

INTEROFFICE MEMORANDUM

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO

DEPARTMENT: General Administration  
Diversity Section

DATE: December 20, 2023

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

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



SUBJECT: REVISED: Contract 10-047-3S, "North Shore 1 Rehabilitation"

LOW BIDDER: Inliner Solutions, LLC

The lowest responsive bidder, Inliner Solutions, LLC has submitted company information and "MBE/WBE Business Verification Forms" for the firm identified on the subject contract's Affirmative Action Utilization Plan.

The MBE and WBE Utilization Goals for the above-mentioned contract are 7% MBE and/or WBE. According to the bidder's Utilization Plan and VBE Commitment Form, the bidder has committed to the following goals:

<u>WBE</u>	<u>VBE</u>
7%	10%

Therefore, Inliner Solutions, LLC is in apparent compliance with the requirements of Affirmative Action Ordinance Revised Appendix D.

RLM:omp

Attachments

c: LoCascio, Cornier, Morakalis, Zogas, Lopez, Valdez, Spencer

**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: Inliner Solutions, LLC.

Contract No.: 10-047-3S

Affirmative Action Contact & Phone No.: Jillian Lugo 708-465-9688

E-Mail Address: jillian.lugo@puriscorp.com

Total Bid: \$44,987,654.00

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

**WBE UTILIZATION**

Name of WBE and contact person: Work Zone Safety, Inc  
Business Phone Number: 815-834-0429 Email Address: estimating@workzonesafetyinc.com  
Address: 17051 Gaylord Road, Crest Hill, Illinois 60403  
Description of Work, Services or Supplies to be provided: Traffic Control & Protection

CONTRACT ITEM NO.: Item 2, 3, 5 and 6  
Total Dollar Amount Participation: \$100,000.00

**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: AMS Elite Solutions, Inc  
Business Phone Number: 847-293-2707 Email Address: j.savitt@ams-es.net  
Address: 33760 N. Lake Shore Drive, Grayslake, IL 60030  
Description of Work, Services or Supplies to be provided: Trucking of Pipe Materials

CONTRACT ITEM NO.: Items 2A and 2B  
Total Dollar Amount Participation: \$340,000.00

**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: Sheridan Plumbing and Sewer, Inc  
Business Phone Number: 708-475-7100 Email Address: aaimaro@spands.com  
Address: 6754 W. 74th St., Bedford Park, IL 60638  
Description of Work, Services or Supplies to be provided: Sewer cleaning and televising, Post liner CCTV

CONTRACT ITEM NO.: Item 2  
Total Dollar Amount Participation: \$2,709,256.00

**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 Inliner Solutions, LLC 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 and WBEs 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.

11/30/2023

Date

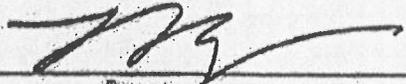
James Oban

Signature of Authorized officer

ATTEST:

James Oban - Regional Vice President

Print name and title

  
Secretary

Thomas Gottsegen - Chief Legal Officer & Asst. Secretary

708-774-7799

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."**

**VBE COMMITMENT FORM**

1. Name of VBE: AIRY'S, INC  
Identify MBE, WBE Status: VBE Address: 21825 CHERRY HILL RD.  
City, State, Zip Code: JOILET, IL 60433  
Contact Person: STUART JELM Telephone Number: 708-429-0660  
eMail Address: ESTIMATING@AIRYS.COM  
\*Dollar Amount of Participation: \$ 4,542,000.00 Percent of Participation: 10 %  
Scope of Work: ACCESS PITS, DROP SHAFT MODIFICATION, NEW MANHOLES

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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: \_\_\_\_\_

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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: \_\_\_\_\_

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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: \_\_\_\_\_

\* 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.

Attach a copy of qualifications for each VBE business.