

LOCAL SMALL BUSINESS UTILIZATION PLAN

The undersigned bidder/offeror has satisfied the requirements of the bid specification in the following manner (please check the appropriate space):

Name of bidder/offeror's firm: _____

By: _____
 (Print Name) (Signature) (Date)

_____ The bidder/offeror is committed to a minimum of _____% LSBOP utilization on this contract.
(Please complete the requested subcontractor/supplier information below.)

OR

_____ The bidder/offeror is unable to meet the LSBOP goal of _____%. Therefore, the bidder/offeror will complete in its entirety the document titled **GOOD FAITH EFFORTS** and submit supporting documentation demonstrating good faith efforts.

Subcontractor/Supplier Name	Address Phone Email	Principal Contact	LSBOP Certified	Utilization %

Use additional sheets as necessary.