

## Gilead Hill Elementary School Partial Roof Replacement

580 Gilead Street, Hebron, CT

State Project #: 067-0044 RR

Friar Project #: 2024-021A

### Addendum #1

January 29, 2026

The **Non-Mandatory Pre-Bid meetings and tours** will be held at Gilead Hill Elementary School, 580 Gilead Street, Hebron, CT on Monday and Tuesday, February 16 & 17, 2026 at 9:00 A.M. Bidders are not required to attend but are encouraged to attend to familiarize themselves with the Project Site.

Since school will be in session, **all attendees will need to provide a valid ID** in order to access the buildings and grounds.

Per the revisions below, the **Bid Due Date** is being changed to no later than **10:00 a.m., Friday, February 27, 2026.**

### Revisions to Drawings:

None

### Revisions to Specifications:

- 1) 001000 LEGAL NOTICE BID
  - a. Revise sentence in 2<sup>nd</sup> paragraph to read, *"All bids are due no later than February 27, 2026 at 10:00 a.m."*
- 2) 002000 INSTRUCTIONS TO BIDDERS
  - a. Revise paragraph 1. Bid Opening as follows:  
*"Sealed bids will be accepted by the Town Manager's Office, Town of Hebron, 15 Gilead Street, Hebron, Connecticut 06248 no later than 10:00 a.m., Friday, February 27, 2026..."*
- 3) 003000 BID FORM
  - a. Delete Section and replace with attached section 003000 BID FORM.
- 4) Pre-Bid RFI #3
  - a. Question: In the front-end documents for both the Code Violation and Re-Roofing Projects, we noticed that there are several CHRO related documents, that we believe are no longer in effect.
  - b. Answer: That is correct that there are several of them that are no longer valid.
  - c. Changes Include: Effective on October 1, 2025, in response to new legislation that was enacted, the CHRO Contract Compliance Unit has introduced changes to the requirements for State-Funded Projects. As part of this Addenda is a document that is entitled "Important Updates to State Contract Compliance Requirements." This information is also on file and can be viewed on CHRO's

website. Also, are the templates for the new plan formats to be used going forward. The Good Faith Efforts Short Form Plan will replace the Set-Aside Plan, and the Good Faith Efforts Long Form Plan will replace the Affirmative Action Plan. Monthly reports are no longer required to be submitted. However, each Bidder must review CHRO's website to familiarize themselves so that they will know and fully understand what they need to submit regarding Contract Compliance Documents. See attached Good Faith Efforts Short Form Plan, Good Faith Efforts Long Form Plan and 2025-09-30 CHRO Contract Compliance Notice of Changes.

**Attachments:**

<u>Description</u>	<u>Pages</u>
003000 BID FORM	5
Good Faith Efforts Short Form Plan	13
Good Faith Efforts Long Form Plan	34
2025-09-30 CHRO Contract Compliance Notice of Changes	1

**END OF ADDENDUM #1**

**BID PROPOSAL FORM  
TOWN OF HEBRON, CONNECTICUT 06248**

**ROOF REPLACEMENT  
GILEAD HILL ELEMENTARY SCHOOL  
580 GILEAD STREET, HEBRON, CT**

**BID # 2026-07**

Opening Date: 10:00 a.m., February 27, 2026

Town Manager's Office  
Town of Hebron  
15 Gilead St  
Hebron, CT 06248

In accordance with the Drawings, Specifications, Bidding and Contract Document, the undersigned agrees to the following:

Provide ALL Labor, Material and Equipment that is necessary to complete the Roof Replacement Project.

References:

We have performed work or provided services for the following municipalities and on these dates:

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_

SUBMITTED BY:

(Bidder's full Company Name).....

(Bidder's full address).....

.....

(Bidder's telephone and fax numbers).....

(Bidder's email address).....

1. OFFER

Having examined the Place of The Work and all matters referred to in the Instructions to Bidders and the Bidding and Contract Documents prepared by Friar Architecture for the

above-mentioned project, we, the undersigned, hereby offer to enter into a Contract to perform the Work of the Base Bid for the Sum of:

\$.....dollars (.....)  
 (amount in words) (amount in figures)

2. UNIT PRICES

In accordance with Specification sections 012200 Unit Prices and 012100 Allowances, we propose and agree that the following unit prices for work performed in accordance with Contract Documents, measured in place, shall be used to compute cost to the Town of Hebron should amount of work required by the Contract Documents be changed by order of the Town of Hebron. Unit prices include all necessary material, overhead and profit, and applicable taxes.

The unit price amounts will be added or deducted from the Contract Sum by Change Order. For work added to Contract, these unit prices include all costs, overhead and profit for all parties involved including the Contractor and Subcontractors. For work deleted from Contract, credit to the Town of Hebron for such work shall be computed on the basis of unit price.

Schedule of Allowances included in Base Bid

HAZARDOUS MATERIAL ITEM NO. (#012200)	UNIT	PRICE
A. Unit Price No. 1: asbestos containing tar on metal roof deck, removal and disposal of tar as asbestos and presumed PCB bulk product waste > 50 ppm.	S.F.	\$ _____
B. Unit Price No. 2: Installation of interior isolation barriers for removal of metal roof decking coated with asbestos containing tar.	S.F.	\$ _____
C. Unit Price No. 3: Removal and disposal of metal roof decking coated with asbestos containing tar as asbestos and presumed PCB bulk product waste.	S.F.	\$ _____
D. Unit Price No. 4: Removal and disposal of wood curbs coated with asbestos containing tar as asbestos and presumed PCB bulk product waste.	S.F.	\$ _____
E. Unit Price No. 5: Removal and disposal of metal curbs coated with asbestos containing tar as asbestos and presumed PCB bulk product waste.	S.F.	\$ _____
F. Unit Price No. 6: Removal and disposal of roof insulation board contaminated with asbestos containing tar as asbestos and presumed PCB bulk product waste.	S.F.	\$ _____

ARCHITECTURAL ITEM NO. (#012201)	UNIT	PRICE
A. Unit Price No. 1: Cutting and patching of steel roof deck.	S.F.	\$ _____
B. Unit Price No. 2: Metal deck abatement.	S.F.	\$ _____
C. Unit Price No. 3: Wood blocking replacement	L.F.	\$ _____
C. Unit Price No. 4: Ceiling replacement	S.F.	\$ _____

3. ALTERNATE BID ITEMS - Per 012300 Alternates: Deduct Alternate No. 1: Furnish 20 year EPDM roofing system

4. ACCEPTANCE

This offer shall be open to acceptance and is irrevocable for ninety (90) days from the bid closing date.

If the Town of Hebron accepts this bid within the time period stated above, we will:

- Execute the Agreement within ten days of receipt of notice of acceptance of this bid.
- Furnish the required bonds and insurance certificates within ten (10) days of receipt of notice of acceptance of this bid in the form described in the Supplementary Conditions.
- Commence work within ten days after award of Contract and written Notice to Proceed.

If this bid is accepted within the time stated, and we fail to enter into an Agreement or we fail to provide the required Bonds, the Bid Security shall be forfeited as damages to the Town of Hebron by reason of our failure.

In the event our bid is not accepted within the time stated above, the required Bid Security shall be returned to the undersigned, in accordance with the provisions of the Instructions to Bidders; unless a mutually satisfactory arrangement is made for its retention and validity for an extended period of time.

We understand the Town of Hebron reserves the right to accept any Bid or reject any or all Bids and to waive any informality in the Bidding.

5. CONTRACT TIME

If this Bid is accepted, we will be required to complete the Work in accordance with the following schedule:

Final Punch List work shall be complete, all temporary facilities removed, and site restored no later than **August 21, 2026** or as designated by the Town of Hebron.

6. ADDENDA

The following Addenda have been received. The modifications to the Bid Documents noted below have been considered and all costs are included in the Bid Sum.

Addendum No. .... Dated .....

Addendum No. .... Dated .....

Addendum No. .... Dated .....

7. APPENDICES

In accordance with the Instructions to Bidders, we include the following required Appendices concurrent with Bid submission. The information provided shall be an integral part of our Bid.

