INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT:

General Administration

DATE:

July 29, 2019

Diversity Section

TO:

John P. Murray, Director of Maintenance and Operations

FROM:

Regina D. Berry, Diversity Administrator

SUBJECT:

Contract 19-804-21, Furnish, Deliver and Install Four Sacrificial Deep Anode Ground Beds for the Cathodic Protection System at

the Calumet Tarp East and West Pumping Station

Bidder:

Industria, Inc.

The Bidder, Industria, Inc., has submitted company information and "MBE/WBE/SBE/VBE Business Verification Forms" for the firms identified on the subject contracts Affirmative Action Utilization Plan.

The MBE, WBE and SBE utilization goals, for the subject contract are 13% MBE, 7% WBE, 10% SBE and 3% VBE. The Affirmative Action goal category is "Electrical". According to the bidder's Utilization Plan, the bidder has committed to the following goals:

| MBE | WBE | SBE | VBE |
|-----|-------|------------|-----|
| * | 7.03% | * | ** |

Therefore, the Industria, Inc., is in apparent compliance with the requirements of Affirmative Action Ordinance Revised Appendix D.

RDB: JHB

Attachment

cc: LoCascio, Cornier, Morakalis, Bullock, Orawiec, File

- * Bidder offers themselves to satisfy the MBE and SBE requirements
- ** Bidder offers themselves to satisfy the VBE requirements

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

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: | Industria, Inc. | |
|--------------------|---|--------|
| Contract No.: | 19-804-21 | 83 |
| Affirmative Action | n Contact & Phone No.: <u>David Rambhajan, 773-697-0190</u> | |
| E-Mail Address: _ | david@rambhajan.com | |
| Total Bid: | 04,600.00 | |

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 Affirmative Action Ordinance, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

MBE UTILIZATION Name of MBE and contact person: Industria, Inc. / David Rambhajan 773-697-0190 Business Phone Number: Email Address: david@rambhajan.com Address: 2860 South River Road, Suite 100, Des Plaines, IL Description of Work. Services or Supplies to be provided: Management, Site Prep, Demolition, Restoration CONTRACT ITEM NO.: Lump Sum Contract Total Dollar Amount Participation: \$\ \mathbf{q2},000.00 If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid!!! MBE UTILIZATION Name of MBE and contact person: Email Address: Business Phone Number: ____ Description of Work, Services or Supplies to be provided: CONTRACT ITEM NO.: Total Dollar Amount Participation: If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: YES The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid!!! MBE UTILIZATION Name of MBE and contact person: Business Phone Number: _____ Email Address: _____ Description of Work, Services or Supplies to be provided: ____ CONTRACT ITEM NO.: Total Dollar Amount Participation: ___ If the MBE participation will be counted towards the achievement of the SBE goal please indicate here:

(Attach additional sheets as needed)

The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bidl II

NO

REVISED 7/29/19

The bidder should indicate on the Utilization Plan explicitly if the dollar amounts for the WBE participation will also be counted toward the achievement of its SBE participation. See Affirmative Action Ordinance, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

WBE UTILIZATION

| Name of WBE and contact person:Evergreen Supply C | o., Colleen Kramer | |
|--|----------------------|---|
| Business Phone Number: 773-375-4750 | _ Email Address: | wprice@evergreensupply.com |
| Address: 312 N May Street - Chicago, IL 60607 | | it it |
| Description of Work, Services or Supplies to be provided: | Electrical Supply | |
| CONTRACT ITEM NO.: Lump Sum Contract | | |
| Total Dollar Amount Participation: \$12,500.00 | | |
| If the WBE participation will be counted towards the achievement of the SBE goal please indicate here: | ☐ YES | NO NO |
| The MBE, WBE, SBE Utilization Plan and the MBE, WI | BE, SBE Subcontracto | or's Letter of Intent MUST Accompany the Bid!!! |
| WB | E UTILIZATION | • |
| Name of WBE and contact person: AMS Elite Solutions, | Inc Ron Manroe | |
| Business Phone Number: 847-838-9501 | Email Address: | estimating@ams-es.net |
| Address: 39555 N. Highway 83, Lake Villa, IL 6004 | | |
| Description of Work, Services or Supplies to be provided: | em 1 1751 | ose Soil, İmport backfill materials |
| | | |
| CONTRACT ITEM NO.: Lump Sum Contract | | |
| Total Dollar Amount Participation: \$15,000.00 | | |
| If the WBE participation will be counted towards the achievement of the SBE goal please indicate here: | U YES | □ NO |
| The MBE, WBE, SBE Utilization Plan and the MBE, WI | BE, SBE Subcontract | or's Letter of Intent MUST Accompany the Bidl I ! |
| WB | E UTILIZATION | |
| Name of WBE and contact person: Sheridan Plumbing & | Sewer, Inc Art A | Aimaro |
| Business Phone Number: 708-475-7100 | Email Address: | aaimaro@spands.com |
| Address: 6754 W 74th Stree, Bedford Park, IL 60638 | _ | |
| Description of Work, Services or Supplies to be provided: | Hydro Excavation | n and other Misc Excavation |
| CONTRACT ITEM NO.: Lump Sum Contract | | |
| Total Dollar Amount Participation: \$22,000.00 | | |
| If the WBE participation will be counted towards the achievement of the SBE goal please indicate here: | VES | □ NO |
| The MBE, WBE, SBE Utilization Plan and the MBE, WI | BE, SBE Subcontract | or's Letter of Intent MUST Accompany the Bid!!! |

