

**INTEROFFICE MEMORANDUM**

**METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO**

**DEPARTMENT:** General Administration **DATE:** June 27, 2024  
Diversity Section

**TO:** John P. Murray, Director of Maintenance and Operations

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

**SUBJECT:** Contract 24-665-11 – Landscape Maintenance at Various Service Areas (Group B) (Revised)

**LOW BIDDER:** Lizzette Medina & Co.

The lowest responsive bidder, Lizzette Medina & Co. has submitted company information and “MBE/WBE/VBE Business Verification Forms for the firms identified on the subject contract’s Affirmative Action Utilization Plan.

The MBE, WBE and VBE Utilization Goals for the above-mentioned contract are 20% MBE, 9% WBE and 3% VBE. According to the bidder’s Utilization Plan, the bidder has committed to the following goals:

| <u>MBE</u> | <u>WBE</u> | <u>VBE</u> |
|------------|------------|------------|
| 20%        | 9%         | 3%         |

Therefore, Lizzette Medina & Co. is in apparent compliance with the requirements of Affirmative Action Ordinance Revised Appendix D and Appendix V.

RLM:DH  
Attachment

c: Darlene A. LoCascio, S. Morakalis, N. Lopez, M. Valdez, E. Staudacher, L. Cornier, D. Hardney, File (2)

**METROPOLITAN WATER RECLAMATION DISTRICT OF  
GREATER CHICAGO**

**MBE/WBE UTILIZATION PLAN**

For Local and Small business entities - Definitions for terms used below can be found in Appendix D: MBE - Section 5(u); WBE - Section 5(ff); SBE - Section 5(z).

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

**All Bidders must sign the signature page UP-4 of the Utilization Plan, even if a waiver is requested.**

Name of Bidder: LIZZETTE MEDINA & CO.

Contract No.: 24-665-11

Affirmative Action Contact & Phone No.: LIZZETTE MEDINA 773 696 2330

E-Mail Address: LM@LIZZETTEMEDINA.COM

Total Bid: \$ 437,830.00

**MBE/WBE UTILIZATION PLAN AND ALL SIGNED MBE/WBE  
SUBCONTRACTOR'S LETTER OF INTENT MUST BE  
COMPLETED, SIGNED AND ACCOMPANY YOUR BID!!!**

# Contract 24-665-11, Group B

## MBE UTILIZATION

Name of MBE and contact person: Alvarez, Inc  
Business Phone Number: 847-551-1105 Email Address: cindy@alvarezcorp.com  
Address: 15N497 Old Sutton Rd. Barrington, IL 60653  
Description of Work, Services or Supplies to be provided: Landscape Services

CONTRACT ITEM NO.: B1, B2, B3  
Total Dollar Amount Participation: \$87,560.00

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

## MBE UTILIZATION

Name of MBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_

CONTRACT ITEM NO.: \_\_\_\_\_  
Total Dollar Amount Participation: \_\_\_\_\_

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

## MBE UTILIZATION

Name of MBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_

CONTRACT ITEM NO.: \_\_\_\_\_  
Total Dollar Amount Participation: \_\_\_\_\_

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

(Attach additional sheets as needed)

Contract 24-665-11, Group B

**WBE UTILIZATION**

Name of WBE and contact person: LIZZETTE MEDINA & CO.  
Business Phone Number: 773 696 2330 Email Address: LM@LIZZETTEMEDINA.COM  
Address: 4331 W. 116<sup>th</sup> ST. CHICAGO, IL 60623  
Description of Work, Services or Supplies to be provided: LANDSCAPING SERVICES

CONTRACT ITEM NO.: B1, B2, B3  
Total Dollar Amount Participation: \$ 39,404.70

For MBE/WBE Utilization Plans on the MBE/WBE Solicitation Contract, see the MBE/WBE Solicitation Plan.

