INTEROFFICE MEMORANDUM METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration **DATE:** September 19, 2024

Diversity Section

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

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

SUBJECT: Contract 17-273-4P – Furnish and Install Odor Control System at

Thornton Reservoir, CSA

LOW BIDDER: Independent Mechanical Industries, Inc.

The lowest responsive bidder, Independent Mechanical Industries, Inc., has submitted company information and "MBE/WBE/VBE Business Verification Forms" for the firm 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. 10% WBE, and 3% VBE. According to the bidder's Utilization Plan and VBE Commitment Form, the bidder has committed to the following goals:

<u>MBE</u>	WBE	<u>VBE</u>	
24 62%	12 86%	4 48%	

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

RLM:MGT

Attachments

c: LoCascio, Cornier, Kunath, Morakalis, Valdez, Lopez, Busza, Fink-Finowicki

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: Independent Mechanical Industries, Inc.
Contract No.: 17-273-4P
Affirmative Action Contact & Phone No.: David W. Reynold; (773) 243-0575
E-Mail Address: dreynolds@independentmech.com
Total Bid: 3,064,500.00

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: 66 Construction Supply: Lauren Green

Business Phone Number: 708 825-9770 Email Address: Jauren & Caconstruction Supply. Com

Address: 1593 Valencia Ct., Calumet Cety, 12 66469

Description of Work, Services or Supplies to be provided: McChantal Equipment Supply: Old Control System CONTRACTITEM NO.: Detailed Specs 754, 358,00 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: Email Address: _____ Business Phone Number: 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: ___ _____ Email Address: _____ Business Phone Number: _____ Address: _ Description of Work, Services or Supplies to be provided: CONTRACT ITEM NO .: __

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

Total Dollar Amount Participation: ____

(Attach additional sheets as needed)

Name of WBE and contact person: Hill Co Distributing Company Inc.; Nikki Liddy Business Phone Number: 312) 492 - 88444 Email Address: Mikki Chillandishibuty.com Address: 1516 W Adams St. Chicago, 1L 60607 Description of Work, Services or Supplies to be provided: Neopene Rubber Supply CONTRACT ITEM NO.: 3 Detailed Specs
Total Dollar Amount Participation: \$393, 965. 60
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)

SIGNATURE SECTION

On Behalf of Mechanical (name of company)	I/We hereby acknowledge that
I/WE have read Revised Appendix D, will comply with the MBEs and WBEs listed above in the performance of this of To the best of my knowledge, information and belief, the fand no material facts have been omitted.	contract and/or have completed the Waiver Request Form.
I do solemnly declare and affirm under penaltidocument are true and correct, and that I am a affidavit.	
September 10th, 2024 Date	Signature of Authorized officer
ATTEST:	David W. Raynolds, Print name and title
de	

1) The Bidder is required to sign and execute this page, EVEN IF A WAIVER IS BEING REQUESTED.

(773) 243 -0575 Phone number

Secretary (histopher Olson

- 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!!

Page Intentionally

Left Blank

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 a total or partial waiver of the requireme (d) of the Affirmative Action Ordinance, WBE Utilization Plan or achieve a partic the contract. The reasons for the reques	nt that, pursuant to Section 15 (a)- Revised Appendix D, it files a MBE/ cular goal for MBE/WBE participation in
On Behalf of	I/We hereby acknowledge that
(name of company) I/WE have read Affirmative Action Ordinance, Revised Ap Action Ordinance, Revised Appendix D, and intend to use the Plan in the performance of this contract and have com knowledge, information and belief, the facts and represent and no material facts have been omitted.	the MBEs and WBEs listed in the MBE/WBE Utilization upleted the Waiver Request Form. To the best of my
I do solemnly declare and affirm under penalties of perjury correct, and that I am authorized, on behalf of the contracto	
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: Evapor - Varra, MC.	
	Identify MBE, WBE Status: VBE Address: 3406 Martens St.	
	City, State, Zip Code: Franklin Pork 1L 60131	
	Contact Person: Den Hester Telephone Number: (847) 678 -4252	
	eMail Address: Theser @ engervara. com	
	*Dollar Amount of Participation: \$\\\ 137,300. \times \\ Percent of Participation: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	_%
	Scope of Work: Concrete Pod3	
2.	Name of VBE:	
	Identify MBE, WBE 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 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 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 business.

^{*} If a MBE or WBE will be utilized to accomplish the VBE Contract Goal, then the VBE commitment amount must be entered as a separate dollar amount. VBE Contract Goals are separate and distinct from the MBE and WBE Contract Goals.