

INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration
Diversity Section

DATE: September 2, 2025

TO: Joseph Kratzer, Managing Civil Engineer

FROM: Richard L. Martinez, Jr., Diversity Administrator *Richard L. Martinez, Jr.*

SUBJECT: Contract 14-065-5F, Flood Control Project on Central Road from the Des Plaines River to Glenwood Lane

Per your request, the Diversity Section has determined that the following firms are acceptable for MBE/WBE/VBE participation:

Classification Type	Business Name	Officer
MBE	2iM Group, LLC	Luis Montgomery
MBE	GSG Consultants, Inc.	Ala Sassila
WBE	Kabbes Engineering, Inc.	Karen Kabbes
WBE	Terra Engineering, Ltd.	Karen Steingraber
VBE	Orion Engineers, LLC	Shawon Carlstrom

The Minority, Women and Veteran Business Enterprise goals for the above contract are 20% MBE, 10% WBE and 3% VBE. According to the MBE/WBE and VBE Commitment Forms, Bowman Consulting Group commits to the following goals:

<u>MBE</u>	<u>WBE</u>	<u>VBE</u>
33.8%	10.0%	3.1%

The Consultant, Bowman Consulting Group, has met the requirements of Appendix A and Appendix V.

If you have any additional questions, please contact Ms. PJ Spencer, Senior Diversity Officer, at spencerpj@mwr.org.

RLM/PCS

Attachment

c: LoCascio, Morakalis, Sauter, Gelder, Cornier, Kunath, Lopez, Valdez

MBE/WBE COMMITMENT FORM

1. **Name of MBE/WBE:** 2iM Group, LLC
Identify MBE, WBE Status: MBE **Address:** 300 S. Wacker Drive, Suite 2880
City, State, Zip Code: Chicago, IL 60606
Contact Person: Luis Montgomery **Telephone Number:** 312-508-5156
eMail Address: luis.m@2imgroup.com
Dollar Amount of Participation: \$ 205,000 **Percent of Participation:** 9.3 %
Scope of Consulting Contract: Detention Pond Design
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2. **Name of MBE/WBE:** GSG Consultants, Inc.
Identify MBE, WBE Status: MBE **Address:** 735 Remington Road
City, State Zip Code: Schaumburg, IL 60173
Contact Person: Ala Sassila **Telephone Number:** 630-994-2610
eMail Address: asassila@gsg-consultants.com
Dollar Amount of Participation: \$ 539,845 **Percent of Participation:** 24.5 %
Scope of Consulting Contract: Special Waste Services, Geotechnical Investigations
-
3. **Name of MBE/WBE:** Kabbes Engineering, Inc.
Identify MBE, WBE Status: WBE **Address:** 1250 S. Grove Avenue
City, State Zip Code: Barrington, IL 60010
Contact Person: Karen Kabbes **Telephone Number:** 847-842-9663
eMail Address: kckabbes@kabbesengineering.com
Dollar Amount of Participation: \$ 153,200 **Percent of Participation:** 7.0 %
Scope of Consulting Contract: Hydraulic Modeling and Permitting
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4. **Name of MBE/WBE:** Terra Engineering, Ltd.
Identify MBE, WBE Status: WBE **Address:** 225 W. Ohio Street, Suite 400
City, State, Zip Code: Chicago, IL 60654
Contact Person: Karen Steingraber **Telephone Number:** 312-467-0123
eMail Address: ksteingraber@terraengineering.com
Dollar Amount of Participation: \$ 65,069 **Percent of Participation:** 3.0 %
Scope of Consulting Contract: Maintenance of Traffic, Survey

Attach a copy of qualifications for each MBE and WBE business.
Please duplicate this blank page when additional certified MBE and WBE subcontractors are being used on this contract.

VBE COMMITMENT FORM

1. **Name of VBE:** Orion Engineers, LLC
Identify MBE, WBE Status: VBE **Address:** 312 N. May Street, Suite 100
City, State, Zip Code: Chicago, IL 60607
Contact Person: Shawon Carlstrom **Telephone Number:** 630-310-9918
eMail Address: scarlstrom@orionengineersllc.com
***Dollar Amount of Participation:** \$ 67,570 **Percent of Participation:** 3.1 %
Scope of Work: SESC, Striping and Signage

2. **Name of VBE:** _____
Identify MBE, WBE 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 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 Status: _____ **Address:** _____
City, State, Zip Code: _____
Contact Person: _____ **Telephone Number:** _____
eMail Address: _____
***Dollar Amount of Participation:** \$ _____ **Percent of Participation:** _____ %
Scope of Work: _____

* If a MBE or WBE will be utilized to accomplish the VBE Contract Goal, then the VBE commitment amount must be entered as a separate dollar amount. VBE Contract Goals are separate and distinct from the MBE and WBE Contract Goals.

Attach a copy of qualifications for each VBE business.