Bid Bond - Section 005100

Statement of Bidder’s Qualifications – Section 006000

Completed CHRO- Notification to Bidders/Contract Compliance Monitoring Report.

8. The undersigned is familiar with the conditions surrounding this call for bids, is aware that the Town of Hebron reserves the right to reject any and all bids, and is submitting this bid without collusion with any other person, individual or corporation.

_____	_____	
Signature	Witness	
_____	_____	
Printed Name & Title of Signer	Date	
_____	_____	
Company Name	Phone	
_____	_____	
Address	Fax	
_____	_____	
Town/City	State	Zip

9. SUBCONTRACTORS

List all Subcontractors to be used on this project (or attach list to back of Bid Form)

- 1. \_\_\_\_\_ 3. \_\_\_\_\_
- 2. \_\_\_\_\_ 4. \_\_\_\_\_

**CHRO/AFFIRMATIVE ACTION PLAN**

**BIDDERS PROPOSED SET ASIDE SUBCONTRACTORS**

The Contractor who is selected to perform this State Project must comply with CONN. GEN. STAT. 4a-60, 4a-60a, 4a-60g, and 46a-68b through 46a-68f, inclusive, as amended by June 2015 Special Session Public Act 15-5.

State law requires a minimum of twenty-five (25%) percent of the state-funded portion of the contract for award to subcontractors holding current certification from the Connecticut Department of Administrative Services (DAS) under the provisions of CONN. GEN. STAT. 4a-60g. (25% of the total state-funded value with DAS- certified Small businesses and 6.25% of the total state-funded value with DAS Certified Minority, Women and/or Disabled owned businesses). The Contractor must demonstrate good faith effort to meet the 25% set-aside goals.

**LIST THE SUBCONTRACTORS THAT YOU PLAN TO RETAIN TO COMPLY WITH THIS REQUIREMENT**

<b>NAME</b>	<b>ADDRESS</b>	<b>SCOPE OF WORK</b>	<b>CONTRACT AMOUNT</b>	<b>DAS CERTIFICATION (SMALL BUSINESS, MINORITY, WOMEN, DISABLED)</b>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**END OF SECTION**

# Good Faith Efforts Plan Short Form

Effective 10/1/2025

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## COVER PAGE

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Facsimile No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

GFE Plan Prepared by: \_\_\_\_\_

Name and Title of Head of  
Company: \_\_\_\_\_

This Good Faith Efforts Plan is  
submitted for (Name of  
project): \_\_\_\_\_

State Contract/Project No.: \_\_\_\_\_

Awarding Authority: \_\_\_\_\_

Total Contract Value:

M/W/DisBE Value as Assigned  
by the Awarding Authority: \_\_\_\_\_ %      \$ \_\_\_\_\_

SBE Value as Assigned by the  
Awarding Authority: \_\_\_\_\_ %      \$ \_\_\_\_\_

## Table of Contents

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**Note:** A Good Faith Efforts Plan (GFEP) meeting all the requirements of the following sections must be filed for *each* state-funded project

**Note:** A submission that does not adhere to this formatting may be rejected before it is reviewed. Any section that does not include a response to said section and/or its subsections herein will not be in compliance.

Section Number and Title	Page Number
Section 1: Affirmative Action/Equal Employment Policy Statement .....	3
Section 2: Internal Communications .....	3
Section 3: External Communications .....	3
Documentation Requirements .....	3
Section 4: Project Description, Timeline, and Trades Involved .....	4
Section 5: Subcontractor Availability Analysis.....	6
Section 6: Minority Business Enterprise Goals and Timetables.....	9
Attachment III .....	10
Section 7: Close Out Documentation Notice .....	12
Section 8: Concluding Statement .....	13

## **Note For All Plans Filed and Reviewed After October 1, 2025:**

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The Good Faith Efforts Plan (GFEP) is an updated version reflective of recent Connecticut legislation that will be effective as of October 1, 2025. Any GFEP filed after that date will no longer require submissions for the following sections:

### **Section 1: Affirmative Action/Equal Employment Policy Statement**

### **Section 2: Internal Communications**

### **Section 3: External Communications**

Any plan filed prior to October 1<sup>st</sup> that is still under review by the CHRO at that time will not receive a disapproval on account of any deficiencies in these sections.

## **Documentation Requirements**

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The following documentation is required to accompany this plan submission for all plans. Additional documentation requests may be made during the course of the review process in order to determine whether good faith efforts were made to comply with the statutory requirements:

- **A copy of the bid document for the public works contract**  
Please attach a copy of the contract's bid document (project manual, ITB, etc.) that specifies all the trades-related work, non-trades related work, and all materials required for the work on this project. Only include the portions necessary to verify your company's responses. *Please do not provide the full document.*
- **DAS Supplier Diversity Certifications**  
Please provide a copy of the Dept. of Administrative Services (DAS) Supplier Diversity Certificate for any subcontractor hired by you to work on this project.
- **Bid Tabulations**  
For any subcontract awarded to a non-DAS certified contractor/vendor awarded a subcontract, please provide the bid tabulations for all bids received for that subcontract using the [form available on our website](#).

## Section 4: Project Description, Timeline, and Trades Involved

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This section of the GFEP must detail everything that will be needed to perform the work of this specific project. If the question is not relevant to the project, a response of “N/A” is acceptable.

1. In 1–3 sentences, briefly describe the project and the work involved.
2. Estimate (mm/dd/yyyy) when construction will commence. If the project has already begun, provide the actual project mobilization date (mm/dd/yyyy). Specify whether the date provided is actual or estimated.
3. Estimate (mm/dd/yyyy) when construction will be completed. If the project is complete, provide the project end date (mm/dd/yyyy). Specify whether the date provided is actual or estimated.
4. List all of the types of trades-related for which your company will be hiring a subcontractor(s). Do not provide the name of the subcontractor(s). Only identify the specific work, not the type of worker.
5. List all specific types of materials to be used for this project that your company will be purchasing. Do not provide the name of the vendor(s).
6. List all specific types of non-trades-related services to be used for this project that your company will hire a service company to provide. Do not provide the name of the company.  
**Ex:   Portable toilets**  
**Trucking, Driver Only – No labor involved**
7. List all trades-related services that will be self-performed by your company’s employees. Only identify the specific work, not the type of worker.

8. List all supplies that will be manufactured by your company for use on this project.

## Section 5: Subcontractor Availability Analysis

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**PART A:** Before filling out the rest of this section, please check the DAS Supplier Diversity Program Database to confirm that every Small Business Enterprise (SBE), Minority-Business Enterprise (MBE), Women-Owned Business Enterprise (WBE), and Disabled Person-Owned Business Enterprise (DisBE) has an active certificate.

[Follow this link to access the DAS Supplier Diversity Program Database.](#)

**PART B:** List every SBE/MBE/WBE/DisBE subcontractor and/or vendor that your company solicited to bid on ***this*** contract, as shown in the example below.

For each subcontractor, indicate the trades-related work for which it was solicited. For each vendor, indicate the non-trades-related work or the materials for which it was solicited.

For example:

Company Name	DAS-Certification Type	Type of Trade/Vendor
ABC Construction	SBE	Rough Carpentry
Carpenter's LLC	DisBE	Rough Carpentry
Hard Knocks Woodwork	MBE	Rough Carpentry
Rumor Mill	MBE	Mill Work
The Mill Worm	MBE	Mill Work
Piece Mill	WBE	Mill Work
XYZ Material Suppliers	WBE	Hardwood Supplier
Best Floor Co.	DisBE	Hardwood Supplier
Got 2 Go	SBE	Portable toilets
Number 1	MBE	Portable toilets
When Nature Call	SBE	Portable toilets

Company Name	DAS-Certification Type	Type of Trade/Vendor


**PART C:** Indicate the bid outcome for each company listed in Part B. Your company must be able to explain and document to the CHRO the reason(s) why your company did not award a subcontract to each of the companies solicited in Part B. An overly vague response, such as “Bid Received,” “Called/Left Message,” “Said Will Bid” etc., is insufficient. For those companies that you will utilize for this project, use “Awarded” as the bid result.

