INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT:

General Administration

DATE:

October 30, 2019

Diversity Section

TO:

Catherine A. O'Connor, Director of Engineering

FROM:

Regina D. Berry, Diversity Administrator

SUBJECT:

Contract 17-140-3P, Digester Rehabilitation and Gas Piping Replacement, Stickney Water Reclamation Plant, Stickney Illinois

Bidder:

IHC Construction Companies, LLC

The Bidder, IHC Construction Companies, LLC, 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 15% MBE, 7% WBE, 10% SBE and 3% VBE. The Affirmative Action goal category is "Mechanical". According to the bidder's Utilization Plan, the bidder has committed to the following goals:

MBE	$\underline{\mathbf{WBE}}$	SBE	$\overline{\text{VBE}}$
15%	7%	*	0.3%

Therefore, the IHC Construction Companies, LLC, is in apparent compliance with the requirements of Affirmative Action Ordinance Revised Appendix D.

RDB:JHB

Attachment

cc: Darlene A. LoCascio, Cornier, Bullock, File

^{*} Bidder offers MBE credits to satisfy SBE participation

^{**} Bidder provided partial waiver for VBE participation

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:	IHC CONSTI	BUCTION	COMPANIE	ES, LLC
Contract No.:	17-14	0-3P		A Bayes Sir
Affirmative Action	n Contact & Phone No.:	WALTER	P. DWYER	847-742-1516
E-Mail Address: _	W Dwyer@]	HCConstru	ction. com	
Total Bid:	13,725,000.	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 Ordinanace, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

Business Phone Number: (708) 825-9770 Email Address: lauren@cgconstructionsupply.com Address: 1593 Valencia Ct, Calumet City, IL 60409 Descrption of Work, Services or supplied to be provided: Furnish Equipment CONTRACT ITEM NO.: Division 11 Dollar Amount Participation: \$150,000.00 If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: YES NO The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid III MBE UTIZATION Name of WBE and contact person: Business Phone Number: Email Address: Descrption of Work, Services or supplied 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: YES NO The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid III MBE UTIZATION Name of WBE and contact person: Business Phone Number: Email Address: MBE UTIZATION Services or supplied to be provided: Email Address: Description of Work, Services or supplied to be provided: Email Address: Description of Work, Services or supplied to be provided:	Name of MBE and contact person:	C & G Construction	Supply Co. Inc.	<u>DIN</u>	Lauren Green
Address: 1593 Valencia Ct, Calumet City, IL 60409 Description of Work, Services or supplied to be provided: Furnish Equipment CONTRACT ITEM NO: Division 11 Dollar Amount Participation: \$150,000,00 If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: YES NO The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid III MBE UTIZATION Name of WBE and contact person: Business Phone Number: Email Address: Description of Work, Services or supplied 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: WBE and contact person: Business Phone Number: YES NO The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid III MBE UTIZATION Name of WBE and contact person: Business Phone Number: Email Address: Address: Description of Work, Services or supplied 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: If the MBE participation will be counted towards the achievement of the SBE goal please indicate here: Dollar Amount Participation: If the MBE participation will be counted towards the achievement of the SBE goal please indicate here:	Business Phone Number:			lauren@cgconstructi	
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The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the 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 Ordinanace, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

	5010000	MBE UTLIZATION			
Name of WBE and contact person:	Dekayo Corporatio	n dba Ortiz Contra		Darrell Ortiz	
Business Phone Number:	(708) 595-8250	Email Address:	dortiz@orti	z-contracting.com	
Address: 9308 Gulfstream, Fra					
Descrption of Work, Services or suppl	ied to be provided:	Furnish and Insta	Il Mechanical	¥.	
CONTRACT ITEM NO : Division 15					
	004,714.00				
If the MBE participation will be counted					
achievement of the SBE goal please in	dicate here:				
			YES	NO	
The MBE, WBE, SBE U	tilization Plan and the N	IBE, WBE, SBE Subcon	tractor's Letter	of Intent MUST Accompany the Bid !!!	4000
N (Mpr		MBE UTLIZATIO	<u>N</u>		
Name of WBE and contact person:					
Business Phone Number:		Email Address:			
Address:					
Descrption of Work, Services or supplied	ed to be provided:				
CONTRACT ITEM NO.:			***		
Dollar Amount Participation:					
If the MBE participation will be counte	d towards the				
achievement of the SBE goal please inc					
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THE MIDE, WILE, 3DE O	inization Flan and the IVI	be, whe, she subcon	tractor's Letter o	of Intent MUST Accompany the Bid !!!	
		MBE UTLIZATIO	N		
Name of WBE and contact person:		MOE OTELEXITO	<u></u>		
Business Phone Number:		Email Address:			
Address:					
Descrption of Work, Services or supplie	ed to be provided:				
CONTRACT ITEM NO.:					
Dollar Amount Participation:				3	
If the MBE participation will be counted	towards the				
achievement of the SBE goal please ind	icate here:				
			YES	NO	
The MBE, WBE, SBE Ut	ilization Plan and the MI	BE. WBE. SBE Subcont		f Intent MUST Accompany the Bid !!!	AL 15

