

INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration
Diversity Section

DATE: July 3, 2025

TO: Dr. Catherine O'Connor, Director of Engineering

FROM: Richard L. Martinez, Jr., Diversity Administrator *RLM/PCS*

SUBJECT: Mechanical, Electrical and Plumbing Consulting Support Services in Connection with Contract Number 24-892-3P

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

Classification Type	Business Name	Contact
MBE	CCJM Engineers Ltd.	Kumar Malhotra
WBE	SINGH & Associates, Inc.	Harvind Singh
MBE/VBE	Innleadair, LLC	Peter Stephenson

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, T.Y. Lin International Great Lakes, Inc. commits to the following goals:

MBE

20%

WBE

10%

VBE

3%

The Consultant, T.Y. Lin International Great Lakes, Inc., has met the requirements of the Appendix A and Appendix V.

If you have any additional questions, please contact Fred Fortier, Diversity Officer, at fortierf@mwr.org.

RLM/PCS
Attachment

c: Darlene A. LoCascio, Morakalis, P. O'Brien, Busza, Cornier, Kunath, Lopez, Valdez, File (2)

MBE/WBE COMMITMENT FORM

1. Name of MBE/WBE: CCJM Engineers, Ltd.
Identify MBE, WBE Status: MBE Address: 303 E. Wacker Drive, Suite 303
City, State, Zip Code: Chicago, IL 60601
Contact Person: Paul Ghassan Telephone Number: (312) 626-2995
eMail Address: PGhassan@ccjm.com
Dollar Amount of Participation: \$ 520,000 Percent of Participation: 13 %
Scope of Consulting Contract: Mechanical Engineering and Electrical Engineering
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2. Name of MBE/WBE: SINGH & Associates, Inc.
Identify MBE, WBE Status: WBE Address: 230 West Monroe Street, Suite 1400
City, State Zip Code: Chicago, IL 60606
Contact Person: Colleen Miller Telephone Number: (708)-522-2686
eMail Address: cmiller@singhinc.com
Dollar Amount of Participation: \$ 400,000 Percent of Participation: 10 %
Scope of Consulting Contract: Mechanical Engineering and Electrical Engineering
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3. Name of MBE/WBE: Innleadair, LLC
Identify MBE, WBE Status: MBE Address: 3501 Algonquin Road, Suite 850
City, State Zip Code: Rolling Meadows, IL 60008
Contact Person: Peter Stephenson Telephone Number: (847) 534-8454
eMail Address: peter.stephenson@innleadair.com
Dollar Amount of Participation: \$ 280,000 Percent of Participation: 7 %
Scope of Consulting Contract: Mechanical Engineering and Electrical Engineering
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4. Name of MBE/WBE: _____
Identify MBE, WBE Status: _____ Address: _____
City, State, Zip Code: _____
Contact Person: _____ Telephone Number: _____
eMail Address: _____
Dollar Amount of Participation: \$ _____ Percent of Participation: _____ %
Scope of Consulting Contract: _____

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: Innleadair, LLC
Identify MBE, WBE Status: VBE Address: 3501 Algonquin Road, Suite 850
City, State, Zip Code: Rolling Meadows, IL 60008
Contact Person: Peter Stephenson Telephone Number: (847) 534-8454
eMail Address: peter.stephenson@innleadair.com
*Dollar Amount of Participation: \$ 120,000 Percent of Participation: 3 %
Scope of Work: Mechanical Engineering and Electrical Engineering

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.