For example:

<b>Company Name</b>	<b>DAS Certification Type</b>	<b>Reason for Awarding/Not Awarding</b>
ABC Construction	Rough Carpentry	Bid Incomplete
Carpenter’s LLC	Rough Carpentry	Bid Too High
Hard Knocks Woodwork	Rough Carpentry	Bid Too High
Rumor Mill	Mill Work	Awarded
The Mill Worm	Mill Work	Bid Too High
XYZ Material Suppliers	Hardwood Supplier	Bid Too High
Best Floor Co.	Hardwood Supplier	Declined To Bid
Got 2 Go	Portable toilets	Declined To Bid
Number 1	Portable toilets	Bid Too High
When Nature Call	Portable toilets	Scheduling Conflict

<b>Company Name</b>	<b>DAS Certification Type</b>	<b>Reason for Awarding/Not Awarding</b>


**PART D:** List all non-S/M/W/DisBE companies (i.e., companies not already accounted for in Part B & Part C) that your company will use on this project. This list must inform CHRO of all trade-related work, materials, and/or non-trades-related services that the companies listed will provide. Any company performing a specialized trade or supplying specialized materials/services must be indicated and accompanied by a letter attesting to such from (i.e., signed) by the awarding agency. See the example below.

For example:

Company Name	Non-S/M/W/DisBE Companies
Color Coded Painting, LLC	Rough Carpentry
Pristine Port-a-lets	Portable toilets
Boltz, Inc.	High and Low Voltage Installation*

\*The electrical portion of this project is specialized and can only be performed by Boltz, Inc. Please see the attached letter verifying such, in detail, from the project manager at the awarding agency.

Company Name	Non-S/M/W/DisBE Companies

## Section 6: Minority Business Enterprise Goals and Timetables

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On Attachment III:

- Provide all the information requested in the Attachment III.
- List all the MBEs, WBEs, and DisBEs you designated in Section 11–Part C as “Awarded” in the top portion (“A”) of Attachment III.
- List all the SBEs you designated in Section 11–Part C as “Awarded” in the bottom portion (“B”) of Attachment III.
- Input all percentages requested in the Attachment III.

Once your company’s Plan is approved, your company may not add or delete any of the companies nor alter any of the contract values as listed on the Attachment III of your company’s approved Plan, except as follows. After your company’s Plan is approved, Attachment III may be altered only if your company submits the following items:

- I) A cover letter that
  - A) Requests acknowledgement of the change and
  - B) Details the reason(s) why the CHRO should grant the change.
- II) Documentation that verifies the reason(s) for removal or addition
  - A) For removal: confirmation that the business is closed, a change order from the owner that eliminates a subcontractor’s portion of the project, etc.
  - B) For addition: a copy of the company’s current DAS S/M/W/DisBE certification;
- II) A Revised Attachment III listing the date of the revision (in mm/dd/yyyy format) and incorporating the requested change.

**NOTE:** Upon a project’s completion, only those companies that are listed on the latest approved Attachment III, and who have maintained a current DAS Supplier Diversity certification throughout the duration of the project, will be utilized in the CHRO’s final calculations of actual goal achievement upon the project’s completion.

The CHRO encourages your company to not just meet its spending allocation goals, but to surpass them in order to ensure project circumstances (e.g., delays, change orders, decrease between estimate amount and contract amount) do not cause your company to fall below the spending allocation goals as projected in its approved Good Faith Efforts Plan.

A current copy of the DAS certificate must be attached to this section for each subcontractor/vendor listed on Attachment III. ***Without a current copy of each company’s valid DAS Supplier Diversity certification, the value of the contract will not be taken into account for the determination of whether your company has met its spending allocation goals.***

### Attachment III

A. Please identify MBE/WBE/DisBE subcontractors/vendors who will participate on the project.

Company Name	Address	DAS Certification Type (MBE/WBE/DisBE)	DAS Certification Expiration Date	Contract Value
			Total amount of MBE, WBE, & DisBE contract values: \$	(Total amount of MBE, WBE, & DisBE contract values ÷ project value x 100) %

B. Please identify SBE contractors/vendors who will participate on the project.

Company Name	Address	DAS Certification Type (SBE)	DAS Certification Expiration Date	Contract Value
			Total amount of SBE contract values: \$	Total amount of SBE contract values ÷ project value x 100= %
Total amount of all contract values listed in A & B =			\$	Total amount of all contract values listed in A & B ÷ project value x 100 = %

C. Please identify all non-DAS certified contractors/vendors who will participate on the project.

Company Name	Address	Contract Value

		Total amount of non-certified companies contract values ÷ project value x 100= %
Total amount of all contract values listed in A & B & C ÷ project value x 100 = %		

*Please use additional sheets if necessary*

## Section 7: Close Out Documentation Notice

---

Please note that this section no longer requires monthly compliance forms to be filed. This is a change from the previous plan format.

Contractors are required to provide the following documentation within forty-five (45) days from the date of substantial completion. Failure to submit this documentation may result in an enforcement action being brought.

Within 45 days of substantial completion, please provide:

- Notice of Substantial Completion from the project owner.
- A full and complete list of all subcontractors/vendors/service providers awarded for the project.
- Lein waivers for all of the awarded subcontractors/vendors/service providers awarded for the project.

If you have any questions, please contact the Contract Compliance unit for assistance.

**I understand my obligations to provide the above documentation within forty-five (45) days of my company's substantial completion date.**

## Section 8: Concluding Statement

---

I have read and pledge my full support to all sections of this Good Faith Efforts Plan, and that the commitments therein, are true and correct to the best of my knowledge. I pledge my “best good faith efforts” to achieve the objectives of the Plan within the established time frames.

Furthermore, this company will comply with any request by the Commission for records and documents. It understands that failure to do so may subject this company to enforcement action by the Commission.

Click or tap to enter a date.

---

Date

---

Head of Company’s Signature

---

Printed Name and Title

**Good Faith Efforts Plan**  
**Long Form**  
Effective 10/1/2025

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**COVER PAGE**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Facsimile No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

Web Site Address: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

GFE Plan Prepared by: \_\_\_\_\_

Name and Title of Head of  
Company: \_\_\_\_\_

This Good Faith Efforts Plan is  
submitted for (Name of  
project): \_\_\_\_\_

State Contract/Project No.: \_\_\_\_\_

Awarding Authority: \_\_\_\_\_

Total Contract Value: \_\_\_\_\_

M/W/DisBE Value as Assigned  
by the Awarding Authority: \_\_\_\_\_ %      \$ \_\_\_\_\_

SBE Value as Assigned by the  
Awarding Authority: \_\_\_\_\_ %      \$ \_\_\_\_\_

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**Note:** A submission that does not adhere to this formatting may be rejected before it is reviewed. Any section that does not include a response to said section and/or its subsections herein will not be in compliance.

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Section 2: Internal Communications .....	3
Section 3: External Communications .....	3
Section 4: Assignment of Responsibility .....	3
Section 5: Organizational Analysis .....	4
Section 6: Workforce Analysis .....	5
Section 7: Availability and Utilization Analysis .....	10
Section 8: Project Description, Timeline, and Trades Involved .....	20
Section 9: Employment Analysis .....	22
Section 10: Apprenticeship Training Program .....	25
Section 11: Subcontractor Availability Analysis .....	26
Section 12: Minority Business Enterprise Goals and Timetables .....	29
Attachment III .....	30
Section 13: Minority Business Enterprise Assistance and Innovative Programs .....	32
Section 14: Close Out Documentation Notice .....	33
Section 15: Concluding Statement .....	34

## **Note For All Plans Filed and Reviewed After October 1, 2025:**

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The Good Faith Efforts Plan (GFEP) is an updated version reflective of recent Connecticut legislation that will be effective as of October 1, 2025. Any GFEP filed after that date will no longer require submissions for the following sections:

### **Section 1: Affirmative Action/Equal Employment Policy Statement**

### **Section 2: Internal Communications**

### **Section 3: External Communications**

### **Section 4: Assignment of Responsibility**

Any plan filed prior to October 1<sup>st</sup> that is still under review by the CHRO at that time will not receive a disapproval on account of any deficiencies in these sections.

