

INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration
Diversity Section

DATE: July 6, 2023
REVISED

TO: Catherine O'Connor, Director of Engineering

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

RLM/P.S.

SUBJECT: Contract 11-187-3F – Addison Creek Channel Improvements, SSA

LOW BIDDER: Judlau Contracting, Inc.

The lowest responsive bidder, Judlau Contracting, Inc. has submitted company information and "MBE/WBE/SBE Business Verification Forms for the firms identified on the subject contract's Affirmative Action Utilization Plan.

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

<u>MBE</u>	<u>WBE</u>	<u>SBE</u>	<u>VBE</u>
20.55%	10.05%	12.90%	3%

Therefore, Judlau Contracting, Inc. is in apparent compliance with the requirements of the Affirmative Action Ordinance Revised Appendix D, dated 6/2/2022.

*MBE & WBE satisfy the SBE requirements

RLM:DH

Attachment

c: D. LoCascio, S. Morakalis, C. Cherian, M. Cosme, L. Cornier, D. Hardney, File (2)

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: Natural Creation, Mitch Holmer
Business Phone Number: 815-724-0491 Email Address: mholmer@naturalcreationslandscaping.com
Address: 356 E, Bruce St, Joliet, IL 60432
Description of Work, Services or Supplies to be provided: LANDSCAPING

CONTRACT ITEM NO.: 11-187-3F

Total Dollar Amount Participation: \$9,285,965.00

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!!!

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 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: Cabo Construction Corp, Robert Bohac
Business Phone Number: 773 521 2226 Email Address: _____
Address: 1235 S Kilbourn Ave, Chicago, IL, 60623
Description of Work, Services or Supplies to be provided: SEWER ? WATER ? SANITARY

CONTRACT ITEM NO.: 11 - 187 - 3F

Total Dollar Amount Participation: \$6,595,709.00

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 !!!

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 MBF, WBE and SBE Participation towards Contract Goals. (a) (b) (c)

WBE UTILIZATION

Name of WBE and contact person: RA SEATON CONTRACTOR SERV. - REBECCA SEATON
Business Phone Number: 815-378-9799 Email Address: rseatoncontractor@gmail.com
Address: 5100 LINDEN RD. ROCKFORD, IL 61109
Description of Work, Services or Supplies to be provided: TRUCKING

CONTRACT ITEM NO.: 11-187-3F
Total Dollar Amount Participation: \$3,811,000.00

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 !!!

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)

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: S+J Construction Co. Inc, Simone Kaporich
Business Phone Number: 708 331 1816 Email Address: skaporich@s+jconst.com
Address: 4245 166th Street, Oak Forest, IL 60452
Description of Work, Services or Supplies to be provided: CAISSON DRILLING SUB

CONTRACT ITEM NO.: 11-187-3F
Total Dollar Amount Participation: \$3,377,478.00

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!!

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)

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: Ma Rebar Services, INC, Theresa Kern
Business Phone Number: 312-320-1100 Email Address: +k@maRebarServices.com
Address: 1415 West 3rd Street, Suite 205W, Chicago IL 60609
Description of Work, Services or Supplies to be provided: REBAR INSTALL

CONTRACT ITEM NO.: 11-187-3F

Total Dollar Amount Participation: \$181,946.00

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!!

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)

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: C3 Corporation, Carol A. Marcus

Business Phone Number: 815-723-2200 Email Address: _____

Address: 822N 129th Infantry Drive, Suite 105, Joliet, IL 60435

Description of Work, Services or Supplies to be provided: SURVEYING -3107

CONTRACT ITEM NO.: 11-187-3F

Total Dollar Amount Participation: \$400,000.00

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!!!

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: S: J CONSTRUCTION Co. Inc. - SIMONE KAPOVICH
Business Phone Number: 708-331-1816 Email Address: SKapovich@sjconst.com
Address: 4245 166th ST, OAK FOREST, IL 60452
Description of Work, Services or Supplies to be provided: CAISSON ! DRILLING SUB
CONTRACT ITEM NO.: 11-187-3F
Total Dollar Amount Participation: \$3,377,478.00

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: CABO CONSTRUCTION CORP, ROBERT BOHAC
Business Phone Number: 773-521-2226 Email Address: _____
Address: 1235 S. KILBOURN AVE, CHICAGO, IL 60623
Description of Work, Services or Supplies to be provided: SEWER ! WATER ! SANITARY
CONTRACT ITEM NO.: 11-187-3F
Total Dollar Amount Participation: \$6,595,709.00

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 Judlau Contracting, Inc. 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, 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.

