

AMENDMENT NO. 2

This Amendment modifies Contract No. 1655-15826, for Construction Management Services – Various Various (Task Orders) by and between the County of Cook, Illinois, herein referred to as “County” and H.W. Lochner, Inc., authorized to do business in the State of Illinois hereinafter referred to as “Contractor”:

RECITALS

Whereas, the County and Contractor have entered into a Contract approved by the County Board on November 15, 2017, (hereinafter referred to as the “Contract”), wherein the Contractor is to provide construction management services (hereinafter referred to as the Services) from December 1, 2017 through November 30, 2020, in an amount not to exceed \$2,500,000.00, with two (2), one (1) year renewal options; and

Whereas, Amendment No. 1 was authorized by the County Board on November 19, 2020 to renew the contract for 12 months beginning on December 1, 2020 through November 30, 2021 in the amount of \$1,500,000.00 and the Total Contract Amount was revised to \$4,000,000.00; and

Whereas, the Contract will expire on November 30, 2021, and the agreed upon Services are still required; and

Whereas, an increase of the Contract amount is required for the continuation of Services; and pursuant to Article 10 Section C – Contract Amendments of the Contract, the County and Contractor desire to increase the Contract in the amount of \$1,000,000.00.

Whereas, pursuant to Article 10 Section C – Contract Amendments of the Contract, the County and Contractor desire to renew the Contract for 12 months beginning on December 1, 2021 through November 30, 2022.

Whereas, pursuant to Article 10 Section C – Contract Amendments of the Contract, the County and Contractor desire to revise Exhibit 4 – Schedule of Compensation and Exhibit 5 – Forms – Cost Estimate of Consultant Services provided in the Contract.

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

1. The Contract is renewed through November 30, 2022.
2. The Contract is increased by \$1,000,000.00 and the Total Contract Amount is revised to \$5,000,000.00.
3. The Contract is hereby amended to delete Exhibit 4 – Schedule of Compensation and Exhibit 5 – Forms – Cost Estimate of Consultant Services in its entirety in the contract and replace it with the attached Attachment 1 – Revised Exhibit 4 – Schedule of Compensation and Revised Exhibit 5 – Forms – Cost Estimate of Consultant Services

4. The attached updated Identification of Sub-Contractors/Suppliers/Sub-Consultants Form, DBE Utilization Plan forms, certificate of insurance, and Economic Disclosures Statement under Attachment 2 are incorporated and made a part of this Contract.
5. All other terms and conditions remain as stated in the Contract.

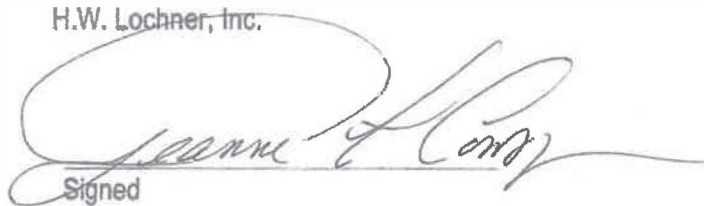
In witness whereof and pursuant to County Board approval on September 23rd, 2021 the County and Contractor have caused this Amendment No. 2 to be executed on the date and year last written below.

County of Cook, Illinois

H.W. Lochner, Inc.

By: Raffi Sarrafian
Chief Procurement Officer

Digitally signed by
Raffi Sarrafian
Date: 2021.10.04
12:49:45 -05'00'


Signed

Date: September 23, 2021

Jeanne T. Cormier
Type or print name

By: James Beligratis
State's Attorney

President and CEO
Title

Type or print name

Date: _____

Date: August 13, 2021

ATTACHMENT 1

Revised Exhibit 4 – Schedule of Compensation

Revised Exhibit 5 – Forms – Cost Estimate of Consultant Services
(BLR 5514 & BLR 5530 Exhibit C)

Revised Exhibit 4 – Schedule of Compensation

All Services must be authorized by a written Work Order. Consultant acknowledges and agrees that the County is under no obligation to issue any Work Orders for the Services or exhaust all monies available in the contract. The maximum compensation (upper Limit) under this agreement may not exceed \$5,000,000.00 unless amended in accordance with Article 10) c) Contract Amendments.

Upon the written approval of the Department, the County will issue a Work Order specifically referencing this Agreement, identifying the project, and setting forth the Services to be performed and desired completion date. Consultant shall respond by proposing a time schedule, budget, deliverables and a list of key and staff personnel, all of which must conform to the terms of the Work Order and be completed in accordance with the various regulatory agencies. Consultant must not respond to any Work Order not approved in writing by the Department. Cost associated with the preparation of the Work Orders is not compensable under this Agreement and the County is not liable for any additional costs.

All Work Orders are subject to the approval of the Department and no Work Order will become binding until the County approved it.

Overhead Rates:

H.W. Lochner, Inc. Field - 110.43%
 Home – 155.30%
 Blended – 143.20%

Apex Consulting, LLC – 93.99%
Atlas Engineering Group – 149.00%
CKL Engineers, LLC – 100.44%
d’Escoto, Inc. – 69.99%
Illinois Construction & Environmental Consulting, Inc. – 135.87%
The Roderick Group – 112.61%
Synnov Group, Inc. – 79.20%
Urban GIS – 143.05%

Wage Rates:

All billable wages shall be actual, not to exceed \$78.00 / Hour.

No retainage will be withheld.

The consultant must submit original invoices on a monthly basis to the Department to apply against the contract (PO). Consultant must support each invoice with reasonable detail including subconsultant costs. Consultant must maintain complete documentation of all costs incurred for review and audit by the County or its designated representative(s). Consultant must submit each invoice in the format directed by the Department with progress report identifying any variances from budget or schedule and explains the reasons for such variances.

Method of Payment:

Cost Plus Fixed Fee (CPFF) method of compensation

CPFF formula:

$$\text{Compensation} = \text{DL} + \text{DC} + \text{OH} + \text{FF}$$

Where Fixed Fee (FF):

For Prime Agreements is:
 $(0.33 + R) \text{DL} + \% \text{DL} = \text{FF}$

$\% \text{DL} = 10\%$ of Direct Labor (DL) of Subs

For Sub-Consultants
 $(0.33 + R) \text{DL}$

Note: The Total Fixed Fee cannot exceed 15% of DL + OH unless expressly stated in the advertisement. For Prime Consultants, the Total Fixed Fee includes the Subconsultant $\% \text{DL}$.

Where:

R= Complexity Factor: 0
DL = Direct Labor
DC= Direct Cost
OH= Overhead Rate



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

June 3, 2021

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Rick Cholewa
LOCHNER, H. W., INC.
225 West Washington Street
12th Floor
Chicago, IL 60606

Dear Rick Cholewa,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Apr 30, 2020. Your firm's total annual transportation fee capacity will be \$40,000,000.

Your firm's Field Office rate of 110.43% and Home Office rate of 155.30% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Bureau of Investigations and Compliance in a pre-award audit. Pursuant to 23 CFR 172.11(d), we are providing notification that we will post your company's indirect cost rate to the Federal Highway Administration's Audit Exchange where it may be viewed by auditors from other State Highway Agencies.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until April 30, 2021. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR LOCHNER, H. W., INC.

CATEGORY	STATUS
Special Studies - Traffic Studies	X
Special Plans - Traffic Signals	X
Transportation Studies - Railway Engineering	X
Special Services - Construction Inspection	X
Highways - Roads and Streets	X
Location Design Studies - Rehabilitation	X
Special Studies - Feasibility	X
Transportation Studies - Mass Transit	X
Location Design Studies - Reconstruction/Major Rehabilitation	X
Highways - Freeways	X
Location Design Studies - New Construction/Major Reconstruction	X
Special Studies - Safety	X
Structures - Highway: Typical	X
Structures - Highway: Complex	X
Structures - Highway: Advanced Typical	X
Structures - Railroad	X
Structures: Major River Bridges	X
Structures - Highway: Simple	X
Special Plans - Lighting: Typical	X
Special Plans - Lighting: Complex	X
Environmental Reports - Environmental Impact Statement	X
Environmental Reports - Environmental Assessment	X
Special Studies- Location Drainage	X
Hydraulic Reports - Waterways: Typical	X
Hydraulic Reports - Waterways: Complex	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST

Welcome to the Illinois Department of Transportation Consultant Engineering Prequalification and Agreement System (EPAS). All firms that desire to be prequalified with IDOT must submit via the SEFC Application. All firms that desire to be considered for the Professional Transportation Bulletin Items must submit Statements of Interest through the SOI Application. The required data has not changed for prequalification or Statements of Interest. All Prequalification and Statements of Interest are paperless.

SEFC Applications

Your renew SEFC is due by 10/30/2021. Failure to submit your renew SEFC by 10/30/2021 will result in loss of your prequalification status.

[Renew SEFC](#) [Amend Last SEFC](#)

App Id	Date Submitted	Fiscal Year Ending Date	Type	Overhead %	Status	Category/Comments	Additional Info	Approval Letter
SEFC ID : 8527	06/24/2021	04/30/2020	AmendSEFC	143.20	APPROVED - Firm has multiple rates	View	View	Approval Letter
SEFC ID : 8350	06/11/2021	04/30/2020	AmendSEFC	143.20	APPROVED - Firm has multiple rates	View	View	Approval Letter



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

April 21, 2021

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Delano Brazil
APEX CONSULTING ENGINEERS, L.L.C.
111 East Wacker Drive
Suite 430
Chicago, IL 60601

Dear Delano Brazil,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be \$2,400,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 93.99% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Bureau of Investigations and Compliance in a pre-award audit. Pursuant to 23 CFR 172.11(d), we are providing notification that we will post your company's indirect cost rate to the Federal Highway Administration's Audit Exchange where it may be viewed by auditors from other State Highway Agencies.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR APEX CONSULTING ENGINEERS, L.L.C.