## **Documentation Requirements**

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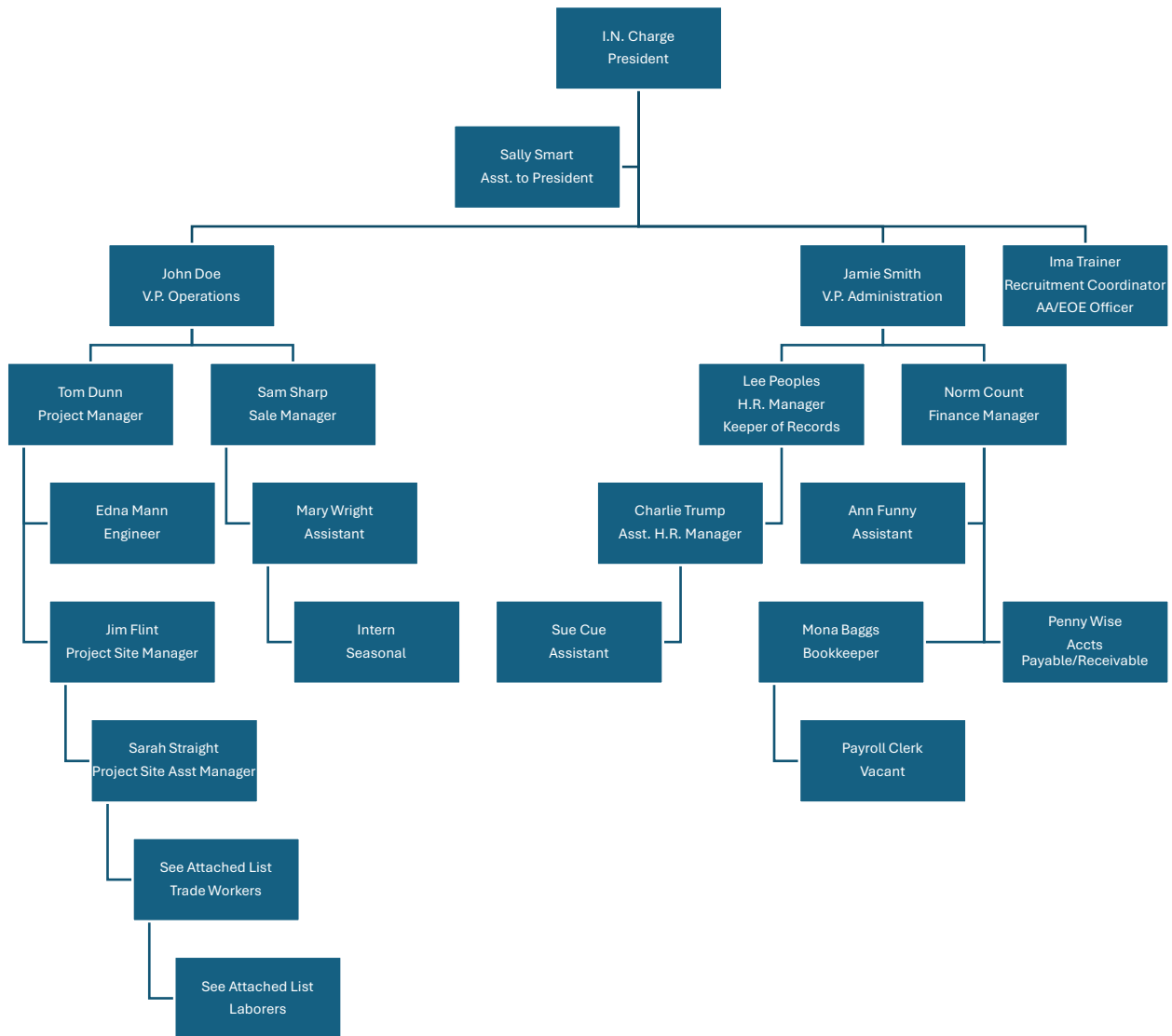
The following documentation is required to accompany this plan submission for all plans. Additional documentation requests may be made during the course of the review process in order to determine whether good faith efforts were made to comply with the statutory requirements:

- **A copy of the bid document for the public works contract**  
Please attach a copy of the contract's bid document (project manual, ITB, etc.) that specifies all the trades-related work, non-trades related work, and all materials required for the work on this project. Only include the portions necessary to verify your company's responses. *Please do not provide the full document.*
- **DAS Supplier Diversity Certifications**  
Please provide a copy of the Dept. of Administrative Services (DAS) Supplier Diversity Certificate for any subcontractor hired by you to work on this project.
- **Bid Tabulations**  
For any subcontract awarded to a non-DAS certified contractor/vendor awarded a subcontract, please provide the bid tabulations for all bids received for that subcontract using the [form available on our website](#).

## Section 5: Organizational Analysis

Please create an organizational chart for those employees on your day-to-day payroll. Each box should contain a job title and the name of each employee who holds that job title. Please do not attempt to fit more than four names into a box. Instead, attach a list of names for the people who hold the same job title.

Example:



## Section 6: Workforce Analysis

---

Please fill out the attached Workforce Analysis Form in its entirety. Use the job titles listed in Section 5's Organizational Analysis to complete the Job Title Column (first column).

To calculate the *% of Females*, divide the number of females in that job title by the total number of employees (add up both male and female) in that job title and multiply by 100.

To calculate *Subtotal Minority Males*, add up the number of males listed under Black, Hispanic, or Other Races for that job title.

To calculate *% of Minority Males*, divide the subtotal minority males in that job title by the total number of employees (add up both male and female) in that job title and multiply by 100.

NOTE: The job titles in this section must be identical to the job titles listed on the *Organizational Analysis*. Similarly, the number of names provided in the *Organizational Analysis* must be identical to total number of employees listed in this section.

## COMPANY EMPLOYMENT STATISTICS REPORT

### STATE OF CONNECTICUT COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

<b>COMPANY NAME</b>	<b>STREET ADDRESS</b>	<b>CITY, STATE, ZIP CODE</b>
<b>COMPANY OFFICIAL</b>	<b>TITLE</b>	<b>TELEPHONE NUMBER</b>
<b>PROJECT #:</b>	<b>PROJECT LOCATION</b>	<b>DATE</b>

**This report should show the number of employees on your payroll on date of submission.**

JOB TITLE	TOTAL # OF EMPLOYEES		% OF FEMALES	TOTAL # OF WHITE EMPLOYEES		TOTAL # OF BLACK EMPLOYEES		TOTAL # OF HISPANIC EMPLOYEES		# OF OTHER RACE EMPLOYEES		SUBTOTAL MINORITY MALES	% OF MINORITY MALES
	Male	Female		Male	Female	Male	Female	Male	Female	Male	Female		

**COMPANY EMPLOYMENT STATISTICS REPORT**

**COMPANY NAME** \_\_\_\_\_

**PROJECT #** \_\_\_\_\_

JOB TITLE	TOTAL # OF EMPLOYEES		% OF FEMALES	TOTAL # OF WHITE EMPLOYEES		TOTAL # OF BLACK EMPLOYEES		TOTAL # OF HISPANIC EMPLOYEES		# OF OTHER RACE EMPLOYEES		SUBTOTAL MINORITY MALES	% OF MINORITY MALES
	Male	Female		Male	Female	Male	Female	Male	Female	Male	Female		
<b>Total # of Employees:</b>			<b>XXXX</b>										<b>XXXXXX</b>

# SAMPLE

## COMPANY EMPLOYMENT STATISTICS REPORT

### STATE OF CONNECTICUT COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

COMPANY NAME  ACME CORP.	STREET ADDRESS  1263 Equal Opportunity Lane	CITY, STATE, ZIP CODE  Fair Dealing, CT 06000
COMPANY OFFICIAL  Ima Trainer	TITLE  AA/EOE Officer	TELEPHONE NUMBER  860-555-5555
PROJECT #:  BI-29990-BI	PROJECT LOCATION  University of Diversity Campus 1010 All Are Welcomed Drive New Haven, CT 06222	DATE  01/01/2009

**This report should show the number of employees on your payroll on date of submission.**

JOB TITLE	TOTAL # OF EMPLOYEES		% OF FEMALES	TOTAL # OF WHITE EMPLOYEES		TOTAL # OF BLACK EMPLOYEES		TOTAL # OF HISPANIC EMPLOYEES		# OF OTHER RACE EMPLOYEES		SUBTOTAL MINORITY MALES	% OF MINORITY MALES
	Male	Female		Male	Female	Male	Female	Male	Female	Male	Female		
President	1					1						1	100%
Asst. to Pres		1	100%		1								
V.P. Operat.	1			1									
Proj. Manager	1							1					100%
V.P. Admin		1	100%								1 (Chinese)		
AA/EOE Off.		1			1								
Finance Man.	1					1							100%
Sales Manager	1									1			100% (Pakistani)
H.R. Manager	1			1									
Assistant		3	100%				3						

**COMPANY EMPLOYMENT STATISTICS REPORT**

**COMPANY NAME** ACME CORP.

**PROJECT #** BI-29990-BI

JOB TITLE	TOTAL # OF EMPLOYEES		% OF FEMALES	TOTAL # OF WHITE EMPLOYEES		TOTAL # OF BLACK EMPLOYEES		TOTAL # OF HISPANIC EMPLOYEES		# OF OTHER RACE EMPLOYEES		SUBTOTAL MINORITY MALES	% OF MINORITY MALES
	Male	Female		Male	Female	Male	Female	Male	Female	Male	Female		
Asst. H.R. Manager	1			1									
Engineer		1	100%				1						
Proj. Site Manager	1							1				1	100%
Proj. Site Asst. Man.		1	100%								1 (Native Amer.)		
Bookkeeper		1	100%						1				
Accts Pay/Rec.		1	100%		1								
Trade Workers	27	10	27%	10	5	10	5	7				17	45%
Laborers	18	9	33%	3	2			9	4	6 (3 Asian)	3 (Indian)	15	55%
<b>Total # of Employees: 82</b>	<b>53</b>	<b>29</b>	<b>XXXXXXX</b>	<b>16</b>	<b>10</b>	<b>12</b>	<b>9</b>	<b>18</b>	<b>5</b>	<b>7</b>	<b>5</b>	<b>34</b>	<b>XXXXXXX</b>

## Section 7: Availability and Utilization Analysis

---

On this page of the CHRO's format, you will find three columns. In the first column labeled *Job Titles*, you must list the job titles, from Sections 5 and 6 (i.e., employees on your regular day-to-day payroll), you will have working at the project site.

In the second column (labeled *Number of Employee*), list the number of company employees (on the day-to-day payroll and accounted for in Section 5 and Section 6) who will be on the project site. Include the job titles of the employees.

In the third column (labeled *Job Category*), consult the *Description of Job Categories* below. For each of the job titles listed in the first column, determine the category in which that job title belongs.

The job categories (not job titles) listed in the third column and the number of employees listed on this page must correspond to the numbers listed on the next page's *Availability Worksheet*. This serves to convert job titles into job categories.

It is imperative that the CHRO sees this progression of job titles and number of employees from Section 5 carry over into Section 6 and Section 7.

### CONVERSION CHART

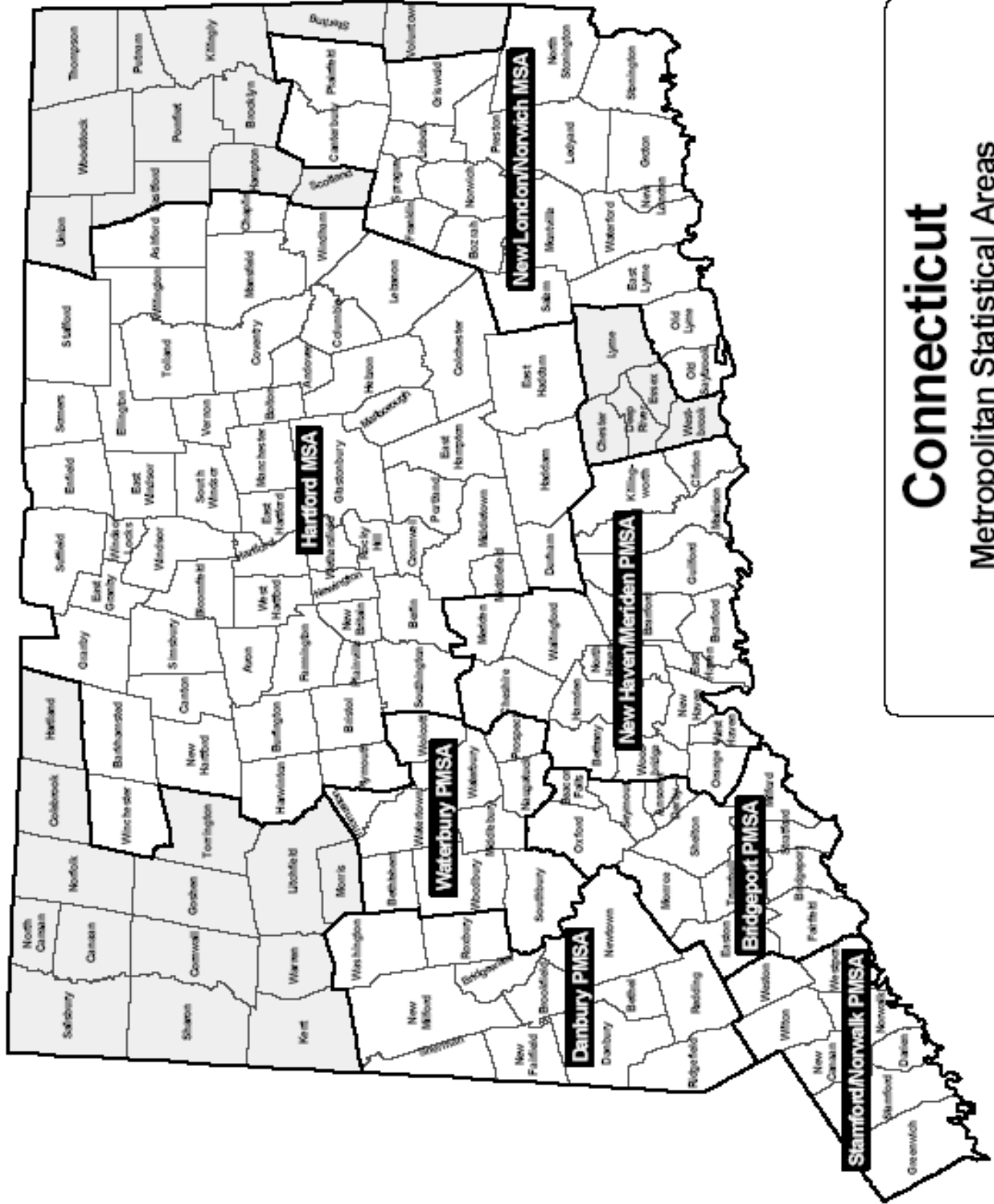
Job Title	Number of Employees	Job Category

**NOTE:** To complete Section 7, the Contractor should submit this page and the *Availability Worksheet*.

**SAMPLE**

**CONVERSION CHART**

<b>Job Title</b>	<b>Number of Employees</b>	<b>Job Category</b>
President	1	Management
Project Manager	1	Management
Project Site Manager	1	Construction & Extraction
Trade Workers	30	Construction & Extraction
Laborer	20	Construction & Extraction



**Connecticut**  
Metropolitan Statistical Areas

## DESCRIPTION OF JOB CATEGORIES

**MANAGEMENT:** Managers plan, organize, direct, and control the major functions of an organization through subordinates who are at the managerial or supervisory level. They make policy decisions and set objectives for the company or departments. They are not usually directly involved in production or providing services. Examples include top executives, public relations managers, managers of operations specialties (such as financial, human resources, or purchasing managers), and construction and engineering managers.

**BUSINESS AND FINANCIAL OPERATIONS:** These occupations include managers and professionals who work with the financial aspects of the business. These occupations include accountants and auditors, purchasing agents, cost estimators, management analysts, labor relations specialists, and budget, credit, and financial analysts.

**COMPUTER SPECIALISTS:** Professionals responsible for the computer operations within a company are grouped in this category. Examples of job titles in this category include computer programmers, software engineers, database administrators, computer scientists, systems analysts, and computer support specialists.