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

	I 01	A-4-1 In-		adas Isras
Name of WBE and contact person:	Jameson Sheet N	retal, Inc.		ndra Joyce
Business Phone Number:	815-577-5277	Email Address:	sjoyce@jamesonsm.com	
Address: 23824 Industrial Driv	e N., Plainfield, IL 60	585		
Descrption of Work, Services or supp	lied to be provided:	Furnish and Insta	all HVAC	
CONTRACT ITEM NO.: Division 15				
Dollar Amount Participation: \$17	2,265.00			
If the WBE participation will be count	ed towards the			
achievement of the SBE goal please in	ndicate here:		V	
			YES NO	
The MBE, WBE, SBE U	Jtilization Plan and the N	ABE, WBE, SBE Subco	ntractor's Letter of Intent MUST A	company the Bid !!!
	111			
		WBE UTLIZATI	ON	
Name of WBE and contact person:				
Business Phone Number:		Email Address:		
Address:				
Descrption of Work, Services or supp	lied to be provided:			
		2		
CONTRACT ITEM NO.:				
Dollar Amount Participation:				
If the WBE participation will be count	ed towards the			
achievement of the SBE goal please in	ndicate here:			
			YES NO	
The MBE, WBE, SBE l	Jtilization Plan and the N	MBE, WBE, SBE Subco	ntractor's Letter of Intent MUST A	ccompany the Bid !!!
		WBE UTLIZATI	ON	
Name of WBE and contact person:				
Business Phone Number:		Email Address:		
Address:				A CONTRACTOR OF THE CONTRACTOR
Descrption of Work, Services or suppl	lied to be provided:	2		
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CONTRACT ITEM NO.:				
Dollar Amount Participation:	and towards the			
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achievement of the SBE goal please in	naicate nere:		VEC NO	
	Market Street	and the same of th	YES NO	41 - 51 - 111
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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 Ordinanace, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

		WBE UTLIZATI	ION		
Name of WBE and contact person:	Atlantic Painting C	o., Inc.		Rozina Karnavas	
Business Phone Number:	708-636-2040	Email Address:	akavouris@atlar	ticpainting.com	
Address: 10019 Southwest Hig	hway, Oak Lawn, IL	60453			
Descrption of Work, Services or suppli	ied to be provided:	Furnish and Insta	all Protective Coatings		
CONTRACT ITEM NO.: Division 09					
Dollar Amount Participation: \$796	6,000.00				
If the WBE participation will be counted	ed towards the				
achievement of the SBE goal please in	dicate here:			~	
			YES	NO	
The MBE, WBE, SBE U	tilization Plan and the N	ЛВЕ, WBE, SBE Subco	ntractor's Letter of In	tent MUST Accompany the Bid !!!	45.84
said (see 1256)		WBE UTLIZATI	ON		
Name of WBE and contact person:				The state of the s	
Business Phone Number:	***************************************	Email Address:			
Address:					
Descrption of Work, Services or suppli	ed to be provided:				
CONTRACT ITEM NO.:					
Dollar Amount Participation:			· · · · · · · · · · · · · · · · · · ·		
If the WBE participation will be counted	d towards the				
achievement of the SBE goal please inc	dicate here:				
			YES	NO	
The MBE, WBE, SBE U	tilization Plan and the N	ABE, WBE, SBE Subco	ntractor's Letter of In	tent MUST Accompany the Bid !!!	
		WBE UTLIZATION	<u>ON</u>		
Name of WBE and contact person:				MAIN description (M. 1900)	
Business Phone Number:		Email Address:			
Address:		· ·		· · · · · · · · · · · · · · · · · · ·	
Descrption of Work, Services or supplied	ed to be provided:	**************************************	*		
CONTRACT ITEM NO.:					
Dollar Amount Participation:					
If the WBE participation will be counte				*	
achievement of the SBE goal please inc	dicate here:				
Control and allowed to the second	Walles and the same of the sam		YES	NO	
The MBE, WBE, SBE Ut	tilization Plan and the N	IBE, WBE, SBE Subco	ntractor's Letter of In	tent MUST Accompany the Bid !!!	-

SBE UTILIZATION

Name of SBE and contact person:	SAME AS MPSE- DEKATO DEL ORTIZ
Business Phone Number:	Email Address:
Address:	
Description of Work, Services or Sup	plies to be provided:
,	
CONTRACT ITEM NO.:	
Total Dollar Amount Participation:	
46	
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:	
	Email Address:
Address:	
Description of Work, Services or Sup	plies to be provided:
	4
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:
Address:	
	plies to be provided:
Total Dollar Amount Participation:	
	(Attach additional sheets as needed)

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

SIGNATURE SECTION

On Behalf of THC CONSTRUCTION COMPANIES, L (name of company)	I/We hereby acknowledge that
I/WE have read Revised Appendix D, will comply with the provisions MBEs, WBEs, and SBEs listed above in the performance of this contr. Form. To the best of my knowledge, information and belief, the fact are true, and no material facts have been omitted.	act and/or have completed the Waiver Request
I do solemnly declare and affirm under penalties of perj document are true and correct, and that I am authorized, affidavit.	
10/15/2019 Date	Signature of Authorited officer
ATTEST:	DAVID J. ROCK, PRESIDENT Print name and title
Secretary WALTER P. DWYER	847-742-1516

1) The Bidder is required to sign and execute this page, EVEN IF A WAIVER IS BEING REQUESTED.

Phone number

- 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 Bid!!!

VBE COMMITMENT FORM

1.	Name of VBE: E.R. Bakey, Inc.
	Identify MBE, WBE, SBE Status: MBE Address: 180 South Western Avenue #158
	City, State, Zip Code: Carpentersville, IL 60110
	Contact Person: Eric Bakey Telephone Number: 847-464-5700
	eMail Address: ericbakey@erbakey.com
	Dollar Amount of Participation: \$ 42,000 Percent of Participation:
	Scope of Work: Furnish Trucking Services
2.	Name of VBE:
	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:
3.	Name of VBE:
	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: \$ Percent of Participation:%
	Scope of Work: