

**INTEROFFICE MEMORANDUM**

**METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO**

**DEPARTMENT:** General Administration  
Diversity Section

**DATE:** December 1, 2025

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

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

**SUBJECT:** Contract 22-093-2M, HVAC Improvements to UV Building and Switchgear Building, O'Brien Water Reclamation Plant

**LOW BIDDER:** IHC Construction Companies, L.L.C.

The lowest responsive bidder, IHC Construction Companies, L.L.C. has submitted company information and "MBE/WBE/VBE Business Verification Forms" for the firms identified on the subject contract's Affirmative Action Utilization Plan and VBE Commitment Form.

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

<u><b>MBE</b></u>	<u><b>WBE</b></u>	<u><b>VBE</b></u>
21.60%*	.81%*	1.21%**

Therefore, IHC Construction Companies, L.L.C. is in apparent compliance with the requirements of Affirmative Action Ordinance Revised Appendix D and Appendix V.

RLM:DAF

Attachment

c: LoCascio, Morakalis, Sportiello, Vega, Cornier, Kunath, Lopez, Valdez

\* MBE and WBE goals only apply to Group A – Lump Sum Pricing

\*\*Bidder provided partial waiver for VBE participation and waiver was granted

**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: IHC Construction Companies LLC

Contract No.: 22-093-2M

Affirmative Action Contact & Phone No.: Russell D. Ginn / 847-742-1516

E-Mail Address: rginn@ihcconstruction.com

Total Bid: \$2,980,000-

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

**MBE UTILIZATION**

Name of MBE and contact person: C & G Construction Supply Co. Lauren Green  
Business Phone Number: (708) 825-9770 Email Address: lauren@cgconstructionsupply.com  
Address: 1593 Valencia Court Calumet City, IL 60409  
Description of Work, Services or Supplies to be provided: FURNISH EQUIPMENT

CONTRACT ITEM NO.: Div 12  
Total Dollar Amount Participation: \$212,000-

**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)

**MBE UTILIZATION**

Name of MBE and contact person: Cardinal State LLC Roger Wiese  
Business Phone Number: (630) 320-9257 Email Address: rogerw@cardinalstatellc.com  
Address: 1719 Spring Creek Rd., Barrington Hills, IL 60010  
Description of Work, Services or Supplies to be provided: landscaping

CONTRACT ITEM NO.: D1002  
Total Dollar Amount Participation: \$10,365-

**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)

**MBE UTILIZATION**

Name of MBE and contact person: Integrated Demolition Service, LLC Jeffrey Griffard  
Business Phone Number: (708) 606-6942 Email Address: Jeff@IntegratedDemolition.com  
Address: 636 W. RICHTON RD CRETE, IL 60417  
Description of Work, Services or Supplies to be provided: Demolition

CONTRACT ITEM NO.: Div 02  
Total Dollar Amount Participation: \$ 86,920

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)

**MBE UTILIZATION**

Name of MBE and contact person: IronMason LLC Pablo Orozco, Jr  
Business Phone Number: (224) 523-9978 Email Address: p.orozco33@gmail.com  
Address: 37W136 Win Haven Dr Elgin, IL 60124  
Description of Work, Services or Supplies to be provided: ReBar Install

CONTRACT ITEM NO.: Dw 03  
Total Dollar Amount Participation: \$16,805

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)

**WBE UTILIZATION**

Name of WBE and contact person: Sypur Construction LLC Elise Altschuler

Business Phone Number: (412) 860-3708 Email Address: ealtschuler@sypur.com

Address: 802 Highview Ave Glen Ellyn, IL 60137

Description of Work, Services or Supplies to be provided: Drywall/Acoustic Ceiling

CONTRACT ITEM NO.: Div 09

Total Dollar Amount Participation: \$ 22,250~

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)

**MBE UTILIZATION**

Name of MBE and contact person: Torres Electrical Contractors LLC. Laura Hindahl  
Business Phone Number: (773) 386-2722 Email Address: lhindahl@torresclcc.com  
Address: 25261 Sunderlin Road Plainfield, Illinois 60585  
Description of Work, Services or Supplies to be provided: Electrical

CONTRACT ITEM NO.: D1010  
Total Dollar Amount Participation: \$1,270,500

**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)



## SIGNATURE SECTION

On Behalf of IHC Construction Companies LLC 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.

November 4, 2025

*Date*

  
*Signature of Authorized officer*

ATTEST:

  
*Secretary*

David J. Rock, President  
*Print name and title*

847-742-1516  
*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 !!!**

## 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:

\_\_\_\_\_  
**WAIVER NOT NEEDED**  
\_\_\_\_\_

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).

**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: \_\_\_\_\_  
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: \_\_\_\_\_

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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: \_\_\_\_\_

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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: \_\_\_\_\_

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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