CATEGORY	STATUS
Special Plans - Traffic Signals	X
Highways - Roads and Streets	X
Special Services - Construction Inspection	X
Special Studies - Traffic Studies	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

July 21, 2020

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Natalia Homedi
ATLAS ENGINEERING GROUP
3100 Dundee Road Suite # 502
Northbrook, IL 60062

Dear Natalia Homedi,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be .

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 149.00% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Office of Quality Compliance and Review in a pre-award audit.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR ATLAS ENGINEERING GROUP

CATEGORY	STATUS
Structures - Highway: Advanced Typical	X
Airports - Design	X
Special Studies - Traffic Signals	X
Special Studies - Traffic Studies	X
Transportation Studies - Railway Engineering	X
Special Services - Construction Inspection	X
Hydraulic Reports - Waterways: Typical	X
Special Studies - Location Drainage	X
Hydraulic Reports - Waterways: Complex	X
Hydraulic Reports - Pump Stations	X
Location Design Studies - Reconstruction/Major Rehabilitation	X
Special Studies - Safety	X
Location Design Studies - Rehabilitation	X
Highways - Roads and Streets	X
Highways - Freeways	X
Special Services - Surveying	X
Special Services - Sanitary	X
Airports - Construction Inspection	X
Structures - Highway: Simple	X
Location Design Studies - New Construction/Major Reconstruction	X
Structures - Railroad	X
Structures - Highway: Typical	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

June 26, 2021

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Rashod Johnson
The Roderick Group, Inc. dba Ardmore Roderick
1500 W. Carroll Ave
Suite 300
Chicago, IL 60607

Dear Rashod Johnson,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be \$32,800,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 112.61% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Bureau of Investigations and Compliance in a pre-award audit. Pursuant to 23 CFR 172.11(d), we are providing notification that we will post your company's indirect cost rate to the Federal Highway Administration's Audit Exchange where it may be viewed by auditors from other State Highway Agencies.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

**SEFC PREQUALIFICATIONS FOR The Roderick Group, Inc. dba Ardmore
Roderick**

CATEGORY	STATUS
Structures - Railroad	X
Special Studies- Location Drainage	X
Location Design Studies - Reconstruction/Major Rehabilitation	X
Special Studies - Traffic Studies	X
Special Plans - Traffic Signals	X
Special Services - Construction Inspection	X
Highways - Freeways	X
Special Services - Subsurface Utility Engineering	X
Location Design Studies - Rehabilitation	X
Special Services - Surveying	X
Special Services - Sanitary	X
Highways - Roads and Streets	X
Special Studies - Safety	X
Structures - Highway: Typical	X
Structures - Highway: Simple	X
Airports - Construction Inspection	X
Special Services - Project Controls	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

April 14, 2021

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Mae Cheri Whiteside
CKL Engineers, LLC
700 N Green Street
Suite 204
Chicago, IL 60642

Dear Mae Cheri Whiteside,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be \$3,000,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 100.44% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Bureau of Investigations and Compliance in a pre-award audit. Pursuant to 23 CFR 172.11(d), we are providing notification that we will post your company's indirect cost rate to the Federal Highway Administration's Audit Exchange where it may be viewed by auditors from other State Highway Agencies.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR CKL Engineers, LLC

CATEGORY	STATUS
Special Services - Construction Inspection	X
Airports - Construction Inspection	X
Airports - Design	X
Airports - Planning & Special Services	A

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

March 10, 2021

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Federico d'Escoto
D'ESCOTO, INC.
1200 N Ashland Ave.
6th Floor
Chicago, IL 60622

Dear Federico d'Escoto,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be \$10,400,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 69.99% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Bureau of Investigations and Compliance in a pre-award audit. Pursuant to 23 CFR 172.11(d), we are providing notification that we will post your company's indirect cost rate to the Federal Highway Administration's Audit Exchange where it may be viewed by auditors from other State Highway Agencies.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR D'ESCOTO, INC.

CATEGORY	STATUS
Special Services - Construction Inspection	X
Special Studies- Location Drainage	X
Hydraulic Reports - Waterways: Typical	X
Hydraulic Reports - Waterways: Complex	X
Highways - Freeways	X
Location Design Studies - Rehabilitation	X
Location Design Studies - Reconstruction/Major Rehabilitation	X
Highways - Roads and Streets	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

October 27, 2020

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Clayton Hamano
Illinois Construction & Environmental Consulting, Inc.
2399 Foster Avenue
Wheeling, IL 60090

Dear Clayton Hamano,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be \$3,800,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 135.87% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Office of Quality Compliance and Review in a pre-award audit.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR Illinois Construction & Environmental Consulting, Inc.

CATEGORY	STATUS
Special Services - Construction Inspection	X
Special Services - Quality Assurance HMA & Aggregate	X
Special Services - Quality Assurance PCC & Aggregate	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST



Illinois Department of Transportation

2300 South Dirksen Parkway / Springfield, Illinois / 62764

April 14, 2021

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Asha Singh
Synnov Group, Inc.
8604 West Catalpa Ave
Suite 901
Chicago, IL 60656

Dear Asha Singh,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2019. Your firm's total annual transportation fee capacity will be \$1,200,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 79.20% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Bureau of Investigations and Compliance in a pre-award audit. Pursuant to 23 CFR 172.11(d), we are providing notification that we will post your company's indirect cost rate to the Federal Highway Administration's Audit Exchange where it may be viewed by auditors from other State Highway Agencies.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2020. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR Synnov Group, Inc.

CATEGORY	STATUS
Special Services - Specialty Firm	X

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST

February 27, 2019

Subject: PRELIMINARY ENGINEERING
Consultant Unit
Prequalification File

Sonita Gantt
Urban GIS, Inc.
1143 W Rundell Place, Suite 301
Chicago, IL 60607

Dear Sonita Gantt,

We have completed our review of your "Statement of Experience and Financial Condition" (SEFC) which you submitted for the fiscal year ending Dec 31, 2017. Your firm's total annual transportation fee capacity will be \$1,000,000.

Your firm's payroll burden and fringe expense rate and general and administrative expense rate totaling 143.05% are approved on a provisional basis. The rate used in agreement negotiations may be verified by our Office of Quality Compliance and Review in a pre-award audit.

Your firm is required to submit an amended SEFC through the Engineering Prequalification & Agreement System (EPAS) to this office to show any additions or deletions of your licensed professional staff or any other key personnel that would affect your firm's prequalification in a particular category. Changes must be submitted within 15 calendar days of the change and be submitted through the Engineering Prequalification and Agreement System (EPAS).

Your firm is prequalified until December 31, 2018. You will be given an additional six months from this date to submit the applicable portions of the "Statement of Experience and Financial Condition" (SEFC) to remain prequalified.

Sincerely,
Jack Elston, P.E.
Bureau Chief
Bureau of Design and Environment

SEFC PREQUALIFICATIONS FOR Urban GIS, Inc.

CATEGORY	STATUS
Special Services - Specialty Firm	X
Airports - Planning & Special Services	A
Environmental Reports - Environmental Assessment	A
Special Services - Surveying	A

X	PREQUALIFIED
A	NOT PREQUALIFIED, REVIEW THE COMMENTS UNDER CATEGORY VIEW FOR DETAILS IN EPAS.
S	PREQUALIFIED, BUT WILL NOT ACCEPT STATEMENTS OF INTEREST

Revised Exhibit 5 – Forms – Cost Estimate of Consultant Services
(BLR 5514 & BLR 5530 Exhibit C)



Local Public Agency	County	Section Number
Consultant (Firm) Name	Prepared By	Date

PAYROLL ESCALATION TABLE

CONTRACT TERM	<input style="width: 90%;" type="text"/>	MONTHS	OVERHEAD RATE	<input style="width: 90%;" type="text"/>
START DATE	<input style="width: 90%;" type="text"/>		COMPLEXITY FACTOR	<input style="width: 90%;" type="text"/>
RAISE DATE	<input style="width: 90%;" type="text"/>		% OF RAISE	<input style="width: 90%; text-align: center; value: 2.00%;" type="text"/>
END DATE	<input style="width: 90%;" type="text"/>			

ESCALATION PER YEAR

Year	First Date	Last Date	Months	% of Contract

The total escalation = 0.00%

Local Public Agency**County****Section Number**

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MAXIMUM PAYROLL RATE**78.00****ESCALATION FACTOR****0.00%****PAYROLL RATES**

Exhibit E Cost Estimate of Consultant Services Worksheet Fixed Raise

CLASSIFICATION	IDOT PAYROLL RATES ON FILE	CALCULATED RATE

Local Public Agency

County

Section Number

AVERAGE HOURLY PROJECT RATES

Exhibit E Cost Estimate of Consultants Services Worksheet Fixed Raise

SHEET 1 OF 1

PAYROLL CLASSIFICATION	AVG HOURLY RATES	TOTAL PROJ. RATES																	
		Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg			
		0.0																	
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TOTALS		0.0	0%	\$0.00	0.0	0.00%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00

Local Public Agency

County

Section Number

AVERAGE HOURLY PROJECT RATES

Exhibit E Cost Estimate of Consultant Services Worksheet Fixed Raise

SHEET 2 OF 1

PAYROLL CLASSIFICATION	AVG HOURLY RATES																		
		Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg
TOTALS		0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00

Local Public Agency

County

Section Number

AVERAGE HOURLY PROJECT RATES

Exhibit E Cost Estimate of Consultant Services Worksheet Fixed Raise

SHEET 3 OF 1

PAYROLL CLASSIFICATION	AVG HOURLY RATES																		
		Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg			
TOTALS		0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00

Local Public Agency

County

Section Number

AVERAGE HOURLY PROJECT RATES

Exhibit E Cost Estimate of Consultant Services Worksheet Fixed Raise

PAYROLL CLASSIFICATION	AVG HOURLY RATES																		
		Hours	% Part.	Wgt'd Avg	Hours	% Part.	Wgt'd Avg	Hours	% Part.	Wgt'd Avg	Hours	% Part.	Wgt'd Avg	Hours	% Part.	Wgt'd Avg			
TOTALS		0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00

Local Public Agency

County

Section Number

AVERAGE HOURLY PROJECT RATES

Exhibit E Cost Estimate of Consultant Services Worksheet Fixed Raise

SHEET 5 OF 1

PAYROLL CLASSIFICATION	AVG HOURLY RATES																		
		Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg	Hours	% Part.	Wgtd Avg			
TOTALS		0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00	0.0	0%	\$0.00

Instructions for BLR 05514
Form instructions are not to be submitted with the form

This form shall be used as Exhibit E with BLR 05530, Local Public Agency Engineering Services Agreement, when Cost Plus Fixed is selected as the method of compensation with the raise date selected by the user. For more information, refer to the Bureau of Local Roads and Streets Manual (BLRS) Chapter 5.

Fields completed on one tab that are required on other tabs are automatically populated based on the entry on the first tab.

ESCALATION TAB

Local Public Agency	Insert the name of the Local Public Agency (LPA).
County	Insert the name in which the LPA is located.
Section Number	Insert the section number associated with this project.
Consultant (Firm) Name	Insert the name of the prime consultant for this agreement.
Prepared By	Insert the name of the person who prepared this document.
Date	Insert the date the document was prepared.
Payroll Escalation Table	
Contract Term	Insert the contract term in months.
Overhead Rate	Insert the IDOT approved overhead rate in place at the time of this agreement.
Start Date	Insert the start date of this agreement.
Complexity Factor	Insert the complexity factor assigned to this project. A complexity factor is assigned to the project, not to the LPA.
Raise Date	Insert the initial raise date.
% of Raise	No entry necessary, this is set at two percent.
End Date	No entry necessary, this field is automatically calculated based on the start date and contract term.
Escalation Per Year	No entry necessary, all fields are automatically calculated based on contract term, start date, and raise date.

RATES TAB

Local Public Agency	This field is automatically completed based on entries on the Escalation Tab.
County	This field is automatically completed based on entries on the Escalation Tab.
Section Number	This field is automatically completed based on entries on the Escalation Tab.
Maximum Payroll Rate	This is the maximum payroll rate allowable on this agreement.
Escalation Factor	This field is automatically completed based on entries on the Escalation Tab.
Classification	List each payroll classification who will work on this project, on a separate line.
IDOT Payroll Rates on File	Enter the IDOT approved rate for the classification listed to the left.
Calculated Rate	No entry necessary, this field is automatically completed based on the approved rate times the escalation factor.

SUBCONSULTANTS TAB

Local Public Agency	This field is automatically completed based on entries on the Escalation Tab.
County	This field is automatically completed based on entries on the Escalation Tab.
Section Number	This field is automatically completed based on entries on the Escalation Tab.
Name	List subconsultants that will be used on this project, using a separate line for each.
Direct Labor Total	Insert the direct labor for the consultant listed to the left.
Contribution to Prime Consultant	No entry necessary, this field is automatically completed. It is the Direct Labor Total times 10%.

COST EST TAB

Instructions for BLR 05514

Form instructions are not to be submitted with the form

Local Public Agency	This field is automatically completed based on entries on the Escalation Tab.
County	This field is automatically completed based on entries on the Escalation Tab.
Section Number	This field is automatically completed based on entries on the Escalation Tab.
Overhead Rate	This field is automatically completed based on entries on the Escalation Tab.
Complexity Factor	This field is automatically completed based on entries on the Escalation Tab.
Task	Insert the tasks required for this project, use a separate line for each task.
Staff hours	No entry necessary, this is automatically completed based on entries under the AVG tabs for each task. It will be the total hours for all payroll classifications for the task listed to the left.
Payroll	No entry necessary, this is automatically completed based on entries under the AVG tabs for each task. It will be the total payroll for the task listed to the left.
Overhead & Fringe Benefits	No entry necessary, this is automatically completed based on payroll listed to the left times the overhead rate.
Direct Costs	Insert the amount of direct costs for the task listed to the left.
Fixed Fee	No entry necessary, this is automatically completed based the lessor of minimum of the payroll plus the overhead and fringe benefits times fifteen percent, or 0.33 plus the complexity factor times .
Services by Others	Insert the amount of services by others for the task listed to the left.
Total	No entry necessary, this is the total of the payroll, overhead & fringe benefits, direct costs, fixed fee and services by others.
% of Grand Total	No entry necessary, this is the % of the grand total for the task listed to the left.
Subconsultant DL	This field is automatically completed based on the information completed on the SUB tab.
Totals	Totals fields are automatically completed based on the entries in the column above.

AVG 1 - AVG 5 TAB

Local Public Agency	This field is automatically completed based on entries on the Escalation Tab.
County	This field is automatically completed based on entries on the Escalation Tab.
Section Number	This field is automatically completed based on entries on the Escalation Tab.
Payroll Classification	This field is automatically completed based on entries on the Rates Tab.
Avg Hourly Rates	This field is automatically completed based on entries on the Rates Tab for the classification listed to the left, no payroll classification listed to the left.
Total Project Rates:	
Hours	This is the total hours based on entries under each task for the payroll entry is necessary.
% Part.	No entry is necessary, this is the percent of participation for the payroll classification listed to the left, of the total project.
Wgtd Avg	No entry is necessary, this is the weighted average for the payroll classification listed to the left.
Task	Each task will automatically be completed based on task entries on the COST EST tab.
Hours	Enter the number of hours the payroll classification listed to the left will perform for the task listed above.
% Part.	No entry necessary, this is the percent of participation for the payroll classification listed to the left for the task listed above.
Wgtd Avg	No entry necessary, this is the weighted average for the payroll classification listed to the left for the task above.
Totals	No entry necessary, this is the sum of the column above.

Local Public Agency	County	Section Number

**Exhibit C
Direct Costs Check Sheet**

List ALL direct costs required for this project. Those not listed on the form will not be eligible for reimbursement by the LPA on this project.

Item	Allowable	Quantity	Contract Rate	Total
<input type="checkbox"/> Lodging (per GOVERNOR'S TRAVEL CONTROL BOARD)	Actual cost (Up to state rate maximum)			
<input type="checkbox"/> Lodging Taxes and Fees (per GOVERNOR'S TRAVEL CONTROL BOARD)	Actual Cost			
<input type="checkbox"/> Air Fare	Coach rate, actual cost, requires minimum two weeks' notice, with prior IDOT approval			
<input type="checkbox"/> Vehicle Mileage (per GOVERNOR'S TRAVEL CONTROL BOARD)	Up to state rate maximum			
<input type="checkbox"/> Vehicle Owned or Leased	\$32.50/half day (4 hours or less) or \$85/full day			
<input type="checkbox"/> Vehicle Rental	Actual cost (Up to \$55/day)			
<input type="checkbox"/> Tolls	Actual cost			
<input type="checkbox"/> Parking	Actual cost			
<input type="checkbox"/> Overtime	Premium portion (Submit supporting documentation)			
<input type="checkbox"/> Shift Differential	Actual cost (Based on firm's policy)			
<input type="checkbox"/> Overnight Delivery/Postage/Courier Service	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Copies of Deliverables/Mylars (In-house)	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Copies of Deliverables/Mylars (Outside)	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Project Specific Insurance	Actual Cost			
<input type="checkbox"/> Monuments (Permanent)	Actual Cost			
<input type="checkbox"/> Photo Processing	Actual Cost			
<input type="checkbox"/> 2-Way Radio (Survey or Phase III Only)	Actual Cost			
<input type="checkbox"/> Telephone Usage (Traffic System Monitoring Only)	Actual Cost			
<input type="checkbox"/> CADD	Actual cost (Max \$15/hour)			
<input type="checkbox"/> Web Site	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Advertisements	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Public Meeting Facility Rental	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Public Meeting Exhibits/Renderings & Equipment	Actual cost (Submit supporting documentation)			
<input type="checkbox"/> Recording Fees	Actual Cost			
<input type="checkbox"/> Transcriptions (specific to project)	Actual Cost			
<input type="checkbox"/> Courthouse Fees	Actual Cost			
<input type="checkbox"/> Storm Sewer Cleaning and Televising	Actual cost (Requires 2-3 quotes with IDOT approval)			
<input type="checkbox"/> Traffic Control and Protection	Actual cost (Requires 2-3 quotes with IDOT approval)			
<input type="checkbox"/> Aerial Photography and Mapping	Actual cost (Requires 2-3 quotes with IDOT approval)			
<input type="checkbox"/> Utility Exploratory Trenching	Actual cost (Requires 2-3 quotes with IDOT approval)			
<input type="checkbox"/> Testing of Soil Samples	Actual Cost			
<input type="checkbox"/> Lab Services	Actual Cost (Provide breakdown of each cost)			
<input type="checkbox"/> Equipment and/or Specialized Equipment Rental	Actual Cost (Requires 2-3 quotes with IDOT approval)			
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
Total Direct Costs				

