

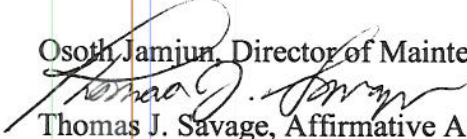
**INTEROFFICE MEMORANDUM**

**METROPOLITAN WATER RECLAMATION DISTRICT  
OF GREATER CHICAGO**

**DEPARTMENT:** General Administration  
Affirmative Action Section

**DATE:** March 24, 2010

**TO:** Osoth Jamjun, Director of Maintenance and Operations

**FROM:**  Thomas J. Savage, Affirmative Action Program Administrator

**SUBJECT:** 10-694-11, Truck Hauling of Direct Haul Centrifuge Cake from  
the Stickney Water Reclamation Plant to Various Locations

Bidder: Big O Movers and Storage, Inc.

The bidder, Big O Movers and Storage, Inc., has submitted company information and "Protected Class Business Verification Forms" for the firms identified on the subject contract's Affirmative Action Revised Utilization Plan.

The PCE Utilization goals for the subject contract are 20% MBE, 13% WBE and 10% SBE. According to the contract's Revised Utilization Plan, the bidder has committed the following:

<u>MBE</u>	<u>WBE</u>	<u>SBE</u>
*	13%	*

Therefore, the bidder, Big O Movers and Storage, Inc., is in apparent compliance with the requirements of Appendix D.

TJS:TCS:GG  
Attachment

cc: Ms. Darlene A. LoCascio, Director of Procurement and Materials Management

\* Bidder offer themselves to satisfy MBE participation.

\* Bidder offers MBE and WBE credits to satisfy SBE participation.

**EXHIBIT A**  
**METROPOLITAN WATER RECLAMATION DISTRICT OF**  
**GREATER CHICAGO**

**UTILIZATION PLAN**

For "Protected Class Enterprises" (PCEs) - Definitions for terms used below can be found in Appendix D: MBE - Section 5(c); WBE - Section 5(d); SBE - Section 5(e).

**NOTE: The Bidder shall submit with the Bid, originals or facsimile copies of all Exhibit B PCE Subcontractor's Letter of Intent furnished to all PCEs. IF A BIDDER FAILS TO INCLUDE signed copies of the Utilization Plan and all signed Exhibit B PCE Subcontractor's Letter of Intent with its bid, said bid will be deemed nonresponsive and rejected.**

**All Bidders must sign the signature page D-25 of the Utilization Plan, even if a waiver is requested.**

Name of Bidder: Big "O" Movers And Storage, Inc.

Contract No.: 10-694-11

Affirmative Action Contact & Phone No.: Odiss S. Beams | 773-487-9900

Total Bid: \$799,300.00

**EXHIBITS A AND B MUST BE COMPLETED, SIGNED AND ACCOMPANY YOUR BID!!!**

Revised March 9, 2009

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 Revised Appendix D, Section 6, Goals, e. (v)

MBE UTILIZATION

Name of MBE and contact person: Big "O" Movers And Storage Inc / Odiss S. Beams

Business Phone Number: 773-487-9900

Address: 9400 South Cottage Grove Ave Chicago IL 60619

Description of Work, Services or Supplies to be provided: Trash Hauling of Direct Haul Centrifuge Cake from SWBP to various locations

CONTRACT ITEM NO.: 10-694-11

Dollar Amount Participation: \$ 695,391.00

If the MBE participation will be counted towards the achievement of the SBE goal please indicate here:

YES

NO

Exhibits A and B MUST Accompany the Bid!!

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:

YES

NO

Exhibits A and B MUST Accompany the Bid!!

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:

YES

NO

Exhibits A and B MUST Accompany the Bid!!

(Attach additional sheets as needed)

Revised March 9, 2009

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 Revised Appendix D, Section 6, Goals e (v)

**WBE UTILIZATION**

Name of WBE and contact person: Big "O" Express LLC / Angela Anderson

Business Phone Number: 773-261-2006 / 773-858-6033

Address: 5951 West Madison Street Chicago IL 60644

Description of Work, Services or Supplies to be provided: Truck Hauling of Direct Haul Centrifuge Cake from SWRP to Various Locations

CONTRACT ITEM NO.: 10-694-11

Dollar Amount Participation: \$103,909.00

If the WBE participation will be counted towards the achievement of the SBE goal please indicate here:

YES

NO

**Exhibits A and B MUST Accompany the Bid!!**

**WBE UTILIZATION**

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 please indicate here:

YES

NO

**Exhibits A and B MUST Accompany the Bid!!**

**WBE UTILIZATION**

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 please indicate here:

YES

NO

**Exhibits A and B MUST Accompany the Bid!!**

(Attach additional sheets as needed)

Revised March 9, 2009

**SBE UTILIZATION**

Name of SBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_  
\_\_\_\_\_  
CONTRACT ITEM NO.: \_\_\_\_\_  
Dollar Amount Participation: \_\_\_\_\_

Exhibits A and B MUST Accompany the Bid!!!

**SBE UTILIZATION**

Name of SBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_  
\_\_\_\_\_  
CONTRACT ITEM NO.: \_\_\_\_\_  
Dollar Amount Participation: \_\_\_\_\_

Exhibits A and B MUST Accompany the Bid!!!

**SBE UTILIZATION**

Name of SBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_  
\_\_\_\_\_  
CONTRACT ITEM NO.: \_\_\_\_\_  
Dollar Amount Participation: \_\_\_\_\_

(Attach additional sheets as needed)

Exhibits A and B MUST Accompany the Bid!!!


SIGNATURE SECTION

On Behalf of Big "O" Movers And Storage, Inc. I/We hereby acknowledge that  
(name of company)

I/WE have read Appendix D, will comply with the provisions of Appendix D, and intend to use the MBEs, WBEs, and SBEs listed above in the performance of this contract and/or have completed the Waiver Request Form. To the best of my knowledge, information and belief, the facts and representations contained in this Exhibit are true, and no material facts have been omitted.

I do solemnly declare and affirm under penalties of perjury that the contents of the foregoing document are true and correct, and that I am authorized, on behalf of the bidder, to make this affidavit.

02-02-10  
Date

  
Signature of Authorized officer

ATTEST:

Odis S. Reams / President  
Print name and title

  
Secretary Emma E. Reams

773-487-9900  
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."**

Exhibits A and B MUST Accompany the Bid! ! !