**ARCHITECTURE AND ENGINEERING:** Occupations related to architecture, surveying, engineering, and drafting are included in this category. Some of the job titles in this category include electrical and electronic engineers, surveyors, architects, drafters, mechanical engineers, materials engineers, mapping technicians, and civil engineers.

**BUILDING AND GROUNDS CLEANING AND MAINTENANCE:** This category includes occupations involving landscaping, housekeeping, and janitorial services. Job titles found in this category include supervisors of landscaping or housekeeping, janitors, maids, grounds maintenance workers, and pest control workers.

**OFFICE AND ADMINISTRATIVE SUPPORT:** All clerical-type work is included in this category. These jobs involve the preparing, transcribing, and preserving of written communications and records; collecting accounts; gathering and distributing information; operating office machines and electronic data processing equipment; and distributing mail. Job titles listed in this category include telephone operators, payroll clerks, bill and account collectors, customer service representatives, files clerks, dispatchers, shipping clerks, secretaries and administrative assistants, computer operators, mail clerks, and stock clerks.

**CONSTRUCTION AND EXTRACTION:** This category includes construction trades and related occupations. Job titles found in this category include boilermakers, masons (all types), carpenters, construction laborers, electricians, plumbers (and related trades), roofers, sheet metal workers, elevator installers, hazardous materials removal workers, paperhangers, and painters. Paving, surfacing, and tamping equipment operators; drywall and ceiling tile installers; and carpet, floor and tile installers and finishers are also included in this category. First line supervisors, foremen, and helpers in these trades are also grouped in this category.

**INSTALLATION, MAINTENANCE AND REPAIR:** Occupations involving the installation, maintenance, and repair of equipment are included in this group. Examples of job titles found here are heating, ac, and refrigeration mechanics and installers; telecommunication line installers and repairers; heavy vehicle and mobile equipment service technicians and mechanics; small engine mechanics; security and fire alarm systems installers; electric/electronic repair, industrial, utility and transportation equipment; millwrights; riggers; and manufactured building and mobile home installers. First line supervisors, foremen, and helpers for these jobs are also included in the category.

**MATERIAL MOVING WORKERS:** The job titles included in this group are crane and tower operators; dredge, excavating, and lading machine operators; hoist and winch operators; industrial truck and tractor operators; cleaners of vehicles and equipment; laborers and freight, stock, and material movers, hand; machine feeders and off bearers; packers and packagers, hand; pumping station operators; refuse and recyclable material collectors; and miscellaneous material moving workers.

**PART B:**

**To Complete Part B:** Contractors should provide the following information on the *Availability Worksheet* located in this plan.

1. In column 1, list each job category (not job title) from the Conversion Chart.
2. In column 2, determine how many employees within the job category will be at the project site.
3. In column 3, determine how many employees within the job category are minority males.
4. In column 4, determine the % of minority males. To do so, first divide the total minority males in that job category by the total number of employees (in column 2) within the job title. Then, multiply by 100.
5. In column 5, determine how many female employees within the job category will be at the project site.
6. In column 6, determine the % of females. To do so, divide the total minority females in that job category by the total number of employees (in column 2) within the job title. Then, multiply by 100.
7. In columns 7 and 8, insert the PMSA/MSA minority male and female percentages.

**NOTE:** Examples are included in this section for instructional purposes only. Your company's plan submission should not include these pages.

## AVAILABILITY WORKSHEET

STATE PROJECT NUMBER:

---

Circle the project location identified in Part A:

Bridgeport PMSA

New London/Norwich CT-RI MSA

Danbury PMSA

Stamford/Norwalk PMSA

New Haven/Meriden PMSA

Waterbury PMSA

Hartford MSA

Balance of State of Connecticut

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JOB CATEGORIE S	PROJECT STATISTICS (employees on site)					CT SITE STATISTICS (Insert PMSA/MSA)	
	Total # of Employee s	Total # of Minorit y Males	% of Minorit y Males	Total # of Female s	% of Female s	% of Minorit y Males*	% of Females *
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>

**NOTE:** By comparing the % from columns 4 & 6 with the % from columns 7 & 8 within each Job Category, your company can determine whether (a) the workforce is at parity; (b) there is underutilization (i.e., the company's % are lower than the area %); or (c) there is an overutilization (the company's % are higher than the area %).

If your company has fewer than 25 employees who are on the day-to-day payroll and who will work at the project site, your company need not discuss the differences.

Where there is a significant difference, your company's statement should also discuss action that the company may take to move toward greater parity within its workforce. The statement must bear the signatures of the head of the company. These signatures must be original and dated.

**CONNECTICUT OCCUPATIONAL STATISTICS  
PRIMARY METROPOLITAN STATISTICAL AREAS AND  
METROPOLITAN STATISTICAL AREAS**

OCCUPATION CATEGORIES	BRIDGEPORT PMSA		DANBURY PMSA		NEW HAVEN/MERIDEN PMSA		HARTFORD MSA	
	Minority Male Workers	Female Workers	Minority Male Workers	Female Workers	Minority Male Workers	Female Workers	Minority Male Workers	Female Workers
Management	6.5	36.7	4.5	30.4	6.9	35.5	5.4	36.9
Business & Financial Operations	6.4	51.2	3.3	44.7	4.9	52.6	4.8	54.8
Computer Specialist	14.6	30.3	14.2	25.8	13.7	29.5	9.3	33.0
Architecture & Engineering	11.6	9.3	7.4	11.1	11.4	12.4	10.1	11.6
Building & Grounds Cleaning & Maintenance	27.4	34.1	22.9	32.9	24.0	33.3	21.1	31.3
Office & Administrative Support	7.0	76.1	3.2	77.2	6.5	74.2	6.1	74.5
Construction & Extraction	22.7	1.4	18.1	2.6	17.9	3.1	13.7	2.1
Installation Maintenance & Repair	22.6	4.1	10.7	3.8	14.9	5.1	14.1	4.4
Material Moving Workers	31.8	24.2	24.1	18.2	35.7	23.7	25.8	20.2

**NOTE:** Balance of State Statistics are an average of the statistics from Litchfield, Middlesex, and Windham Counties, the three counties that encompass the major areas not included within MSA or PMSA.

**CONNECTICUT OCCUPATIONAL STATISTICS  
PRIMARY METROPOLITAN STATISTICAL AREAS AND  
METROPOLITAN STATISTICAL AREAS**

OCCUPATION CATEGORIES	NEW LONDON/NORWICH CT-RI MSA		STAMFORD/NORWALK PMSA		WATERBURY PMSA		BALANCE OF THE STATE	
	Minority Male Workers	Female Workers	Minority Male Workers	Female Workers	Minority Male Workers	Female Workers	Minority Male Workers	Female Workers
Management	3.8	37.3	7.4	33.7	3.6	35.2	3.1	37.9
Business & Financial Operations	2.6	54.0	6.5	42.5	2.8	44.4	2.0	55.3
Computer Specialist	5.9	28.4	19.9	31.4	14.8	24.5	7.0	30.2
Architecture & Engineering	5.9	11.7	13.8	15.8	9.1	8.4	3.6	14.0
Building & Grounds Cleaning & Maintenance	14.4	36.7	38.4	38.1	18.6	30.8	6.4	32.6
Office & Administrative Support	2.7	75.7	8.2	74.2	5.1	73.6	2.0	76.5
Construction & Extraction	7.4	3.1	33.2	2.1	12.4	1.6	4.3	1.8
Installation Maintenance & Repair	9.5	4.2	31.4	3.1	12.4	2.8	5.3	3.0
Material Moving Workers	14.0	20.5	38.6	29.5	25.9	26.2	8.3	23.1

**NOTE:** Balance of State Statistics are an average of the statistics from Litchfield, Middlesex, and Windham Counties, the three counties that encompass the major areas not included within MSA or PMSA.