ATTACHMENT 2

DBE Utilization Plan

Certificate of Insurance

Identification of Sub-Contractors/Suppliers/Sub-Consultants *

Economic Disclosures Statement *

*Fillable PDF available here:

<https://www.cookcountyil.gov/service/forms-affidavits>



LISA ALEXANDER

DEPUTY DIRECTOR

118 N. Clark, County Building, Room 1020 • Chicago, Illinois 60602 • (312) 603-5502

August 17, 2021

TONI PRECKWINKLE

PRESIDENT

**Cook County Board
of Commissioners**

BRANDON JOHNSON

1st District

DENNIS DEER

2nd District

BILL LOWRY

3rd District

STANLEY MOORE

4th District

DEBORAH SIMS

5th District

DONNA MILLSER

6th District

ALMA E. ANAYA

7th District

LUIS ARROYO, JR

8th District

PETER N. SILVESTRI

9th District

BRIDGET GAINER

10th District

JOHN P. DALEY

11th District

BRIDGET DEGNEN

12th District

LARRY SUFFREDIN

13th District

SCOTT R. BRITTON

14th District

KEVIN B. MORRISON

15th District

FRANK AGUILAR

16th District

SEAN M. MORRISON

17th District

Mr. Raffi Sarrafian
Chief Procurement Officer
118 N. Clark Street
County Building-Room 1018
Chicago, IL 60602

Re: Contract No. 1655-15826 (Amendment No.2)
Construction Management Services
Department of Transportation and Highways

Dear Mr. Sarrafian

The Office of Contract Compliance is in receipt of the above-reference contract amendment and has reviewed it for compliance with the Minority- and Women- owned Business Enterprises (MBE/WBE) Ordinance. After careful review, it has been determined this amendment is responsive to the Ordinance.

Bidder: H.W. Lochner Company
Original Contract Value: 2,500,000.00
Increase Contract Value: \$1,500,000.00 (Amendment No. 1)
New Contract Value: \$4,000,000.00
Contract Extension: 12 Months
New Contract Term: December 1, 2020 through November 30, 2021
Increased Contract Value: \$1,000000.00 (Amendment No. 2)
New Contract Value: \$5,000000.00
Contract Goal: 35% DBE

<u>MBE/WBE</u>	<u>Status</u>	<u>Certifying Agency</u>	<u>Commitment* (Direct)</u>
Illinois Construction	DBE-8	(METRA)	8.00%
Atlas Engineering Group	DBE-9	(IDOT)	8.00%
d' Escoto, Inc.	DBE-9	City of Chicago	6.00%
CKL Engineering	DBE-9	(IDOT)	8.00%
The Roderick Group, Inc.	DBE-6	City of Chicago	6.40%
Apex Consulting Engineering	DBE-6	(IDOT)	4.00%
Synnov Group, Inc	DBE-8	(PACE)	6.00%
Urban GIS	DBE-6	(IDOT)	1.00%
			47.40% Total

*Commitment percentages are based on the amendment amount.

Original MBE/WBE forms were used in the determination of the responsiveness of this contract.

Sincerely,

Lisa Alexander
Deputy Director

LA/smp

cc: Mike Schieve, OCPO
Cho Ng, DOTD

DBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all DBE firms included in this Plan are certified DBEs pursuant to the requirements of the federal regulation, 49 CFR Part 26.

I. BIDDER/PROPOSER DBE STATUS: (check the appropriate line)

- Bidder/Proposer is a certified DBE firm. (If so, attach copy of current Letter of Certification)
- Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountyil.gov/contractcompliance)
- Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with DBE partners, but will utilize DBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. Direct Participation of DBE Firms Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

DBE Firm: Illinois Construction & Environmental Consulting, Inc.

Address: 2399 Foster Avenue, Wheeling, IL 60090

E-mail: chamano@iceillinois.com

Contact Person: Clayton Hamano Phone: 847-542-7500

Dollar Amount Participation: \$ 400,000.00

Percent Amount of Participation: 8.0% %

*Letter of Intent attached? Yes No

*Current Letter of Certification attached? Yes No

DBE Firm: Atlas Engineering Group, Ltd.

Address: 3100 Dundee Rd, Suite 502, Northbrook, IL 60062

E-mail: nhomedi@aegroupltd.com

Contact Person: Natalia Homedi Phone: 847-753-8020

Dollar Amount Participation: \$ 430,000.00

Percent Amount of Participation: 8.0% %

*Letter of Intent attached? Yes No

*Current Letter of Certification attached? Yes No

Attach additional sheets as needed.

*** Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.**

DBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all DBE firms included in this Plan are certified DBEs pursuant to the requirements of the federal regulation, 49 CFR Part 26.

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- Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs . (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountyil.gov/contractcompliance)
- Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with DBE partners, but will utilize DBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. Direct Participation of DBE Firms Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

d'Escoto, Inc.
 DBE Firm: _____
 Address: **420 North Wabash, Suite 200, Chicago, IL 60611**

 E-mail: **fdescoto@descotoinc.com**

 Contact Person: **Frederico d'Escoto** Phone: **312-787-0707**

 Dollar Amount Participation: \$ **\$300,000.00**

 Percent Amount of Participation: **6.0%** %

 *Letter of Intent attached? Yes No _____
 *Current Letter of Certification attached? Yes No _____

Apex Consulting Engineers, LLC
 DBE Firm: _____
 Address: **111 E. Wacker Drive, Suite 520, Chicago, IL 60601**

 E-mail: **dbrazil@apexconsults.com**

 Contact Person: **Delano Brazil** Phone: **312-977-0660**

 Dollar Amount Participation: \$ **\$200,000.00**

 Percent Amount of Participation: **4.0%** %

 *Letter of Intent attached? Yes No _____
 *Current Letter of Certification attached? Yes No _____

Attach additional sheets as needed.

*** Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.**

DBE UTILIZATION PLAN - FORM 1

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- Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountyil.gov/contractcompliance)
- Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with DBE partners, but will utilize DBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. Direct Participation of DBE Firms Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

DBE Firm: CKL Engineers, LLC
 Address: 700 N Green Street, Suite 204, Chicago, IL 60624
 E-mail: mwhiteside@ckleng.com
 Contact Person: Mae Whiteside Phone: 312-763-2989
 Dollar Amount Participation: \$ 400,000.00
 Percent Amount of Participation: 8% %
 *Letter of Intent attached? Yes X No _____
 *Current Letter of Certification attached? Yes X No _____

DBE Firm: Ardmore Roderick
 Address: 1500 W. Carroll Avenue, Suite 300, Chicago, IL 60607
 E-mail: rashod@ardmoreroederick.com
 Contact Person: Rashod Johnson Phone: 312-795-1400
 Dollar Amount Participation: \$ 320,000.00
 Percent Amount of Participation: 6.4% %
 *Letter of Intent attached? Yes X No _____
 *Current Letter of Certification attached? Yes X No _____

Attach additional sheets as needed.

*** Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.**

DBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all DBE firms included in this Plan are certified DBEs pursuant to the requirements of the federal regulation, 49 CFR Part 26.

I. BIDDER/PROPOSER DBE STATUS: (check the appropriate line)

- Bidder/Proposer is a certified DBE firm. (If so, attach copy of current Letter of Certification)
- Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountyil.gov/contractcompliance)
- Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with DBE partners, but will utilize DBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. Direct Participation of DBE Firms Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

DBE Firm: Synnov Group, Inc.
 Address: 8604 W. Catalpa, Suite 901, Chicago, IL 60656
 E-mail: asha.singh@synnovgroup.com
 Contact Person: Asha Singh Phone: 312-929-2217
 Dollar Amount Participation: \$ 300,000.00
 Percent Amount of Participation: 6.0% %
 *Letter of Intent attached? Yes No
 *Current Letter of Certification attached? Yes No

DBE Firm: Urban GIS, Inc.
 Address: 171 N. Aberdeen Street, Suite 400, Chicago, IL 60607
 E-mail: ks@urbangis.com
 Contact Person: Keath Searles Phone: 312- 525-8400
 Dollar Amount Participation: \$ 50,000.00
 Percent Amount of Participation: 1.0% %
 *Letter of Intent attached? Yes No
 *Current Letter of Certification attached? Yes No

Attach additional sheets as needed.

*** Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid.**

DBE LETTER OF INTENT - FORM 2

DBE Firm: Synnov Group, Inc.

Certifying Agency: PACE

Contact Person: Asha Singh

Address: 8604 W Catalpa, Suite 901

Certification Expiration Date: July 15, 2022

City/State: Chicago, IL Zip: 60656

Phone: 312- 929-2217 Fax: NA

Bid/Proposal/Contract #: 1655 - 158 2 6

Email: asha.singh@synnovgroup.com

FEIN #: 46-0708071

Participation: Direct Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

No Yes – Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Construction inspection services

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$300,000.00 / 6.0% /According to Consultant Agreement dated February 27, 201 8.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Asha Singh
Signature (DBE)

Alan C. Hasler
Signature (Prime Bidder/Proposer)

ASHA SINGH
Print Name

Alan C. Hasler
Print Name

Synnov Group, Inc.
Firm Name

H.W. Lochner, Inc.
Firm Name

8-12-2021
Date

8/13/2021
Date

Subscribed and sworn before me
this 12th day of August, 2021.

Subscribed and sworn before me
this 13th day of August, 2021.

