements apply to all Contracting Agencies and Contractors pursuing New Jersey Financing Assistance through programs administered by the New Jersey Department of Environmental Protection and the New Jersey Environmental Infrastructure Trust pursuant to N.J.A.C. 7:22-3.; N.J.A.C. 7:22-4.; N.J.A.C. 7:22-6; N.J.A.C. 7:22A-6; N.J.A.C. 7:22-7.

Each Project Sponsor and Contractor must submit this building SED Report (Form OEO-002) quarterly on MBE/WBE utilization for each contract for which a Project Sponsor or its Contractor(s) awards a subagreement. The form must be submitted to the New Jersey Department of Environmental Protection (NJDEP), Office of Equal Opportunity, Public Contract Assistance within 15 days following the close of each fiscal year quarter (i.e., January 15, April 15, July 15, and October 15).

INSTRUCTIONS FOR FILLING OUT SED UTILIZATION REPORT

1. Read instructions carefully before completing form, and refer to N.J.A.C. 7:22-9.1 et seq. for further guidance.

2a. The name and address of Project Sponsor participating in the grant/loan programs for environmental infrastructure facilities.

2b. Name of the Project Compliance Officer responsible for submitting periodic reports.

3. Name and address of party contracting directly with the Project Sponsor.


5a. The grant/loan project number for the agreement between the State of New Jersey and the Project Sponsor.

5b. The grant/loan project number for the contract between the Project Sponsor and its contractor(s).

6. Include brief description of project.

7. Self-explanatory.

8a. The county in which the Project Sponsor is located.

8b. The municipality in which the Project Sponsor is located.

9. The date of the agreement between the State of New Jersey and the Project Sponsor.

10a. The date of agreement between the Project Sponsor and the contractor.

10b. Self-explanatory.

11. Indicate MBE and WBE goals based upon project plan for SED utilization developed in consultation with the Office. These goals may vary depending upon local law. Where a Project Sponsor has a SED participation goal which exceeds ten percent, the Project Sponsor's goal shall take precedence.

12. Enter the name, address and telephone number of each SED participating in the building phase as a subcontractor under agreement with the construction management firm or the Project Sponsor. Check applicable MBE or WBE status of each listed SED. Explain type of service rendered and list the total dollar amount of the subcontract. Each entry must be accompanied by a copy of the signed subcontract.

Restricted - Bids may be solicited on a restricted basis by setting aside a contract for building, materials and equipment, or services which is designated as a contract for which bids are invited and accepted only from SEDs.

Unrestricted - Bids may be solicited on an unrestricted basis and not designated for a set-aside contract, but the contract document shall include a statement to the effect that the successful bidder must fulfill the SED utilization requirements.
13. See instructions for Item 12. This section is designated for SEDs participating in the building phase of a project as a subcontractor under agreement with building contractor(s).

14. Person signing must be the designated Project Compliance Officer of the Project Sponsor. The contractor(s) or the authorized representative of the contractor(s).

15. Additional comments or explanations. Refer to the specific item number on the form, if applicable.

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
NEW JERSEY MUNICIPAL FINANCE & CONSTRUCTION ELEMENT
OFFICE OF EQUAL OPPORTUNITY & PUBLIC CONTRACT ASSISTANCE

CONSTRUCTION REPORT

SOCIALLY AND ECONOMICALLY DISADVANTAGED (SED) BUSINESS UTILIZATION

1. Read Instructions Before Completing Form.

2a. Project Sponsor

Name
________________________________________
________________________________________________________________________________________

Address
________________________________________________________________________________________
________________________________________________________________________________________

2b. Project Compliance Officer
________________________________________

3. Contractor

Name
________________________________________
________________________________________________________________________________________

Address
________________________________________________________________________________________
________________________________________________________________________________________

4. Financing Program (check applicable program(s))

   _____a. Wastewater Treatment Fund
   _____b. Wastewater Treatment Trust
   _____c. Pinelands Infrastructure Trust
   _____d. Stormwater Management
   _____e. Water Supply

5a. Project Number
________________________________________

5b. Contract Number
________________________________________

6. Project Name
________________________________________________________________________________________

7. Contract Amount $________________________________

8a. County __________________________________________

8b. Municipality
________________________________________________________________________________________
9. Date of Grant/Loan Agreement __________________________

10a. Date of Contract Award ________________________________ 10b. Duration of Contract: Mo. _____ Days _____

11. **STATE GOAL OR OTHER STANDARDS (IF ANY)**

    Contracting Agency=s Requirement

<table>
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<tr>
<th></th>
<th>DOLLAR AMOUNT</th>
<th>PERCENTAGE OF CONTRACT AMOUNT</th>
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<tr>
<td>MBE</td>
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<td>WBE</td>
<td>$ ____________</td>
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<td>TOTAL SED</td>
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### A/E and Other Professional Service Subcontracts Awarded During the Building Phase

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<th>Name, Address and Telephone No.</th>
<th>MBE/ WBE</th>
<th>Type of Service Rendered</th>
<th>Dollar Amount</th>
<th>Number of Full-time Employees</th>
<th>Subcontract (R/U)</th>
<th>Subcontract Award</th>
<th>Date of Subcontract</th>
<th>Type of Award*</th>
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*Restricted/Unrestricted
### Other Subcontract Awards Made Under the Building Phase

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<th>Name, Address and Telephone No.</th>
<th>WBE</th>
<th>MBE/</th>
<th>Type of Service Rendered</th>
<th>Amount</th>
<th>Number</th>
<th>Dollar Award</th>
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Number of Full-time Employees __________

* Restricted/Unrestricted
14. ___________________________________________________  ______________________________ ________________  
(Signature of Project Compliance Officer)                   (Signature of Contractor)

___________________________________________________  ______________________________________________
(Title)         (Title)

___________________________________________________  ______________________________________________
(Date)         (Date)

15. Space Provided for Additional Comments or Explanations