

INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration
Diversity Section

DATE: March 3, 2020

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

FROM: Regina D. Berry, Diversity Administrator 

SUBJECT: Request for Proposal 19-RFP-26 Professional Environmental Engineering Services
for Real Estate – Tetra Tech, Inc.

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

Classification Type	Business Name	Contact
MBE/SBE	Integrated Environmental Solutions, Inc.	Sudhir Mantri
MBE	2JM Group, LLC	Luis Montgomery
WBE	Raimonde Drilling Corporation	Ann Leslie
VBE	Environmental Monitoring and Technologies, Inc.	Jason Cristino

The Minority, Women and Small Business Enterprises goals for the above contract are 20% MBE,
10% WBE, 10% SBE and 3% VBE. According to the MBE/WBE/SBE and VBE Commitment Forms,
Tetra Tech, Inc. commits to the following goals:

<u>MBE</u>	<u>WBE</u>	<u>VBE</u>	<u>SBE</u>
20%	10%	3%	*

* MBEs and WBEs satisfy SBE requirements

The Consultant, Tetra Tech, Inc., has met the requirements of Appendix A and Appendix V.

If you have any additional questions, please contact PJ Spencer, Diversity Officer, at extension 1-5876.

RDB/PCS
Attachment

c: Ms. Darlene A. LoCascio, Director of Procurement and Materials Management
Morakalis (Law), Cornier, May, Leibrock, file (2)

MBE/WBE/SBE COMMITMENT FORM

1. Name of MBE/WBE/SBE: Integrated Environmental Solutions, Inc.
 Identify MBE, WBE, SBE Status: MBE/SBE Address: 13435 Kolmar Avenue
 City, State, Zip Code: Crestwood, Illinois 60418-1442
 Contact Person: Sudhir Mantri, P.E., President Telephone Number: (708) 926-9588
 e-mail Address: smantri@jesolution.com
 Dollar Amount of Participation: \$ _____ Percent of Participation: 10% %
 Scope of Consulting Contract: Support for Phase I ESAs and Compliance

2. Name of MBE/WBE/SBE: 2iM Group LLC
 Identify MBE, WBE, SBE Status: MBE Address: 118 South Clinton, Suite 350
 City, State Zip Code: Chicago Illinois 60661
 Contact Person: Luis Montgomery Telephone Number: 312-441-9554 x 2120
 e-mail Address: luis.m@2imgroup.com>
 Dollar Amount of Participation: \$ _____ Percent of Participation: 10% %
 Scope of Consulting Contract: Support for Wetland Restoration

3. Name of MBE/WBE/SBE: Raimonde Drilling Corporation ✓
 Identify MBE, WBE, SBE Status: WBE Address: 770 Factory Road, 1st Floor
 City, State Zip Code: Addison, IL 60101
 Contact Person: Anne Leslie Telephone Number: 630-458-0590
 e-mail Address: info@rdc-drill.com
 Dollar Amount of Participation: \$ _____ Percent of Participation: 10% %
 Scope of Consulting Contract: Drilling Services

4. Name of MBE/WBE/SBE: _____
 Identify MBE, WBE, SBE Status: _____ Address: _____
 City, State, Zip Code: _____
 Contact Person: _____ Telephone Number: _____
 e-mail Address: _____
 Dollar Amount of Participation: \$ _____ Percent of Participation: _____ %
 Scope of Consulting Contract: _____

Attach a copy of qualifications for each MBE, WBE and SBE firm
 Please duplicate this blank page when additional certified MBE/WBE subcontractors are being used on this contract.

Revised/October 20, 2015

VBE COMMITMENT FORM

Environmental Monitoring and Testing Laboratories

1. Name of VBE: _____

Identify MBE, WBE, SBE Status: SBE/ VDBE Address: 8100 Austin Avenue
 City, State, Zip Code: Morton Grove, IL 60053

Contact Person: Jason Cristino Telephone Number: 847-324-3309
 E-mail Address: jchristino@eml.com

Dollar Amount of Participation: \$ _____ Percent of Participation: 3 %
 Scope of Work: Laboratory Services

2. Name of VBE: _____

Identify MBE, WBE, SBE Status: _____ Address: _____

City, State Zip Code: _____

Contact Person: _____ Telephone Number: _____

E-mail 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: _____

E-mail 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: _____

E-mail Address: _____

Dollar Amount of Participation: \$ _____ Percent of Participation: _____ %
 Scope of Work: _____

Attach a copy of qualifications for each VBE firm