Notary Public *April R Blair*

Notary Public *Laurie Anita Davis*



SEAL



SEAL

DBE LETTER OF INTENT - FORM 2

DBE Firm: CKL Engineers, LLC
Contact Person: Mae Whiteside
Address: 700 N Green Street, Suite 204
City/State: Chicago, IL Zip: 60642
Phone: 312-763-2989 Fax: 312-277-3867
Email: mwhiteside@ckleng.com

Certifying Agency: City of Chicago
Certification Expiration Date: 5/1/2026
Bid/Proposal/Contract #: 1655-15826
FEIN #: 26-4682142

Participation: Direct Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

No Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Construction inspection services

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$400,000.00 / 8% / According to Consultant Agreement dated February 27, 2018.

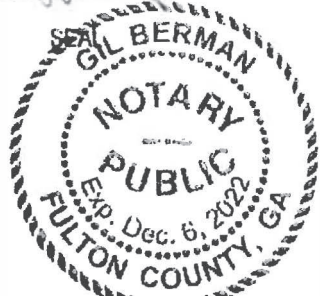
THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Mae Whiteside
Signature (DBE)
Mae C Whiteside
Print Name
CKL Engineers, LLC
Firm Name
8/12/2021
Date

Alan C. Hasler
Signature (Prime Bidder/Proposer)
Alan C. Hasler
Print Name
H.W. Lochner, Inc.
Firm Name
8/13/2021
Date

Subscribed and sworn before me
this 12th day of August, 2021
Notary Public [Signature]

Subscribed and sworn before me
this 13th day of August, 2021
Notary Public Laurie Anita Davis



DBE LETTER OF INTENT - FORM 2

DBE Firm: d'Escoto, Inc.

Certifying Agency: City of Chicago

Contact Person: Federico d'Escoto

Certification Expiration Date: 4/1/2021

Address: 1200 N Ashland Ave 6th FL

City/State: Chicago, IL Zip: 60622

Bid/Proposal/Contract #: 1655-15826

Phone: 312-787-0707 Fax: 312-787-7322

FEIN #: 36-2949777

Email: fdescoto@descotoinc.com

Participation: Direct Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

No Yes -- Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Construction inspection services

Indicate the **Dollar Amount, Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

\$300,000 / TBD / According to Consultant Agreement dated February 27, 2018.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (DBE)

Federico d'Escoto

Print Name

d'Escoto, Inc.

Firm Name

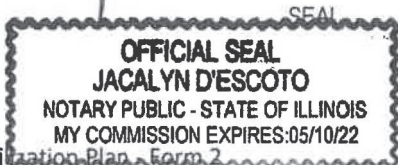
8/11/2021

Date

Subscribed and sworn before me

this 11th day of August, 2021

Notary Public Jacalyn d'Escoto



Signature (Prime Bidder/Proposer)

Alan C. Hasler

Print Name

H.W. Lochner, Inc.

Firm Name

8/13/2021

Date

Subscribed and sworn before me

this 13th day of August, 2021

Notary Public Laurie Anita Davis



DBE LETTER OF INTENT - FORM 2

DBE Firm: Illinois Construction & Environmental Consulting, Inc.

Certifying Agency: Metra

Contact Person: Clayton Hamano

Certification Expiration Date: 6/1/22

Address: 2399 Foster Avenue

City/State: Wheeling, IL Zip: 60090

Bid/Proposal/Contract #: 1655-15826

Phone: 847-542-7500 Fax: 224-735-2946

FEIN #: 46-5433341

Email: chamano@iceillinois.com

Participation: [X] Direct [] Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

[X] No [] Yes - Please attach explanation. Proposed Subcontractor(s):

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Construction inspection and materials testing services.

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services: \$400,000 / 8% / According to Consultant Agreement dated February 27, 2018.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (DBE) Clayton Hamano
Print Name Illinois Construction & Environmental Consulting, Inc.
Firm Name 8/12/21
Date

Signature (Prime Bidder/Proposer) Alan C. Hasler
Print Name H.W. Lochner, Inc.
Firm Name 8/13/2021
Date

Subscribed and sworn before me this 12th day of August, 2021.

Subscribed and sworn before me this 13th day of August, 2021.

Notary Public Maria Kocherova

Notary Public Laurie Anita Davis



DBE LETTER OF INTENT - FORM 2

DBE Firm: Ardmore Roderick
Contact Person: Rashod Johnson
Address: 1500 W. Carroll Avenue, Suite 300
City/State: Chicago, IL Zip: 60607
Phone: 312-763-2989 Fax: _____
Email: rashod@ardmoreroederick.com

Certifying Agency: City of Chicago
Certification Expiration Date: October 15, 2021
Bid/Proposal/Contract #: 1655-15826
FEIN #: 20-3036399

Participation: Direct Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

No Yes – Please attach explanation. Proposed Subcontractor(s): _____

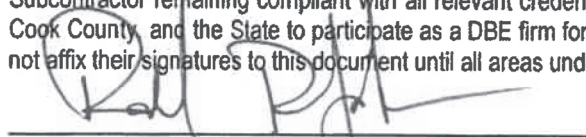
The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(if more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Construction inspection services

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$320,000.00 / 6.4% / According to Consultant Agreement dated February 26, 2018.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.



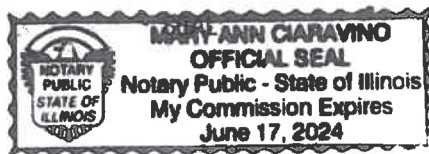
Signature (DBE)
Rashod R. Johnson
Print Name

Ardmore Roderick
Firm Name

8-13-21
Date

Subscribed and sworn before me
this 13th day of August, 2021.

Notary Public Mary Ann Ciavino





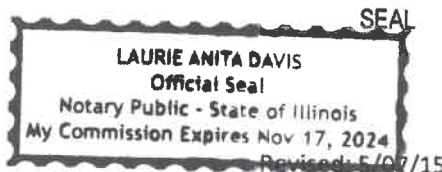
Signature (Prime Bidder/Proposer)
Alan C. Hasler
Print Name

H. W. Lochner, Inc.
Firm Name

8/13/2021
Date

Subscribed and sworn before me
this 13th day of August, 2021.

Notary Public Laurie Anita Davis



DBE LETTER OF INTENT - FORM 2

DBE Firm: Urban GIS, Inc.
Contact Person: Keath Searles
Address: 171 N Aberdeen Street, Suite 400
City/State: Chicago, IL Zip: 60607
Phone: 312-525-8400 Fax: NA
Email: ks@urbangis.com

Certifying Agency: IDOT
Certification Expiration Date: Jan 1, 2022
Bid/Proposal/Contract #: 1655-15826
FEIN #: 51-0637535

Participation: Direct Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

No Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

GIS services

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$50,000.00 / TBD / According to Consultant Agreement dated March 4, 2019.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Keith A. Searles
Signature (DBE)

Keith A. Searles
Print Name

Urban GIS, Inc.
Firm Name

8/13/2021
Date

Subscribed and sworn before me

this 13 day of August, 2021

Notary Public Danielle Mitchell

Alan C. Hasler
Signature (Prime Bidder/Proposer)

Alan C. Hasler
Print Name

H.W. Lochner, Inc.
Firm Name

8/13/2021
Date

Subscribed and sworn before me

this 13th day of August, 2021

Notary Public Laurie Anita Davis



DBE LETTER OF INTENT - FORM 2

DBE Firm: Atlas Engineering Group, Ltd.

Certifying Agency: Illinois Department of Transportation

Contact Person: Natalia Homedi

Certification Expiration Date: 09/01/2021

Address: 3100 Dundee Road, Suite 502

City/State: Northbrook, IL Zip: 60062

Bid/Proposal/Contract #: 1655-15826

Phone: 847-753-8020 Fax: 847-753-8023

FEIN #: 14-1990721

Email: nhomedi@aegroupltd.com

Participation: Direct Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

No Yes - Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Construction engineering services.

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$430,000.00 / 8.60% / According to Consultant Agreement date February 7, 2018

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fees/Cost were completed.

Natalia A. Homedi
Signature (DBE)

Natalia Homedi, PE
Print Name

Atlas Engineering Group, Ltd.
Firm Name

08/12/2021
Date

Subscribed and sworn before me

this 12th day of August, 2021.

Notary Public: Jeffrey J. Kraines

Alan C. Hasler
Signature (Prime Bidder/Proposer)

Alan C. Hasler
Print Name

H.W. Lochner, Inc.
Firm Name

8/13/2021
Date

Subscribed and sworn before me

this 13th day of August, 2021.

Notary Public: Laurie Anita Davis

SEAL



SEAL



DBE LETTER OF INTENT - FORM 2

DBE Firm: APEX Consulting Engineers, LLC
Contact Person: Delano Brazil, P.E.
Address: 111 East Wacker Drive, Suite 430
City/State: Chicago Zip: 60601
Phone: 312-977-0600 Fax: 312-977-0661
Email: dbrazil@apexconsults.com

Certifying Agency: Illinois UCP
Certification Expiration Date: May 1, 2022
Bid/Proposal/Contract #: 1655-15826
FEIN #: 20-1921524

Participation: [X] Direct [] Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

[X] No [] Yes - Please attach explanation. Proposed Subcontractor(s):

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: (If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)

Construction inspection services

Indicate the Dollar Amount, Percentage, and the Terms of Payment for the above-described Commodities/ Services:

\$200,000.00 / TBD / According to Consultant Agreement dated February 26, 2018.

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Federal, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (DBE)
Delano E. Brazil, P.E.
Print Name
APEX Consulting Engineers, LLC
Firm Name
August 12, 2021
Date

Signature (Prime Bidder/Proposer)
Alan C. Hasler
Print Name
H.W. Lochner, Inc.
Firm Name
8/13/2021
Date

Subscribed and sworn before me
this 12 day of August, 2021.