**SAMPLE**

**AVAILABILITY WORKSHEET**

STATE PROJECT NUMBER BI-29990-BI

Circle the project location identified in Part A:

Bridgeport PMSA

New London/Norwich CT-RI MSA

Danbury PMSA

Stamford/Norwalk PMSA

**New Haven/Meriden PMSA**

Waterbury PMSA

Hartford MSA

Balance of State of Connecticut

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<b>JOB CATEGORIE S</b>	<b>PROJECT STATISTICS (employees on site)</b>					<b>CT SITE STATISTICS (Insert PMSA/MSA)</b>	
	Total # of Employee s	Total # of Minorit y Males	% of Minorit y Males	Total # of Female s	% of Female s	% of Minorit y Males*	% of Females *
Management	2	2	100%	0	0%	6.9%	35.5%
Construction & Extraction	51	24	47%	4	7.8%	17.9%	3.1%

## Section 8: Project Description, Timeline, and Trades Involved

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This section of the GFEP must detail everything that will be needed to perform the work of this specific project. If the question is not relevant to the project, a response of “N/A” is acceptable.

1. In 1–3 sentences, briefly describe the project and the work involved.
2. Estimate (mm/dd/yyyy) when construction will commence. If the project has already begun, provide the actual project mobilization date (mm/dd/yyyy). Specify whether the date provided is actual or estimated.
3. Estimate (mm/dd/yyyy) when construction will be completed. If the project is complete, provide the project end date (mm/dd/yyyy). Specify whether the date provided is actual or estimated.
4. List all of the types of trades-related for which your company will be hiring a subcontractor(s). Do not provide the name of the subcontractor(s). Only identify the specific work, not the type of worker.
5. List all specific types of materials to be used for this project that your company will be purchasing. Do not provide the name of the vendor(s).
6. List all specific types of non-trades-related services to be used for this project that your company will hire a service company to provide. Do not provide the name of the company.  
**Ex:   Portable toilets**  
**Trucking, Driver Only – No labor involved**
7. List all trades-related services that will be self-performed by your company’s employees. Only identify the specific work, not the type of worker.

8. List all supplies that will be manufactured by your company for use on this project.

## Section 9: Employment Analysis

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**PART A:** After a comprehensive review of your company's employment process, the Contractor should identify examples for each of the practices listed below for both union and nonunion personnel, as well as office and field staff.

**NOTE:** If any of the following company policies or practices, subtitled 1-8 in this section, are administered by the union(s) your company utilizes, then please provide a statement signed and dated by the head of your company and by your company's AA/EOE Officer declaring the company will not knowingly do business with any union(s) that discriminates in the administration of its employment practices and/or day-to-day operations. The signatures on the statement must be original and dated.

***For Questions 1 and 2 below, identify the job/position title with the most incumbent employees, and then provide the following information for this job/position title.***

1. **Job Qualifications** – Identify the job/position incumbent's required skills, experience, job/position-related certifications, and/or educational degrees. Also identify position specific requirements such as special license(s) (for example: a craft license, E2, OSHA 30, commercial driver's license), and/or physical requirements of the job/position (for example: the ability to lift 30 pounds and the ability to bend and reach), and any and all other requirements related to this job/position.
  
2. **Job Specifications** – Include a brief summary of the job/position. Identify this job/position's duties and responsibilities. Identify the position the incumbent reports to. If this job/position includes supervisory or managerial duties and responsibilities, identify the names of the job/position title(s) that report to this position.
  
3. **Recruitment Practices** –
  - a. How do you recruit new employees?
  - b. Explain in brief detail what resources your company utilizes to recruit new employees (not subcontractors/vendors). Where does your company

post its vacancies to ensure a diverse group of candidates applies for the vacancy posted?

- 1) Provide a complete list of comprehensive and diverse recruitment resources such as newspapers, unions, technical schools, organizations, professional recruiters and other types of recruitment resources your company utilizes or will utilize in the future to post its job vacancies. Each recruitment resource listed must include its name, address, contact person, contact number, and website.

NOTE: The Connecticut Department of Labor's [American Job Centers](#) and CTHires.com must be on this list.

4. **Personnel Policies** – Please attach copies of 3–4 of your company's personnel policies from your Employee Handbook. If your company does not have an Employee Handbook then please briefly, describe 3–4 of your personnel policies, specifically compensation (e.g., salaried or hourly wages); benefits (e.g., vacations or holidays); and work environment (e.g., hours of work).
5. **Job Structuring** – does the company have jobs that require the tasks be performed in a specific way? For example, a material handler must grasp material by the right hand and arm, balance it on the right shoulder, and use the left hand/arm to balance the material.
6. **Training and Apprenticeship Programs** –
  - a. Does your company offer on-the-job training or participate in apprenticeship and other training programs with unions, technical schools, or other work force training programs?

Attach additional sheets, if necessary.

7. **Subcontracting Practices** – Please briefly explain when and how your company solicits S/M/W/DisBEs to utilize for subcontracting/vending. Provide a complete list of comprehensive and diverse subcontracting/vending sources such as newspapers, unions, technical schools, organizations, professional recruiters and other media that help members of the protected classes find work as a subcontractor/vendor. Each

resource listed must include its name, address, contact person, contact number, and website if applicable.

NOTE: The Department of Administrative Services (DAS) Supplier Diversity Program must be included on your list.

8. **Layoff and Termination Policies** – Please attach a copy of your company’s layoff and termination policies from your Employee Handbook. If you do not have an Employee Handbook please briefly describe what criteria is used by your company to determine how and who is laid off and terminated? For example, does your company use the “last in, first out” approach to layoffs?

**PART B:** If any barrier(s) to protected classes are found in any of your company’s preceding employment practices and policies and/or day-to-day operations, then please indicate:

1. If any barriers were found within your company’s employment and business practices.
2. If so, how the barrier(s) will be eliminated, and

The estimated time needed to eliminate the barrier(s) and establish a new policy or practice.

## **Section 10: Apprenticeship Training Program**

FOR STATE CONTRACTS VALUED IN EXCESS OF \$10.0 MILLION AND A  
PROJECTED DURATION OF EIGHTEEN (18) MONTHS OR MORE

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A Contractor to be awarded a state contract valued in excess of \$10 million and with projected duration of eighteen (18) months or more must report:

1. Whether the Company has, or is a signatory to, a collective bargaining agreement that sponsors a state registered apprenticeship program; and,
2. What “good faith effort” the Company will make to include registered apprentices in its direct workforce and/or in the workforce of project subcontractors during the course of the project.

## Section 11: Subcontractor Availability Analysis

---

**PART A:** Before filling out the rest of this section, please check the DAS Supplier Diversity Program Database to confirm that every Small Business Enterprise (SBE), Minority-Business Enterprise (MBE), Women-Owned Business Enterprise (WBE), and Disabled Person-Owned Business Enterprise (DisBE) has an active certificate.

[Follow this link to access the DAS Supplier Diversity Program Database.](#)

**PART B:** List every SBE/MBE/WBE/DisBE subcontractor and/or vendor that your company solicited to bid on **this** contract, as shown in the example below.

For each subcontractor, indicate the trades-related work for which it was solicited. For each vendor, indicate the non-trades-related work or the materials for which it was solicited.

For example:

Company Name	DAS-Certification Type	Type of Trade/Vendor
ABC Construction	SBE	Rough Carpentry
Carpenter's LLC	DisBE	Rough Carpentry
Hard Knocks Woodwork	MBE	Rough Carpentry
Rumor Mill	MBE	Mill Work
The Mill Worm	MBE	Mill Work
Piece Mill	WBE	Mill Work
XYZ Material Suppliers	WBE	Hardwood Supplier
Best Floor Co.	DisBE	Hardwood Supplier
Got 2 Go	SBE	Portable toilets
Number 1	MBE	Portable toilets
When Nature Call	SBE	Portable toilets

**PART C:** Indicate the bid outcome for each company listed in Part B. Your company must be able to explain and document to the CHRO the reason(s) why your company did not award a subcontract to each of the companies solicited in Part B. An overly vague response, such as “Bid Received,” “Called/Left Message,” “Said Will Bid” etc., is insufficient. For those companies that you will utilize for this project, use “Awarded” as the bid result.

