

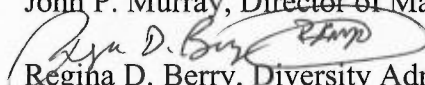
**INTEROFFICE MEMORANDUM**

**METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO**

**DEPARTMENT:** General Administration  
Diversity Section

**DATE:** June 24, 2020

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

**FROM:**  Regina D. Berry, Diversity Administrator

**SUBJECT:** Contract 20-618-11 – Furnish and Deliver HVAC and Refrigeration  
Parts and Services to Various Locations

**LOW BIDDER:** Core Mechanical, Inc.

The lowest responsive bidder, Core Mechanical, Inc., has submitted company information and “MBE/WBE/SBE/VBE Business Verification Forms” for the firm identified on the subject contract’s Affirmative Action Utilization Plan and VBE Commitment Form.

The MBE, WBE, VBE and SBE Utilization Goals for the above mentioned contract are 20% MBE, 9% WBE, 3% VBE and 10% SBE. According to the bidder’s Utilization Plan and VBE Commitment Form, the bidder has committed to the following goals:

<u>MBE</u>	<u>WBE</u>	<u>SBE</u>	<u>VBE</u>
20%	9%	*	3%

Therefore, Core Mechanical, Inc, is in apparent compliance with the requirements of Affirmative Action Ordinance Revised Appendix D and Appendix V.

RDB:MGT

Attachments

c: LoCascio, Cornier, Morakalis, Kursell, Cavarretta, Sportiello, Torres, File

\*Bidder offers self to satisfy the SBE requirements

REVISED JUNE, 2015

**METROPOLITAN WATER RECLAMATION DISTRICT OF  
GREATER CHICAGO**

**MBE, WBE, SBE UTILIZATION PLAN**

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

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

**All Bidders must sign the signature page UP-5 of the Utilization Plan, even if a waiver is requested.**

Name of Bidder: Core Mechanical, Inc.

Contract No.: 20-618-11

Affirmative Action Contact & Phone No.: Chrissy O'Donnell - (773) 267-6300

E-Mail Address: chrissy@coremechanicalinc.com

Total Bid: \$ 409,400.00

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

The bidder should indicate on the Utilization Plan explicitly if the dollar amounts for the MBE participation will also be counted toward the achievement of its SBE participation. See Affirmative Action Ordinance, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

**MBE UTILIZATION**

Name of MBE and contact person: American Mechanical Services Group, LLC - Joe Melendez  
Business Phone Number: 224-650-1202 Email Address: jmelendez.amsq@gmail.com  
Address: 170 Prairie Lake Road - East Dundee, IL 60118  
Description of Work, Services or Supplies to be provided: Provide Pipefitters (Labor) for Contract Item # 1

CONTRACT ITEM NO.: 1  
Total Dollar Amount Participation: \$ 81,880.00

If the MBE participation will be counted towards the achievement of the SBE goal please indicate here:

☐ YES

☒ NO

0\* \*

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

81,880.00 ÷  
409,400.00 =  
0.2 \*\*

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

If the MBE participation will be counted towards the achievement of the SBE goal please indicate here:

☐ YES

☐ NO

**The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE 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: \_\_\_\_\_

If the MBE participation will be counted towards the achievement of the SBE goal please indicate here:

☐ YES

☐ NO

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

(Attach additional sheets as needed)

The bidder should indicate on the Utilization Plan explicitly if the dollar amounts for the WBE participation will also be counted toward the achievement of its SBE participation. See Affirmative Action Ordinance, Revised Appendix D, Section 11, Counting MBE, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

**WBE UTILIZATION**

Name of WBE and contact person: Comprehensive Construction Solutions, LLC  
Business Phone Number: 773-255-1798 Email Address: etekle@ccscollc.com  
Address: 5835 W. Montrose Avenue - Chicago, IL 60634  
Description of Work, Services or Supplies to be provided: Provide Labor (Pipefitters) for Contract Item # 1

CONTRACT ITEM NO.: 1

Total Dollar Amount Participation: \$ 36,846.00

If the WBE participation will be counted towards the achievement of the SBE goal please indicate here:

☐ YES

☒ NO

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

0\* \*  
36,846.00 ÷  
409,400.00 =  
0.09 \*+

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

If the WBE participation will be counted towards the achievement of the SBE goal please indicate here:

☐ YES

☐ NO

**The MBE, WBE, SBE Utilization Plan and the MBE, WBE, SBE 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: \_\_\_\_\_

If the WBE participation will be counted towards the achievement of the SBE goal please indicate here:

☐ YES

☐ NO

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

(Attach additional sheets as needed)

SBE UTILIZATION

Name of SBE and contact person: Core Mechanical, Inc.  
Business Phone Number: 773-267-6300 Email Address: chrissy@coremechanicalinc.com  
Address: 4632 W. Lawrence Avenue - Chicago, IL 60630  
Description of Work, Services or Supplies to be provided: Perform HVAC Services Per Contract  
CONTRACT ITEM NO.: 1, 2, 3, 4  
Total Dollar Amount Participation: Balance of Contract

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

SBE UTILIZATION

Name of SBE 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, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid! ! !**

SBE UTILIZATION

Name of SBE 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: \_\_\_\_\_

(Attach additional sheets as needed)

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

## SIGNATURE SECTION

On Behalf of Core Mechanical, Inc.

(name of company)

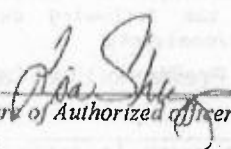
I/We hereby acknowledge that

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

5/12/20

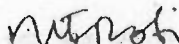
Date

  
Signature of Authorized Officer

ATTEST:

Lisa Sheehy - President

Print name and title



Secretary

773-267-6300

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, SBE Utilization Plan and the MBE, WBE, SBE Subcontractor's Letter of Intent MUST Accompany the Bid !!!**

VBE COMMITMENT FORM

1. Name of VBE: American Mechanical Services Group, LLC  
Identify MBE, WBE, SBE Status: MBE, VBE Address: 170 Prairie Lake Road  
City, State, Zip Code: East Dundee, IL 60118  
Contact Person: Joe Melendez Telephone Number: 224-650-1202  
eMail Address: jmelendez.amsgr@gmail.com  
Dollar Amount of Participation: \$ 12,282.00 Percent of Participation: 3 %  
Scope of Work: Provide Pipefitters for Line Item # 1

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: \_\_\_\_\_

0. \*  
12,282.00 ÷  
409,400.00 =  
0.03 %

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