Subscribed and sworn before me
this 13th day of August, 2021.

Notary Public [Signature]

Notary Public [Signature]



SEAL



Rocky Donahue
Executive Director

June 4, 2021

Ms. Asha Singh
Synnov Group Inc
8604 West Catalpa Ave
Suite 901
Chicago, IL 60656

Dear Ms. Singh:

Pace has reviewed your No Change Affidavit and supporting documentation and is pleased to inform you that your firm continues to meet the Disadvantaged Business Enterprise (DBE) program certification eligibility standards set forth in 49 CFR Part 26. Your next No Change Affidavit is due **July 15, 2022**. A notification will be sent to you sixty (60) days prior to this date.

This certification allows your firm to participate as a DBE in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in your certification that affects your ability to meet size standards, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency within thirty (30) days of the occurrence of the change. Failure to provide this information is a ground for removal of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firm's name will appear in the IL UCP Directory, which is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE firms. The directory can be accessed at <https://pace.diversitycompliance.com/>. Your firm's name will appear in the Directory under the commodity codes and specialties listed on the following page.

Your participation on contracts will only be credited toward DBE contract goals when your firm performs in a Commercially Useful Function (CUF) in its approved area(s) of specialty.

Sincerely,

Carrie Horner
Pace Disadvantaged Business Enterprise
Diversity Programs



Rocky Donahue
Executive Director

Disadvantaged Business Enterprise (DBE) Certification

June 4, 2021
Synnov Group Inc
8604 West Catalpa Ave
Suite 901
Chicago, IL 60656

Your firm's name will appear in the IL UCP DBE Directory, which is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE firms. The directory can be accessed at <https://pace.diversitycompliance.com/>. Your firm's name will appear in the Directory under the following commodity codes and specialties:

Commodity Codes:

NAICS 236220: CONSTRUCTION MANAGEMENT, COMMERCIAL AND INSTITUTIONAL BUILDING
NAICS 237990: CONSTRUCTION MANAGEMENT, MASS TRANSIT

In the following Specialties:

NAICS Code 236220 Construction management, commercial and institutional building. Specialty: Project controls, cost estimating, scheduling, project and program management; NAICS Code 237990 Construction management, mass transit. Specialty: Project controls, cost estimating, scheduling, project and program management



Illinois Department of Transportation

Office of Business & Workforce Diversity
2300 South Dirksen Parkway / Springfield, Illinois 62764

July 1, 2021

CERTIFIED-RETURN RECEIPT REQUESTED

Natalia Homedi
Atlas Engineering Group, Ltd.
3100 Dundee Rd., Ste 502
Northbrook, IL 60062

Dear Natalia Homedi:

Your firm is currently certified as a Disadvantaged Business Enterprise (DBE) with the Illinois Unified Certification Program (IL UCP) as provided under 49 CFR Part 26.83(j). Agency records indicate your firm's certification anniversary date is **September 1, 2021**. As a condition of continued certification, a firm must submit a *No Change Affidavit* to its host agency every year by its anniversary date. The *No Change Affidavit* and supporting documentation must be completed and returned to the address below within **sixty (60) calendar days** of the date of this letter.

Illinois Department of Transportation
Bureau of Small Business Enterprises
Attn: Certification Section
2300 South Dirksen Parkway, Room 319
Springfield, IL 62764

The affidavit specifically affirms that your firm continues to meet small business size standards and is supported by documentation of your firm's size and gross receipts. Furthermore, if there is any change in circumstances during the course of your certification that affects your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency within thirty (30) days of the occurrence of the change. Failure to provide this information is grounds for removal of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Failure to submit your affidavit within the specified time period will result in the removal of your DBE certification.

If you have any questions or need assistance, please call (217) 782-5490.

Sincerely,

A handwritten signature in black ink that reads "Tony L. Day".

Tony L. Day
DBE Certification Section Manager
Bureau of Small Business Enterprises

Enclosure



CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

FEB 22 2021

Rashod Johnson
The Roderick Group, Inc., d/b/a Ardmore Roderick
1500 West Carroll Ave., Suite 300
Chicago, Illinois 60607

Dear Mr. Johnson:

The City of Chicago has reviewed your annual *No Change Affidavit* and supporting documentation and is pleased to inform you that your firm **The Roderick Group, Inc., d/b/a Ardmore Roderick** continues to meet the **Disadvantaged Business Enterprise ("DBE")** program certification eligibility standards set forth in 49 CFR Part 26. Your next No Change Affidavit is due **October 15, 2021**.

This certification allows your firm to participate as a **DBE** in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in circumstances during the course of your certification period that affect your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency within **thirty (30) days** of the occurrence of the change. Failure to provide this information is a ground for denial of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firm's name will appear in the IL UCP DBE Directory under the following category name(s):

NAICS Code(s)

236220 - Construction Management, Commercial and Institutional Building
237130 - Construction Management, Power and Communication Transmission Line
237310 - Construction Management, Highway, Road, Street and Bridge
237990 - Construction Management, Mass Transit
541330 - Civil Engineering Services
541330 - Engineering Design Services
541330 - Engineering Services
541370 - Surveying and Mapping Services (except Geophysical)
541611 - Administrative and General Management Consulting Services

The Directory is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE, and ACDBE firms. The Directory can be accessed on the Internet at:
<https://webapps.dot.illinois.gov/UCP/ExternalSearch>

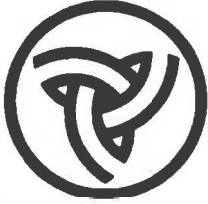
Your participation on contracts will only be credited toward **DBE** contract goals when you perform in your firm's approved area(s) of specialty. Credit for participation in an area outside your specialty requires prior approval (verification of resources, expertise, and corresponding support documentation, etc.).

Sincerely,



Shannon E. Andrews
Chief Procurement Officer

SEA/si



Illinois Department of Transportation

Office of Business & Workforce Diversity
2300 South Dirksen Parkway / Springfield, Illinois 62764

September 11, 2020

CERTIFIED-RETURN RECEIPT REQUESTED

Ms. Mae C. Whiteside
Cheri K. Lewis Engineers, LLC
dba CKL Engineers, LLC
700 N. Green St., Ste. 204
Chicago, IL 60642

Dear Ms. Whiteside:

The Illinois Department of Transportation (IDOT) has approved the *No Change Affidavit* for Cheri K. Lewis Engineers, LLC dba CKL Engineers, LLC and determined that the firm continues to meet DBE eligibility standards to perform work towards DBE goals.

To remain certified and in good standing, you must annually submit a *No Change Affidavit*. Your firm's next affidavit is due on **October 1, 2021**. IDOT will send an affidavit form 60 days prior to that date.

Should the submitted information change, you are required to notify IDOT's Bureau of Small Business Enterprises within 30 days of the change.

Note: Pursuant to 49 CFR Part 26.83(i), whenever there is a change in circumstances affecting your firm's eligibility status, your firm must provide written notification to IDOT within 30 days of the occurrence of the change. If you fail to make timely notification, it may result in the loss of your firm's certification.

If you have any questions, please contact the Bureau of Small Business Enterprises at (217) 782-5490.

Sincerely,

A handwritten signature in black ink, appearing to read 'Debra A. Clark'.

Debra A. Clark, Bureau Chief
Bureau of Small Business Enterprises



CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

JAN 19 2021

Federico d'Escoto
d'Escoto, Inc.
1200 N. Ashland Ave., 6th Fl
Chicago, IL 60622

RE; Change in NAICS Codes

Dear Mr. d'Escoto:

The City of Chicago has reviewed your annual *No Change Affidavit* and supporting documentation and is pleased to inform you that your firm, **d'Escoto, Inc.**, continues to meet the **Disadvantaged Business Enterprise ("DBE")** program certification eligibility standards in the following NAICS codes as set forth in 49 CFR Part 26. Your next No Change Affidavit is due **April 1, 2021**.

This certification allows your firm to participate as a **DBE** in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in circumstances during the course of your certification period that affect your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency within **thirty (30) days** of the occurrence of the change. Failure to provide this information is a ground for denial of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firm's name will appear in the IL UCP DBE Directory under the following category name(s):

NAICS Code(s)

- 236210 - Construction Management, Industrial Building**
- 236220 - Construction Management, Commercial and Industrial Building**
- 237310 - Construction Management, Highway, Road, Street and Bridge**
- 237110 - Construction Management, Water and Sewage Treatment Plant**
- 237990 - Construction Management, Mass Transit**
- 237990 - Construction Management, Outdoor Recreation Facility**
- 237990 - Construction Management, Tunnel**

Duca

- 541511 - Custom Computer Programming Services**
- 541512 - CAD (Computer-Aided Design) Systems Integration Design Services**
- 541512 - CAE (Computer-Aided Engineering) Systems Integration Design Services**
- 541512 - Computer Systems Design Services**
- 541519 - Other Computer Related Services**

The Directory is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE, and ACDBE firms. The Directory can be accessed on the Internet at: <https://webapps.dot.illinois.gov/UCP/ExternalSearch>

Your participation on contracts will only be credited toward **DBE** contract goals when you perform in your firm's approved area(s) of specialty. Credit for participation in an area outside your specialty requires prior approval (verification of resources, expertise, and corresponding support documentation, etc.).