(Attach additional sheets as needed)

SBE UTILIZATION

| Name of SBE and contact person: Industria, Inc Da | avid Rambhajan |
|--|--|
| Business Phone Number: 773-697-0190 | Email Address: david@ramhajan.com |
| Address: 2860 South River Road, Suite 100 Des Plai | |
| Description of Work. Services or Supplies to be provided | ded: Management, Site Prep, Demolition, Restoration |
| CONTRACT ITEM NO.: Lump Sum Contract | |
| Total Dollar Amount Participation: 4 92,000. | 90 |
| | |
| The MBE, WBE, SBE Utilization Plan and the MBE, | , WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid! |
| | SBE UTILIZATION |
| Name of SBE and contact person: | |
| Business Phone Number: | Email Address: |
| | |
| | ded: |
| | |
| Total Dollar Amount Participation: | |
| | |
| The MBE, WBE, SBE Utilization Plan and the MBE, | WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bidl 11 |
| | SBE UTILIZATION |
| Name of SBE and contact person: | |
| Business Phone Number: | Email Address: |
| Address: | |
| | ed: |
| CONTRACT ITEM NO.: | |
| otal Dollar Amount Participation: | |
| (Attacl | h additional sheets as needed) |

SIGNATURE SECTION

| On Behalf of | Industria, Inc. | |
|---------------------------------------|--|--|
| | (name of company) | |
| MBEs, WBEs, a Form. To the b | and SBEs listed above in the performan | the provisions of Revised Appendix D, and intend to use the ce of this contract and/or have completed the Waiver Request belief, the facts and representations contained in this Exhibit |
| I do solemnly document are affidavit. | y declare and affirm under pena e true and correct, and that I am | alties of perjury that the contents of the foregoing authorized, on behalf of the bidder, to make this |
| 07/08/19 | | 2 colfer |
| 1 | Date | Signature of Authorized officer |
| ATTEST: | | David Rambhajan, President |
| TIT I LOTT | | Print name and title |
| Ride | inters | • |
| Se | ecretary | 773-697-0190 |
| | | Phone number |

- 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."

The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bidl ! 1

VBE COMMITMENT FORM

| 1. | Name of VBE: Industria, Inc. |
|----|---|
| | Identify MBE WBE, SBE Status: VBE Address: 2860 South River Road, Suite 100 |
| | City, State, Zip Code: Des Plaines, IL 60018 |
| | Contact Person: David Rambhajan Telephone Number: 773-697-0190 |
| | eMail Address: david@rambhajann.com |
| | Dollar Amount of Participation: \$ 22,000.00 Percent of Participation: 3.12 % |
| | Scope of Work: Management, Site Prep, Demolition, Restoration |
| | |
| 2. | Name of VBE: |
| | Identify MBE, WBE, SBE Status: Address: |
| | City, State Zip Code: |
| | Contact Person: Telephone Number: |
| | eMail Address: |
| | Dollar Amount of Participation: \$ |
| | Scope of Work: |
| 3. | Name of VBE: |
| J. | Identify MBE, WBE, SBE Status: Address: |
| | City, State Zip Code: |
| | Contact Person: Telephone Number: |
| | eMail Address: |
| | Dollar Amount of Participation: \$ Percent of Participation:% |
| | Scope of Work: |
| 4. | Name of VBE: |
| | Identify MBE, WBE, SBE Status: Address: |
| | City, State, Zip Code: |
| | Contact Person: Telephone Number: |
| | eMail Address: |
| | Dollar Amount of Participation: S Percent of Participation:% |
| | Score of Work: |