INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration

Diversity Section

DATE: June 18, 2014

TO:

Manju Sharma, Director of Maintenance and Operations

FROM:

Thomas J. Savage, Diversity Administrator

SUBJECT:

CONTRACT 14-673-12, HEAVY EQUIPMENT REPAIRS AT VARIOUS

LOCATIONS - GROUP B (RE-BID)

Prime Contractor: Cranes & Equipment Specialists

The bidder, Cranes & Equipment Specialists, has submitted company information and "MBE/WBE/SBE Business Verification Forms" for the firms identified on the subject contract's Utilization Plan.

The Utilization goals for the above mentioned contract are 10% MBE and/or WBE and 10% SBE. According to the contractor's Utilization Plan, the bidder has committed the following:

MBE

WBE

SBE

NA

Therefore, the bidder, Cranes & Equipment Specialists, is in apparent compliance with the requirements of Affirmative Action Interim Ordinance Appendix D.

TJS:TCS:ARP

Attachment

cc: Darlene LoCascio, Director of Procurement and Materials Management / File (2)/ Shields-Wright

NA = Not Applicable

*Bidder offers themselves to satisfy WBE and SBE participation.

METROPOLITAN WATER RECLAMATION DISTRICT OF C

MBE, WBE, SBE UTILIZATION PLAN

For Local and Small business entities - Definitions for terms used below can be found in Appendix D: MBE - Section 5(s); WBE - Section 5(cc); SBE - Section 5(w).

NOTE: The Bidder shall submit with the Bid, originals or facsimile copies of all MBE, WBE, SBE Subcontractor's Letter of Intent furnished to all MBEs, WBEs, and SBEs. IF A BIDDER FAILS TO INCLUDE signed copies of the MBE, WBE, SBE Utilization Plan and all signed MBE, WBE, SBE Subcontractor's Letter of Intent with its bid, said bid will be deemed nonresponsive and rejected.

All Bidders must sign the signature page UP-5 of the Utilization Plan, even if a waiver is requested.

Name of Bidder:	Crares + Equipment Specialists of Chricago us
Contract No.:	14-673-12
Affirmative Action	on Contact & Phone No.: Christine Ashley 708636 6010
Total Bid: 57	22,179.00

MBE, WBE, SBE UTILIZATION PLAN AND ALL SIGNED MBE, WBE, SBE SUBCONTRACTOR'S LETTER OF INTENT MUST BE COMPLETED, SIGNED AND ACCOMPANY YOUR BID!!!

The bidder should indicate on the Utilization Plan explicitly if the dollar amounts for the MBE participation will also be counted toward the achievement of its SBE participation. See Interim Ordinance Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) -- (c) (v) MBE UTILIZATION Name of MBE and contact person: Business Phone Number: Address: Description of Work, Services or Supplies to be provided: ____ CONTRACT ITEM NO.: Dollar Amount Participation: If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: NO The MIRE WHE SHET information Plan and the MIRE WHE SHE Subcontractor's Language function MEST Accommons the Had **MBEUTILIZATION** Name of MBE and contact person: ___ Business Phone Number: Description of Work, Services or Supplies to be provided: ____ CONTRACT ITEM NO.: Dollar Amount Participation: __ If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: 11. MIRE WITE, SHELLED SHOULD IN PALIS MIRE WITE SHE SERVING A LONG A BOUND MEST. MBE UTILIZATION Name of MBE and contact person: Business Phone Number: Description of Work, Services or Supplies to be provided: ____ CONTRACT ITEM NO.: Dollar Amount Participation: If the MBB participation will be counted towards the

(Attach additional sheets as needed)

achievement of the SBE goal please indicate here:

achievement of its SBE participation. See Interim Ordinance A Contract Goals. (a) – (a) (v)	Appendix D, Section 11, C	ounting MBE, WBE and	iso be counted i SBB Participation	toward the na towards
	EUTILIZATION			A
Name of WBE and contact person: Crancs + Equi	ipment Specialis	ts of chicago	LC - Chri	Stine Ashley
Business Phone Number: 108-454-400		U		,
Address 10900 S. 85th arenue Palos	HIIS IL both	5		
Description of Work, Services or Supplies to be provided:	Some teams	i heately lagge	ction	
Parto, Construction Egyppment, Mula	lour pourton			
CONTRACT ITEM NO: 1,2,3,4,5,10				
Dollar Amount Participations 52, 217, 90				
If the WBB participation will be counted towards the achievement of the SBB goal please indicate here:		NO		90
Di Mili Will SPI fa Lincoln o care, Mili Mi	II SH Southern	the former to store	nt east, item	
<u> </u>	LUTILIZATION			
Name of WBE and contact person:				
Business Phone Number:				
Address:				
Description of Work, Services or Supplies to be provided:				
CONTRACT ITEM NO.:				
Dollar Amount Participation:	, · · · · · · · · · · · · · · · · · · ·			
If the WBE participation will be counted towards the achievement of the SBE goal piezes indicate here:	YES	□ NO	e organiza	
19, 500 (500 std from and Proposition 500)	1 914	ta delection .	10.10	
Wat	UTILIZATION			
Name of WBE and contact person:				
Business Phone Number:				
Address	, <u> </u>			
Description of Work, Services or Supplies to be provided:				
CONTRACT ITEM NO.:				
Dollar Amount Participation:				
If the WBB participation will be counted towards the achievement of the SBE goal please indicate here:	CI YES	ONO		

(Attach additional sheets as needed)

SHE UTILIZATION

Name of SBB and contact person: Chanes + Equipment Specialists of Change UC-Christice Ashle	
Business Phone Number: 108 - 636 - 6010	4
Business Phone Number: 708-636-6010 Address: 10900 S. 85th avenue Pulositials IL 60465	
Description of Work, Services or Supplies to be provided Contact Table of the Later of the Contact Table of the Co	
Parts, Construction Equipment, Mechanics, operation	
CONTRACT ITEM NO.: 14-673-12	
Dollar Amount Participation: 52, 217.90	
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SBE UTILIZATION	
Name of SBB and contact person:	
Business Phone Number:	
Address:	
Description of Work, Services or Supplies to be provided:	
CONTRACT ITEM NO.:	
Dollar Amount Participation:	
The MHC WHE SHE Cliff, from Programs 6. MHC MHC SHE Subscitization of Justice Interest Mest Accompany the Heat of	
SBR UTILIZATION	
Name of SBB and contact person:	
Susiness Phone Number:	
Description of Work, Services or Supplies to be provided:	
ONTRACT ITEM NO.:	
olfar Amount Participation:	
(Attach additional shoets as needed)	
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SIGNATURE SECTION

On Behalf of Ctines + Equipment Specialist	1 of Chicago UC I/We hereby acknowledge that
and SBEs listed above in the performance of this contra	evisions of Appendix D, and intend to use the MBEs, WBEs, act and/or have completed the Waiver Request Form. To the sand representations contained in this Exhibit are true, and no
	alties of perjury that the contents of the foregoing authorized, on behalf of the bidder, to make this
5-19-2014 Date	Signature of Authorized officer
ATTEST:	Christine Ashley Tweet hember
Cly A they Secretary	708 636 6010

- 1) The Bidder is required to sign and execute this page, EVEN IF A WAIVER IS BEING REQUESTED.
- 2) Failure to do so will result in a nonresponsive bid and rejection of the bid.
- 3) If a waiver is requested, the bidder must also complete the following "WAIVER REQUEST FORM."

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