Sincerely,



Shannon E. Andrews 
Chief Procurement Officer

SEA/cm



Illinois Department of Transportation

Office of Business & Workforce Diversity
2300 South Dirksen Parkway / Springfield, Illinois 62764

April 19, 2021

CERTIFIED-RETURN RECEIPT REQUESTED

Mr. Delano E. Brazil
Apex Consulting Engineers, L.L.C.
111 E. Wacker Dr., Ste. 430
Chicago, IL 60601

Dear Mr. Brazil:

The Illinois Department of Transportation (IDOT) has approved the *No Change Affidavit* for Apex Consulting Engineers, L.L.C. and determined that the firm continues to meet DBE eligibility standards to perform work towards DBE goals.

To remain certified and in good standing, you must annually submit a *No Change Affidavit*. Your firm's next affidavit is due on **May 1, 2022**. IDOT will send an affidavit form 60 days prior to that date.

Should the submitted information change, you are required to notify IDOT's Bureau of Small Business Enterprises within 30 days of the change.

Note: Pursuant to 49 CFR Part 26.83(i), whenever there is a change in circumstances affecting your firm's eligibility status, your firm must provide written notification to IDOT within 30 days of the occurrence of the change. If you fail to make timely notification, it may result in the loss of your firm's certification.

If you have any questions, please contact the Bureau of Small Business Enterprises at (217) 782-5490.

Sincerely,

A handwritten signature in black ink that reads "Tony L. Day".

Tony L. Day, Manager
DBE Certification Section
Bureau of Small Business Enterprises



Illinois Department of Transportation

Office of Business & Workforce Diversity
2300 South Dirksen Parkway / Springfield, Illinois 62764

November 22, 2010

CERTIFIED-RETURN RECEIPT REQUESTED

Delano E. Brazil
Apex Consulting Engineers, L.L.C.
111 E. Wacker Dr., Ste. 520
Chicago, IL 60601

Dear Delano E. Brazil:

The Illinois Department of Transportation (IDOT), your host agency, has reviewed your *Continued DBE Eligibility Affidavit (CEA)* and supporting documentation and is pleased to inform you that your firm continues to meet the Disadvantaged Business Enterprise (DBE) program certification eligibility standards set forth in 49 CFR Part 26.

This certification allows your firm to participate as a DBE in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra, and Pace.

Your certification is approved for a five (5) year period, commencing on **October 19, 2010**. To remain certified with the IL UCP during the five-year period, you must submit a *No Change Affidavit* each year. Notification will be sent to you sixty (60) days prior to the anniversary date of your certification. It is your responsibility to ensure that your certification is kept current by submitting the required information in a timely manner. Failure to provide this information is a ground for removal of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

If there is any change in circumstances that affects your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your application, you must provide written notification to this agency within thirty (30) days of the occurrence of the change. Failure to provide this information is a ground for removal of certification pursuant to 49 CFR 26.83(i).

Your firm's name will appear in the IL UCP DBE Directory in the following area(s) of specialty:

STUDIES: TRAFFIC
ROADS AND STREETS
HIGHWAY STRUCTURE: SIMPLE
HIGHWAY STRUCTURE: TYPICAL
TRAFFIC SIGNALS
CONSTRUCTION INSPECTION
ROUTE SURVEYS
LAND SURVEYS

This Directory is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE firms. The Directory can be accessed on the Internet at www.dot.il.gov/ucp/ucpdirectorybyname.pdf.

Your participation on contracts will only be credited toward DBE contract goals when you perform in your firm's approved area(s) of specialty. Credit for participation in an area outside your specialty requires prior approval (verification of resources, expertise, and corresponding support documentation, etc.).

Please note:

- This certification does not attest to your firm's abilities to perform in the approved work category(ies).
- Your certification may be revoked if your firm is found to be involved in bidding or contractual irregularities or has violated DBE program regulations pursuant to 49 CFR Part 26.107.
- For work to count toward a DBE contract goal, the DBE firm must perform a "commercially useful function" pursuant to 49 CFR Part 26.55. A DBE is considered to perform a commercially useful function when it is responsible for execution of a distinct element of the work of a contract and carrying out its responsibilities by actually performing, managing, and supervising the work involved.

Please direct all inquiries and any questions to this agency at (217) 782-5490.

Sincerely,



Debra A. Clark, Manager
Certification Section
Bureau of Small Business Enterprises

Enclosure



Illinois Department of Transportation

Apex Consulting Engineers, L.L.C.

is hereby certified as a

Disadvantaged Business Enterprise

This certificate is valid under current firm ownership and operational control only and supercedes any authorization or listing previously issued.

A handwritten signature in cursive script that reads "Gary Hannig".

Gary Hannig
Secretary

Illinois Department of Transportation

A handwritten signature in cursive script that reads "Carol Lyle".

Carol Lyle
Bureau Chief

Bureau of Small Business Enterprises

Effective the 19th day of October, 2010



Illinois Department of Transportation

Office of Business & Workforce Diversity
2300 South Dirksen Parkway / Springfield, Illinois 62764

January 8, 2021

CERTIFIED-RETURN RECEIPT REQUESTED

Mr. Keith A. Searles
Urban GIS, Inc.
171 N. Aberdeen St., Ste. 400
Chicago, IL 60607

Dear Mr. Searles:

The Illinois Department of Transportation (IDOT) has approved the *No Change Affidavit* for Urban GIS, Inc. and determined that the firm continues to meet DBE eligibility standards to perform work towards DBE goals.

To remain certified and in good standing, you must annually submit a *No Change Affidavit*. Your firm's next affidavit is due on **January 1, 2022**. IDOT will send an affidavit form 60 days prior to that date.

Should the submitted information change, you are required to notify IDOT's Bureau of Small Business Enterprises within 30 days of the change.

Note: Pursuant to 49 CFR Part 26.83(i), whenever there is a change in circumstances affecting your firm's eligibility status, your firm must provide written notification to IDOT within 30 days of the occurrence of the change. If you fail to make timely notification, it may result in the loss of your firm's certification.

If you have any questions, please contact the Bureau of Small Business Enterprises at (217) 782-5490.

Sincerely,

A handwritten signature in black ink, appearing to read 'Debra A. Clark'.

Debra A. Clark, Bureau Chief
Bureau of Small Business Enterprises



June 3, 2021

Clayton Hamano
Illinois Construction & Environmental Consulting, Inc.
2399 Foster Avenue
Wheeling, IL 60090

Dear Mr. Hamano:

Metra has reviewed your annual *No Change Affidavit* and supporting documentation and is pleased to inform you that your firm continues to meet the Disadvantaged Business Enterprise (DBE) program certification eligibility standards set forth in 49 CFR Subpart D 26.61. Your next No Change Affidavit is due **June 1, 2022**.

This certification allows your firm to participate as a DBE in the Illinois Unified Certification Program (IL UCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in your certification that affect your ability to meet size standards, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you must provide written notification to this agency within thirty (30) days of the occurrence of the change. Failure to provide this information is grounds for removal of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firms name will appear in the IL UCP directory, which is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE firms. The Directory can be accessed at www.metrarail.com under the Office of Diversity & Business Enterprise link. Your firm's name will appear in the IL UCP DBE Directory under the following:

NAICS Codes: 237310, 541330, 541380, 541620

Specialty: 237310 - Construction Management, Quality Control
541330 - Construction Engineering and Construction Inspection
541380 - Construction Material Testing and Project Management
541620 - Environmental Consulting Services

Your participation on contracts will only be credited toward DBE contract goals when your firm performs in a Commercially Useful Function (CUF) in its approved area(s) of specialty.

Sincerely,
Adriana S. Mena
2021.06.03 12:06:11 -05'00'
Adriana S. Mena
DBE Certification Specialist II
Office of Diversity & Business Enterprise



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/28/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Mesirow Insurance Services, Inc. 353 N Clark St 11th Floor Chicago, IL 60654	CONTACT NAME: Jennifer Lyons PHONE (A/C, No, Ext): (312) 595-8105 E-MAIL ADDRESS: Jennifer.Lyons@alliant.com	FAX (A/C, No):	
	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Charter Oak Fire Insurance Company	25615	
INSURED H. W. Lochner, Inc. 225 West Washington, 12th Floor Chicago, IL 60606	INSURER B : Travelers Property Casualty Company of America	25674	
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liab per policy form & XCU GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			630-8451B877-COF-21	5/1/2021	5/1/2022	EACH OCCURRENCE	\$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500,000
							MED EXP (Any one person)	\$ 10,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
							TTL GEN AGG PER	\$ 25,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			810-9M511530-21-43-G	5/1/2021	5/1/2022	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			ZUP-10P63854-21-NF	5/1/2021	5/1/2022	EACH OCCURRENCE	\$ 4,000,000
							AGGREGATE	\$ 4,000,000
								\$
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	UB-4K204617-21-43-G	5/1/2021	5/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER	
							E.L. EACH ACCIDENT	\$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Lochner Job 12662 Cook County, IL Contract 1655-15826 – Various Various (Task Order) Contract
 Construction Management Services under the direction of the Department of Transportation and Highways, Bureau of Construction for construction supervision, coordination, inspection and documentation.
 Cook County is to be named as additional insured on a primary, non-contributory basis for any liability arising directly or indirectly from the services on Commercial General Liability and Automobile Liability (primary and umbrella).