February 27, 2023
Date


Signature of Authorized officer

ATTEST:

Daniel Ruiz Andujar, Chief Executive Officer
Print name and title


Secretary

630.387.6060
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 !!

WAIVER REQUEST FORM

If a waiver is requested, the Bidder is required to sign and execute this page.

Contract No.: 11-187-3F

Name of Bidder: Judlau Contracting, Inc.

Contact Person and Phone Number: Arnav Amin, 630.387.6060

With respect to the contract specified above, the Bidder hereby requests a total or partial waiver of the requirement that, pursuant to Section 12 (a)-(d) of the Affirmative Action Ordinance, Revised Appendix D, it files a MBE, WBE, SBE Utilization Plan or achieve a particular goal for MBE, WBE, SBE participation in the contract. The reasons for the request are as follows:

On Behalf of Judlau Contracting, Inc. 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, WBEs, and SBEs listed in the MBE, WBE, SBE 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.

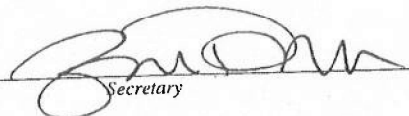
I do solemnly declare and affirm under penalties of perjury that the contents of the foregoing document are true and correct, and that I am authorized, on behalf of the contractor, to make this affidavit.

February 27, 2023
Date


Signature of Authorized officer

Daniel Ruiz Andujar, Chief Executive Officer
Print name and title

ATTEST:


Secretary

630.387.6060
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. D15-D16, Section 12. Utilization Plan Submission (e), (i) (i)-(xi).

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: Veterans Vac Services
Identify MBE, WBE, SBE Status: VBE Address: 518 S. Route 31 McHenry, IL 60050
City, State, Zip Code: McHenry, IL, 60050
Contact Person: Ray Andersen Telephone Number: 815 963 7700
eMail Address: raymond@veteransvac.com
Dollar Amount of Participation: \$ 480,000.00 Percent of Participation: 0.63 %
Scope of Work: VAC TRUCK SERVICES
-
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: _____
-
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

VBE COMMITMENT FORM

1. Name of VBE: GEO-ENVIRO CONSULTANTS, INC.
Identify MBE, WBE, SBE Status: NO Address: P.O. Box 876
City, State, Zip Code: McHENRY, IL 60051
Contact Person: KERRY VAN ALLEN Telephone Number: 773-562-6672
eMail Address: Kerry@geo-enviroconsult.com
Dollar Amount of Participation: \$ 420,000.00 Percent of Participation: 0.55 %
Scope of Work: ENVIRONMENTAL CONSULTANT

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: _____

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

VBE COMMITMENT FORM

1. Name of VBE: VETERAN TRANSPORTATION SERVICES
Identify MBE, WBE, SBE Status: _____ Address: 11761 BRIARWOOD CT.
City, State, Zip Code: BURR RIDGE, IL 60527
Contact Person: STEVEN GAYTAN Telephone Number: 312-686-6217
eMail Address: S.gaytan@veterantransportationservices.net
Dollar Amount of Participation: \$ 694,000.00 Percent of Participation: 0.88 %
Scope of Work: TRUCKING

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: _____

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

VBE COMMITMENT FORM

1. Name of VBE: TERRAZAS LLC
Identify (MBE) WBE, SBE Status: Yes Address: 4656 W. OFFNER RD
City, State, Zip Code: MONEE, IL 60449
Contact Person: ROBERTO TERRAZAS Telephone Number: 708-515-9074
eMail Address: rterrazas@terrazaconstruction.com
Dollar Amount of Participation: \$ 715,147.00 Percent of Participation: 0.94 %
Scope of Work: FLATWORK

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: _____

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