**WBE UTILIZATION**

Name of WBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_

CONTRACT ITEM NO.: \_\_\_\_\_  
Total Dollar Amount Participation: \_\_\_\_\_

For MBE/WBE Utilization Plans on the MBE/WBE Solicitation Contract, see the MBE/WBE Solicitation Plan.

**WBE UTILIZATION**

Name of WBE and contact person: \_\_\_\_\_  
Business Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
Description of Work, Services or Supplies to be provided: \_\_\_\_\_

CONTRACT ITEM NO.: \_\_\_\_\_  
Total Dollar Amount Participation: \_\_\_\_\_

For MBE/WBE Utilization Plans on the MBE/WBE Solicitation Contract, see the MBE/WBE Solicitation Plan.

(Attach additional sheets as needed)

Contract 24-665-11, Group B

**SIGNATURE SECTION**

On Behalf of LIZZETTE MEDINA & CO. I/We hereby acknowledge that  
(name of company)

I/WE have read Revised Appendix D, will comply with the provisions of Revised Appendix D, and intend to use the MBEs and WBEs 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.

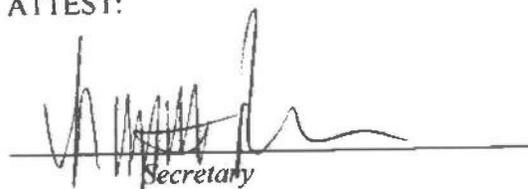
I do solemnly declare and affirm under penalties of perjury that the contents of the foregoing document are true and correct, and that I am authorized, on behalf of the bidder, to make this affidavit.

6-20-24  
Date

  
Signature of Authorized officer

ATTEST:

LIZZETTE RAMOS PRESIDENT  
Print name and title

  
Secretary

773-696-2330  
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 Utilization Plan and the MBE/WBE Subcontractor Letter of Intent MUST Accompany the Bid.

Contract 24-665-11, Group B  
**WAIVER REQUEST FORM**

**If a waiver is requested, the Bidder is required to sign and execute this page.**

Contract No.: \_\_\_\_\_

Name of Bidder: \_\_\_\_\_

Contact Person and Phone Number: \_\_\_\_\_

With respect to the contract specified above, the Bidder hereby requests a total or partial waiver of the requirement that, pursuant to Section 15 (a)-(d) of the Affirmative Action Ordinance, Revised Appendix D, it files a MBE/WBE Utilization Plan or achieve a particular goal for MBE/WBE participation in the contract. The reasons for the request are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On Behalf of \_\_\_\_\_ I/We hereby acknowledge that  
(name of company)

I/WE have read Affirmative Action Ordinance, Revised Appendix D, will comply with the provisions of Affirmative Action Ordinance, Revised Appendix D, and intend to use the MBEs and WBEs listed in the MBE/WBE Utilization Plan in the performance of this contract and have completed the Waiver Request Form. To the best of my knowledge, information and belief, the facts and representations contained in this Waiver Request Form 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 contractor, to make this affidavit.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Authorized officer

ATTEST:

\_\_\_\_\_  
Print name and title

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
Phone number

**NOTE TO BIDDERS**

All Waiver requests are evaluated carefully by the District. **The evaluation is based on your firm's documented GOOD FAITH EFFORTS.**

**The GOOD FAITH EFFORTS MUST be Undertaken PRIOR to your bid submittal to the District.**

Good Faith Efforts are identified on pp. D21-D22, Section 15. Utilization Plan Submission (e), (i)(1)-(8).



**VBE COMMITMENT FORM**

1. Name of VBE: ALVAREZ, INC.  
Identify MBE, WBE Status: \_\_\_\_\_ Address: 15N497 OLD SUTTON RD  
City, State, Zip Code: BARRINGTON, IL 60010  
Contact Person: CINDY ALVAREZ Telephone Number: 847-551-1105  
eMail Address: CINDY@ALVAREZCORP.COM  
\*Dollar Amount of Participation: \$ 13,134.90 Percent of Participation: 3 %  
Scope of Work: LANDSCAPE SERVICES

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.