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:	Independent Mechanical Industries, Inc.		
Contract No.:	22-107-21		
Affirmative Action	on Contact & Phone No. David W. Reynolds (773) 282-4500		
E-Mail Address:	dreynolds@independentmech.com		
Total Bid:	396,000.00		

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: Joson Mechanical Corp. Brenda Wheeler Email Address: brenda Q jason mechanical, com Business Phone Number: 815-723-6912 Address: 660 Colling St. Joliet, 12 60432 Description of Work, Services or Supplies to be provided: Later, Material and tools for CONTRACT ITEM NO .: Detailed Total Dollar Amount Participation: If the MBE participation will be counted towards the Z achievement of the SBE goal please indicate here: 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: Email Address: Business Phone Number: 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: 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: 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

(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!!!

YES

achievement of the SBE goal please indicate here:

The bidder should indicate on the Utilization Plan explicitly is achievement of its SBE participation. See Affirmative Action Participation towards Contract Goals. (a) (b) (c)	f the dollar amounts for Ordinance, Revised	or the WBE participation will als Appendix D, Section 11, Counting	o be counted toward the g MBE, WBE and SBE
W	BE UTILIZATION		
Name of WBE and contact person: Helm Elect	ical Sarvices	: Jay Eminger	1.1.7
Business Phone Number: 708-579-1000	Email Address:	irehelmelee.co	in girchelmole.com
Name of WBE and contact person: Helm Electrons Business Phone Number: 708-579-1000 Address: 5303 9th Ave. County side, 1	L 60525	- 11	
Description of Work, Services or Supplies to be provided	: Labor, unata	ial and took for elec	tracal Scope
CONTRACT ITEM NO .: Detailed Spees			
Total Dollar Amount Participation: \$45,800,00			
If the WBE participation will be counted towards the achievement of the SBE goal please indicate here:	Z YES	□ NO	
The MBE, WBE, SBE Utilization Plan and the MBE, W	BE, SBE Subcontracto	r's Letter of Intent MUST Accom	pany the Bid!!!
WI	BE UTILIZATION		4
Name of WBE and contact person: Integrated	Demolition	Services Jetten	Grifford
Business Phone Number: 700-606-6942	Email Address:	iete Cintegratedo	lemolition. com
Address: 1312 Prospect Ave., Willo	w Springs	12 60488	
Description of Work, Services or Supplies to be provided	A 1 (1)	Services	
CONTRACT ITEM NO .: Detailed Specs			
Total Dollar Amount Participation: \$3/0,1000.00			
If the WBE participation will be counted towards the	rès.		
achievement of the SBE goal please indicate here:	YES	NO	
The MBE, WBE, SBE Utilization Plan and the MBE, W	BE, SBE Subcontractor	's Letter of Intent MUST Accomp	oany the Bid!!!
WB	BE UTILIZATION		
Name of WBE and contact person:			
Business Phone Number:	Email Address:		Minimum and the control of the contr
Address:			The second secon
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 inchievement 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:	Some as MBE + WBE
	Email Address:
Address:	
Description of Work, Services or Sup	pplies to be provided:
CONTRACT ITEM NO.:	
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 Sup	plies 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 Supp	olies 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

Independent Mechanical Industries, Inc.

On Behalf of	I/We hereby acknowledge that
(name of compar	ny)
MBEs, WBEs, and SBEs listed above in the perfe	y with the provisions of Revised Appendix D, and intend to use the ormance of this contract and/or have completed the Waiver Request n and belief, the facts and representations contained in this Exhibit
	penalties of perjury that the contents of the foregoing I am authorized, on behalf of the bidder, to make this
June 7, 2022	AQ. 500
Date	Signature of Authorized officer
ATTEST:	David W. Reynolds-President
	Print name and title
Clare	
Secretary	(773) 282-4500
	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: Enger Varra	_				
	Identify MBE, WBE, SBE Status: VBE Address: 3406 Marting St.	-				
	City, State, Zip Code: Franklin Fank, 160131					
	Contact Person: Samue Vavra Telephone Number: 847-306-2820					
	eMail Address: enger vavra @ sbcg/obal, net					
	Dollar Amount of Participation: \$ 72,000.00 Percent of Participation: 3.0 9	%				
	Scope of Work: Concrete Work	-				
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:%	6				
	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:%	ó				
	Scope of Work:					
4.	Name of VBE:					
	Identify MBE, WBE, SBE Status: Address:					
	City, State, Zip Code:					
	Contact Person: Telephone Number:					
	cMail Address:					
	Dollar Amount of Participation: \$ Percent of Participation:%)				
	Scope of Work:					