

# Contractor Utilization Plan Approval Form

Prepared by: Roberto Everidge  
by:

**e-Builder users:** Approval Form must be completed and attached in PDF format where indicated. CUP/LOIs must be attached where indicated, or as supporting documents.

Date: 7/3/24

Contract/Project Number: 89061079	Project Name: Sidewalks FY24-25 - CWA Citywide # 2
Developer/Prime: Sarai Construction, Inc.	Contact Name: Jarnail Sarai
Address: 320 NE Dartmore Ct. LSMO 64064	Email: saraiconstructionc@gmail.com

**Full Contract Value: \$ 3,592,916.49**

Funding:  City  State  Federal  CO-OP  Grant:  Other:  
 Project Requirements:  M/WBE  DBE  Section 3  N/A  
 Tax Incentive:  LCRA  TIF  PIEA  N/A  Other:  
 Prevailing Wage:  Yes  No  
 Davis-Bacon:  Yes  No

Construction Employment Program:  Yes: Workforce goals are 10% Minority & 2% Women. There are over 800 Workforce hours and project cost is \$300,000 or more.  
 NO: Workforce hours are less than 800 and project cost is less than \$300,000.

Contract Goals:	Contractor Utilization Plan Achievement:
Self-Perform: ____%	Self-Perform: ____%
MBE: <u>15</u> %	MBE: <u>15</u> %
WBE: <u>15</u> %	WBE: <u>15</u> %
Non-certified firms: ____%	Non-certified firms: ____%

Contract Type (select one):  Construction  Design-Build  Design Professional  Professional Services  
 General Services  Facilities Maintenance/Repair/Renovation  Concessions  Co-operative  
 Revenue Sharing  Non-Municipal Agency  Other Goods & Services  Other \_\_\_\_\_

Project Manager: Mia Puthumana	Email: mia.puthumana@kcmo.org
Additional Information:	

**This document is submitted with all available facts. Intentionally falsifying this document or omitting pertinent facts is grounds for disciplinary action pursuant to KCMO Human Resources Rules & Policy Manual (eff. August 4, 2014).**

FOR CIVIL RIGHTS & EQUAL OPPORTUNITY DEPARTMENT (CREO) USE ONLY:			
<b>The Contractor Utilization Plan is:</b>			
<input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Disapproved	
<u>15</u> % MBE	<u>15</u> % WBE	____ % DBE	
<b>The Request for Good Faith Efforts Waiver is:</b>			
<input type="checkbox"/> Approved		<input type="checkbox"/> Disapproved	<input checked="" type="checkbox"/> Not Applicable
<b>Appeal Sent to FICB or Incentive Agency?</b> <input type="checkbox"/> Yes _____ FICB _____ Incentive Agency <input type="checkbox"/> No			

CREO Signature: *Alvaro Ontiveros* Date: 7/19/2024

**Comments:**  
 Approved at 15/15. AO

