

REVISED DECEMBER, 2022

**METROPOLITAN WATER RECLAMATION DISTRICT OF
GREATER CHICAGO**

MBE/WBE UTILIZATION PLAN

Group E

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: Era-Valdivia Contractors, Inc.

Contract No.: 23-684-21

Affirmative Action Contact & Phone No.: Jose Valdivia 773-721-935

E-Mail Address: josevaldivia@eravaldivia.com

Total Bid: \$499,000.00

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

Group E

MBE UTILIZATION

Name of MBE and contact person: Era-Valdivia Contractors, Inc. Jose G. Valdivia
Business Phone Number: 773-721-9350 Email Address: josevaldivia@eravaldivia.com
Address: 11909 South Avenue O, Chicago, IL 60617
Description of Work, Services or Supplies to be provided: Cleaning/Collection/Containment Existing Water Tower as per
requirements of Group E - O'Brien WRP - 23-684-21

CONTRACT ITEM NO.: Group E
Total Dollar Amount Participation: \$ 149,700.00

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)

Group E

UP-2

WBE UTILIZATION

Name of WBE and contact person: RAE Products and Chemicals Corporation - Donna Gruenberg
Business Phone Number: 708-396-1984 Email Address: donna@reaproducts.net
Address: 11638 South Mayfield Avenue, Alsip, IL 60803
Description of Work, Services or Supplies to be provided: All materials/Coatings/Tarpaulons/Abrasives/Cables
Access Platforms

CONTRACT ITEM NO.: Group E
Total Dollar Amount Participation: \$83,167.00

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

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: _____

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

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: _____

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

(Attach additional sheets as needed)

Group E

UP-3

SIGNATURE SECTION

On Behalf of Era-Valdivia Contractors, Inc. 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.

6-27-2023

Date _____

J. McCallister
Signature of Authorized officer

ATTEST: Saul Valdivia, Corp. Secretary

Jose G. Valdivia - President
Print name and title

Sach Kundin
Secretary

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's Letter of Intent MUST Accompany the Bid!!!

VBE COMMITMENT FORM

1. Name of VBE: Terrazas LLC
Identify MBE, WBE, SBE Status: MBE Address: 20280 Governors Hwy, Suite 204
City, State, Zip Code: Olympia Fields, IL 60461
Contact Person: Roberto Terrazas Telephone Number: 708-515-9074
eMail Address: r-terrazas@terrazasconstruction.com
Dollar Amount of Participation: \$ 14,970.00 Percent of Participation: 3.0 %
Scope of Work: Power-Wash/Waste Pick up-Disposal /Set Containment
-
2. Name of VBE: _____
Identify MBE, WBE, SBE 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, SBE 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, SBE Status: _____ Address: _____
City, State, Zip Code: _____
Contact Person: _____ Telephone Number: _____
eMail Address: _____
Dollar Amount of Participation: \$ _____ Percent of Participation: _____ %
Scope of Work: _____

Attach a copy of qualifications for each VBE firm