For example:

<b>Company Name</b>	<b>DAS Certification Type</b>	<b>Type of Trade/Vendor</b>
ABC Construction	Rough Carpentry	Bid Incomplete
Carpenter’s LLC	Rough Carpentry	Bid Too High
Hard Knocks Woodwork	Rough Carpentry	Bid Too High
Rumor Mill	Mill Work	Awarded
The Mill Worm	Mill Work	Bid Too High
XYZ Material Suppliers	Hardwood Supplier	Bid Too High
Best Floor Co.	Hardwood Supplier	Declined To Bid
Got 2 Go	Portable toilets	Declined To Bid
Number 1	Portable toilets	Bid Too High
When Nature Call	Portable toilets	Scheduling Conflict

<b>Company Name</b>	<b>DAS Certification Type</b>	<b>Type of Trade/Vendor</b>

**PART D:** List all non-S/M/W/DisBE companies (i.e., companies not already accounted for in Part B & Part C) that your company will use on this project. This list must inform CHRO of all trade-related work, materials, and/or non-trades-related services that the companies listed will provide. Any company performing a specialized trade or supplying specialized materials/services must be indicated and accompanied by a letter attesting to such from (i.e., signed) by the awarding agency. See the example below.

For example:

<b>Company Name</b>	<b>Non-S/M/W/DisBE Companies</b>
Color Coded Painting, LLC	Rough Carpentry
Pristine Port-a-lets	Portable toilets
Boltz, Inc.	High and Low Voltage Installation*

\*The electrical portion of this project is specialized and can only be performed by Boltz, Inc. Please see the attached letter verifying such, in detail, from the project manager at the awarding agency.

<b>Company Name</b>	<b>Non-S/M/W/DisBE Companies</b>

## Section 12: Minority Business Enterprise Goals and Timetables

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On Attachment III:

- Provide all the information requested in the Attachment III.
- List all the MBEs, WBEs, and DisBEs you designated in Section 11–Part C as “Awarded” in the top portion (“A”) of Attachment III.
- List all the SBEs you designated in Section 11–Part C as “Awarded” in the bottom portion (“B”) of Attachment III.
- Input all percentages requested in the Attachment III.

Once your company’s Plan is approved, your company may not add or delete any of the companies nor alter any of the contract values as listed on the Attachment III of your company’s approved Plan, except as follows. After your company’s Plan is approved, Attachment III may be altered only if your company submits the following items:

- I) A cover letter that
  - A) Requests acknowledgement of the change and
  - B) Details the reason(s) why the CHRO should grant the change.
- II) Documentation that verifies the reason(s) for removal or addition
  - A) For removal: confirmation that the business is closed, a change order from the owner that eliminates a subcontractor’s portion of the project, etc.
  - B) For addition: a copy of the company’s current DAS S/M/W/DisBE certification;
- II) A Revised Attachment III listing the date of the revision (in mm/dd/yyyy format) and incorporating the requested change.

**NOTE:** Upon a project’s completion, only those companies that are listed on the latest approved Attachment III, and who have maintained a current DAS Supplier Diversity certification throughout the duration of the project, will be utilized in the CHRO’s final calculations of actual goal achievement upon the project’s completion.

The CHRO encourages your company to not just meet its spending allocation goals, but to surpass them in order to ensure project circumstances (e.g., delays, change orders, decrease between estimate amount and contract amount) do not cause your company to fall below the spending allocation goals as projected in its approved Good Faith Efforts Plan.

A current copy of the DAS certificate must be attached to this section for each subcontractor/vendor listed on Attachment III. ***Without a current copy of each company’s valid DAS Supplier Diversity certification, the value of the contract will not be taken into account for the determination of whether your company has met its spending allocation goals.***

### Attachment III

A. Please identify MBE/WBE/DisBE subcontractors/vendors who will participate on the project.

Company Name	Address	DAS Certification Type (MBE/WBE/DisBE)	DAS Certification Expiration Date	Contract Value
			Total amount of MBE, WBE, & DisBE contract values: \$	(Total amount of MBE, WBE, & DisBE contract values ÷ project value x 100) %

B. Please identify SBE contractors/vendors who will participate on the project.

Company Name	Address	DAS Certification Type (SBE)	DAS Certification Expiration Date	Contract Value
			Total amount of SBE contract values: \$	Total amount of SBE contract values ÷ project value x 100= %
Total amount of all contract values listed in A & B =			\$	Total amount of all contract values listed in A & B ÷ project value x 100 = %

C. Please identify all non-DAS certified contractors/vendors who will participate on the project.

Company Name	Address	Contract Value

		Total amount of non-certified companies contract values ÷ project value x 100= %
Total amount of all contract values listed in A & B & C ÷ project value x 100 = %		

*Please use additional sheets if necessary*

## **Section 13: Minority Business Enterprise Assistance and Innovative Programs**

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Contractors should discuss any actions taken to help small and minority owned businesses. This can be a formal program or it can be an informal policy, such as helping MBE and WBE complete paperwork related to state contracts or certification from DAS. Other possibilities include co-signing for rental of equipment for the project or allowing small contractors to order supplies with your discount rate.

Response:

## Section 14: Close Out Documentation Notice

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Please note that this section no longer requires monthly compliance forms to be filed. This is a change from the previous plan format.

Contractors are required to provide the following documentation within forty-five (45) days from the date of substantial completion. Failure to submit this documentation may result in an enforcement action being brought.

Within 45 days of substantial completion, please provide:

- Notice of Substantial Completion from the project owner.
- A full and complete list of all subcontractors/vendors/service providers awarded for the project.
- Lein waivers for all of the awarded subcontractors/vendors/service providers awarded for the project.

If you have any questions, please contact the Contract Compliance unit for assistance.

**I understand my obligations to provide the above documentation within forty-five (45) days of my company's substantial completion date.**

## Section 15: Concluding Statement

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I have read and pledge my full support to all sections of this Good Faith Efforts Plan, and that the commitments therein, are true and correct to the best of my knowledge. I pledge my “best good faith efforts” to achieve the objectives of the Plan within the established time frames.

Furthermore, this company will comply with any request by the Commission for records and documents. It understands that failure to do so may subject this company to enforcement action by the Commission.

Click or tap to enter a date.

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Date

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Head of Company’s Signature

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Printed Name and Title



# State of Connecticut COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES

Contract Compliance Unit– 450 Columbus Boulevard, Suite 2, Hartford, CT 06103

*Promoting Equality and Justice for all People*

## IMPORTANT UPDATES TO STATE CONTRACT COMPLIANCE REQUIREMENTS

Effective October 1, 2025, Connecticut law has been updated to strengthen requirements for public works projects. Contractors and awarding agencies should review the changes below to ensure timely compliance.

### Key Statutory Changes

- For public works contracts entered into after October 1<sup>st</sup>, plans will only need to be submitted when the state-funding is \$150,000 or more.
- Good Faith Efforts (GFE) Plans replace Set-Aside Plans and Affirmative Action Plans.
- Spending Allocation Goals (SAGs) replace prior set-aside percentages.
  - Until further changes go into effect July 1, 2026, goals will remain 25% of the state-funded contract value for SBEs and 6.25% of the state-funded contract value for MBEs.
  - Awarding agencies must notify CHRO of project SAGs when bids are released.

#### **AT A GLANCE:**

- Threshold for public works contracts raised to \$150,000
- Reduced Plan Requirements
- Monthly Monitoring Forms Eliminated

#### *Plan Format:*

- Plans will no longer require policy statements or internal/external communications be submitted.
- The sections on monitoring forms have been revised.
- For the most recent version of the plan template, please go to our [website](#).

#### *Monthly Reports:*

- Effective October 1, 2025, Monthly Reports will no longer be required for all projects, including those started prior to the effective date.

#### *Compliance at Close-Out:*

- Within 45 days of substantial completion, contractors must submit: subcontractor payment documentation, lien waivers, and any outstanding subcontract notifications.

#### *Prompt Payment:*

- General contractors must pay subcontractors within 15 days of the due date, unless there is a bona fide dispute.

#### *Enforcement and Penalties:*

- Failure to file plans, meet deadlines, or make good faith efforts will be subject to enforcement that may lead to:
  - Withholding of contract payments
  - Disqualification from future bidding
  - Civil penalties and legal action by CHRO

### What's Next

- New forms and documentation requirements will be made available ahead of the July 1, 2026 implementation of project-specific goals.