

OSC Use Only:

Reporting Code:

Category Code:

Date Contract Approved:

FORM A

State Consultant Services - Contractor's Planned Employment
From Contract Start Date Through The End Of The Contract Term

State Agency Name: SUNY Binghamton Agency Code:
 Contractor Name: D2D Green Architecture PLLC Contract Number: B071119
 Contract Start Date: / / Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Principal/ Senior Architect	2	1260.5	\$ 206,159.00
Architectural Manager/ Job Captain	2	2233	\$ 200,970.00
Architect Drafter/Designer	2	2718	\$ 168,516.00
Total this page	6	6211.5	\$ 575,645.00
Grand Total	6	6211.5	\$ 575,645.00

Name of person who prepared this report: Baani P. Singh, AIA

Title: Principal

Phone #: 518-729-2967

Preparer's Signature:

Date Prepared: 4 / 26 /2024

(Use additional pages, if necessary)

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Firm	Fees	Reimb	Total Fees	%
D2D (MBE, WBE)	\$ 575,645.00	\$ 40,000.00	\$ 615,645.00	69%
Chiuten (WBE)	\$ 90,356.00	\$ 2,000.00	\$ 92,356.00	11%
Ran	\$ 118,888.62	\$ 7,500.00	\$ 126,388.62	14%
Trophy Point (SDVOB)	\$ 45,904.64	\$ -	\$ 45,904.64	6%
	\$ 830,794.26	\$ 49,500.00	\$ 880,294.26	100%

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State Agency Name: Binghamton University

Agency Code:

Contractor Name: Chiuten Trowbridge Landscape Architects, D.P.C. Contract Number: B071119

Contract Start Date: 4/18/2024

Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Landscape Architect	3	532	\$90,356.00
Total this page	3	532	\$90,356.00
Grand Total	3	532	\$90,356.00

Name of person who prepared this report: Margot D. Chiuten

Title: President/CEO

Phone #: 607-216-8483

Preparer's Signature: 

Date Prepared: 4/18/2024

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FORM A**State Consultant Services - Contractor's Planned Employment
From Contract Start Date Through The End Of The Contract Term**

State Agency Name: SUNY Binghamton

Agency Code:

Contractor Name: RAN Fire Protection Engineering, PC

Contract Number:

Contract Start Date: / /

Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
17-2111.02	3	644	\$93,332.60
17-3029.00	2	200	\$18,908.02
17-3019.00	2	96	\$6,648.00
Total this page	7	940	\$118,888.62
Grand Total	7	940	\$118,888.62

Name of person who prepared this report:

Title: President

Phone #: 518-275-0791

Preparer's Signature: *Douglas R. Maden*

Date Prepared: 04/19/2024

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FORM A**State Consultant Services - Contractor's Planned Employment
From Contract Start Date Through The End Of The Contract Term**

State Agency Name:

Agency Code:

Contractor Name: Trophy Point, LLC

Contract Number:

Contract Start Date: / /

Contract End Date: / /

Employment Category	Number of Employees	Number of hours to be worked	Amount Payable Under the Contract
Cost Estimating 13-1051.00	4	308	\$45,904.64
Total this page			
Grand Total	4	308	\$45,904.64

Name of person who prepared this report: Richard Chudzik

Title: President

Phone #: 716-823-0006

Preparer's Signature: *Richard Chudzik*

Date Prepared: 4 / 24 / 2024

(Use additional pages, if necessary)

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