

Inter Office Memorandum
METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration/
Affirmative Action **Date:** May 11, 2010

TO: Ms. Manju Sharma, Acting Director of Maintenance & Operations
Thomas J. Savage

FROM: Thomas J. Savage, Affirmative Action Program Administrator

SUBJECT: **Contract 10-673-11, Repair of Heavy Equipment at the Stickney Water Reclamation Plant and LASMA areas**

LOW BIDDER: Christofano Equipment Co., Inc.

The low bidder, Christofano Equipment Co., 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 goals for the above contract are "Tailored" 10% MBE 5% WBE and 10% SBE. According to the contract's Revised Utilization Plan, the low bidder has committed to the following goals:

<u>MBE</u>	<u>WBE</u>	<u>SBE</u>
10%	5%	10%

Therefore, the low bidder, Christofano Equipment Co., Inc., is in apparent compliance with the requirements of Appendix D.

TJS:LG:RLM
attachments

Cc: Darlene A. LoCascio, Director of Procurement & Materials Management

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: CHRISTOFANO EQUIPMENT CO. INC.

Contract No.: 10-673-11

Affirmative Action Contact & Phone No.: RICHARD E. STARK, JR. 708-774-0009

Total Bid: \$ 520 090.⁰⁰

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: _____

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

MBE UTILIZATION

Name of MBE and contact person: QUIMEX INC - ORLANDO ALVAREZ

Business Phone Number: 708-597-6201

Address: 14702 S. HAMLIN MIDDLETOWN IL 60445

Description of Work, Services or Supplies to be provided: SUPPLIER OF CHEMICALS LUBRICANTS AND FUEL

CONTRACT ITEM NO.: _____

Dollar Amount Participation: \$ 1560.27

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

YES

NO

MBE UTILIZATION

Name of MBE and contact person: CESAR'S EQUIPMENT CO - CESAR REGALADO

Business Phone Number: 708-430-1919

Address: 8770 S. 78th AVE BRIDGEVIEW IL 60455

Description of Work, Services or Supplies to be provided: HYDRAULIC EQUIPMENT REPAIR - EQUIPMENT PARTS AND SUPPLIES

CONTRACT ITEM NO.: 4

Dollar Amount Participation: \$ 50,448.73

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

YES

NO

(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: UNICORP OIL CORPORATION - HELEN CRAWLEY

Business Phone Number: 773-768-0026

Address: P.O. Box 495916

Description of Work, Services or Supplies to be provided: SUPPLIER OF LUBRICANTS

CONTRACT ITEM NO.: 4

Dollar Amount Participation: \$1300.23

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

YES

NO

WBE UTILIZATION

Name of WBE and contact person: AIKO AUTOMOTIVE - THERESA MUDJER

Business Phone Number: 773-242-2064

Address: 6113 W. ROOSEVELT RD. CICERO, IL 60804

Description of Work, Services or Supplies to be provided: AUTO PARTS, INDUSTRIAL

COMMERCIAL, MUNICIPAL EQUIPMENT SUPPLIES

CONTRACT ITEM NO.: 4

Dollar Amount Participation: 24,704.28

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

YES

NO

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

(Attach additional sheets as needed)

Revised March 9, 2009

SBE UTILIZATION

Name of SBE and contact person: RICHARD E. STARK JR. / CHRISTOFANO EQUIPMENT CO.
 Business Phone Number: 708-774-0009
 Address: 9643 S. HARLEM, CHICAGO RIDGE IL 60415
 Description of Work, Services or Supplies to be provided: REPAIR, SERVICE AND
SUPPLY FULL LINE OF CONSTRUCTION EQUIPMENT
 CONTRACT ITEM NO.: 1, 2, 3, 4, 5, 6
 Dollar Amount Participation: 52,009.⁰⁰



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: _____



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)



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SIGNATURE SECTION

On Behalf of CHRISTOFANO Equipment Co 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.

4/28/2010
Date

Martin J. Christofano
Signature of Authorized officer

ATTEST:

MARTIN J. CHRISTOFANO / PRESIDENT
Print name and title

Martin J. Christofano
Secretary

708-425-6466
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."