CERTIFICATE HOLDER

CANCELLATION

Cook County Office of Chief Procurement Officer 118 N. Clark St. Room 1018 Chicago, IL 60602	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

**Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form**

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

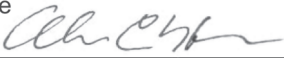
Bid/RFP/RFQ No.: 1655-15826	Date: 8/12/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be Illinois Construction & Environmental Co added or substitute: <input checked="" type="checkbox"/>
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Clayton Hamano Subconsultant:
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): chamano@iceillinois.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 2399 Foster Ave
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Wheeling, IL 60090
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 847-542-7500
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): December 1, 2021 to November 30, 2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$400,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor
Alan C. Hasler
Name
Vice President
Title

Prime Contractor Signature
8/13/2021
Date

**Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form**

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

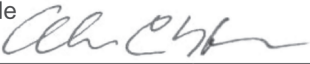
Bid/RFP/RFQ No.: 1655-15826	Date: 8/13/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Atlas Engineering Group, Ltd.
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Natalia Homedi
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): nhomedi@aegroupltd.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 3100 Dundee Rd Suite 502
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Northbrook, IL 60062
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 847-753-8020
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$430,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor
Alan Hasler
Name
Vice President
Title

Prime Contractor Signature

8/13/2021
Date

**Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form**

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

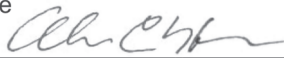
Bid/RFP/RFQ No.: 1655-15826	Date: 8/12/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: d'Escoto, Inc.
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Frederico d'Escoto
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): fdescoto@descotoinc.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 420 North Wabash, Suite 200
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60611
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 312-787-0707
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$300,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor	
Alan Hasler	
Name	
Vice President	
Title	
	8/13/2021
Prime Contractor Signature	Date

**Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form**

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.


Bid/RFP/RFQ No.: 1655-15826	Date: 8/13/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Apex Consulting Engineers, LLC
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Delano Brazil
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): dbrazil@apexconsults.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 111E. Wacker Drive, Suite 520
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60601
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 312-977-0660
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$200,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor
Alan Hasler
Name
Vice President
Title

Prime Contractor Signature
8/13/2021
Date

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

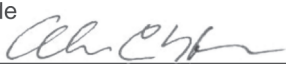
Bid/RFP/RFQ No.: 1655-15826	Date: 8/13/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: CKL Engineers, LLC
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Mae Whiteside
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): mwhiteside@ckleng.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 700 N Green Street, Suite 300
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60624
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 312-763-2989
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$400,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor	
Alan Hasler	
Name	
Vice President	
Title	
	8/13/2021
Prime Contractor Signature	Date

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 1655-15826	Date: 8/13/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Ardmore Roderick
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Rashod Joshson
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): rashod@ardmoreroderick.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 1500 W. Carroll Avenue, Suite 300
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60607
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 312-795-1400
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$320,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor	
Alan Hasler	
Name	
Vice President	
Title	8/13/2021
Prime Contractor Signature	Date

**Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form**

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

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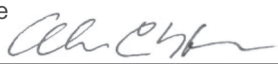
Bid/RFP/RFQ No.: 1655-15826	Date: 8/13/2021
Total Bid or Proposal Amount: \$5,000,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Synnov Group, Inc.
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Asha Singh
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): asha.singh@synnovgroup.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 8604 W Catalpa, Suite 901
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60656
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 312-929-2217
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$300,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor
Alan Hasler
Name
Vice President
Title

Prime Contractor Signature
8/13/2021
Date

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY:	
<input type="checkbox"/>	Disqualification
<input type="checkbox"/>	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

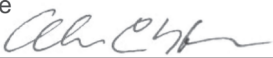
Bid/RFP/RFQ No.: 1655-15826	Date: 8/13/2021
Total Bid or Proposal Amount: \$1,500,000.00	Contract Title: Construction Management Services
Contractor: H.W. Lochner, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: Urban GIS, Inc.
Authorized Contact for Contractor: Alan Hasler	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Keath Searles
Email Address (Contractor): ahasler@hwlochner.com	Email Address (Subcontractor): ks@urbangis.com
Company Address (Contractor): 225 W. Washington Street 12th Floor	Company Address (Subcontractor): 171 N. Aberdeen Street, Suite 400
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60607
Telephone and Fax (Contractor): (312) 372-7346	Telephone and Fax (Subcontractor): 312-525-8400
Estimated Start and Completion Dates (Contractor): 12/1/2021 - 11/30/2022	Estimated Start and Completion Dates (Subcontractor): 12/1/2021 - 11/30/2022

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>
Construction Management Services	\$50,000.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

H.W. Lochner, Inc.

Contractor	
Alan Hasler	
Name	
Vice President	
Title	
	8/13/2021
Prime Contractor Signature	Date

Cook County Department of Transportation and Highways Company: H.W. Lochner, Inc. \$78.00 cap 3% Max escalation
 Contract 1655-15826- Construction Management Services-Variou Various (Task Order)
 Actual, Average and Maximum Hourly Rates by Personnel and Classification

8/13/2021

Classification	2021		2022	
	Avg. Rate	Max Rate	Avg. Rate	Max Rate
Principal	78.00	78.00	78.00	78.00
Senior Project Manager	78.00	78.00	78.00	78.00
Resident Engineer	65.38	72.12	67.34	74.28
Project Manager	69.18	76.47	71.26	78.00
Senior Structural Engineer	70.79	85.66	72.91	78.00
Senior Transportation Planner	77.00	78.00	78.00	78.00
Senior Planner	59.00	59.00	60.77	60.77
Project Engineer	53.66	58.70	55.27	60.46
Structural Engineer	40.09	55.22	41.29	56.88
Engineer	34.84	42.67	35.89	43.95
Senior Technician	59.57	64.06	61.36	65.98
Technician	37.49	37.49	38.61	38.61
GIS Analyst	28.30	28.30	29.15	29.15
CAD Technician	36.40	36.40	37.49	37.49
Clerical	37.08	39.05	38.19	40.22
Marketing	45.26	45.26	46.62	46.62
Clerk	37.00	37.00	38.11	38.11
Intern	19.33	21.00	19.91	21.63



**Cook County Department of Transportation and Highways
RFQ #1655-15826 - Construction Management Services, Various Various Project
Amendment 2 - Supplement**

Actual, Average and Maximum Hourly Rates by Personnel and Classification

Classification	2021		2022	
	Avg. Rate	Max. Rate	Avg. Rate	Max. Rate
Principal/Engineer VII	78.00	78.00	78.00	78.00
Project Manager	78.00	78.00	78.00	78.00
Engineer IV	51.09	60.00	52.62	60.00
Engineer III	42.18	50.00	43.45	50.00
Engineer II	34.42	45.00	35.45	45.00
Engineer	29.63	40.00	30.52	40.00
Engineer Tech	25.00	30.00	25.75	30.00
Administrative II	33.52	40.00	34.53	40.00

APEX Consulting Engineers, LLC.
\$78.00 cap | 3% Maximum Escalation

August 11, 2021

Cook County Department of Transportation and Highways
 RFQ # 1655-15826 Construction Management Services Various Various project for Cook County
 Actual, Average and Maximum Hourly Rates by Personnel and Classification with
 \$78 Cap and 3% Maximum Escalation for

Atlas Engineering Group, LLC

IDOT CLASSIFICATION	2021		2022	
	Average Rate	Maximum Rate	Average Rate	Maximum Rate
Principal	\$78.00	\$78.00	\$78.00	\$78.00
Director	\$77.00	\$78.00	\$78.00	\$78.00
Senior Project Manager	\$70.00	\$70.00	\$70.00	\$70.00
Project Manager	\$60.21	\$67.47	\$62.02	\$69.50
Senior Project Engineer	\$54.31	\$56.28	\$55.93	\$57.96
Project Engineer II	\$51.77	\$54.02	\$53.33	\$55.65
Project Engineer I	\$38.27	\$44.28	\$39.42	\$45.61
Staff Engineer	\$32.64	\$33.20	\$33.62	\$34.20
Engineer Technician III	\$45.02	\$49.20	\$46.37	\$50.67
Engineer Technician II	\$39.39	\$43.05	\$40.57	\$44.34
Engineer Technician I	\$24.76	\$27.06	\$25.50	\$27.87
Field Engineer V	\$65.00	\$67.64	\$66.95	\$69.67
Field Engineer IV	\$51.21	\$52.75	\$52.75	\$54.34
Field Engineer III	\$45.50	\$46.50	\$46.87	\$47.90
Field Engineer II	\$38.27	\$42.22	\$39.42	\$43.48
Field Engineer I	\$34.51	\$37.00	\$35.55	\$38.11
Field Technician IV	\$51.50	\$52.50	\$53.05	\$54.08
Field Technician III	\$44.25	\$44.75	\$45.58	\$46.09
Field Technician II	\$40.52	\$41.81	\$41.73	\$43.07
Field Technician I	\$24.76	\$25.50	\$25.50	\$26.27
Survey Chief	\$48.63	\$51.65	\$50.09	\$53.20
Surveyor	\$34.50	\$37.00	\$35.54	\$38.11
Senior CADD Technician	\$39.00	\$42.00	\$40.17	\$43.26
CADD Technician	\$29.00	\$30.00	\$29.87	\$30.90
Administrative Assistant	\$25.13	\$26.00	\$25.88	\$26.78
Intern	\$20.00	\$21.00	\$20.60	\$21.63
Administrator	\$52.17	\$53.50	\$53.74	\$55.11
Controller/Accounting Manager	\$52.17	\$53.50	\$53.74	\$55.11

Notes:

Salaries are adjusted annually and take affect around January 1st each year.

Cook County Department of Transportation and Highways
 Contract 1655-15826-Construction Management Services Various Various (Task Order)
 Average and Maximum Hourly Rates by Classification

Company: The Roderick Group, Inc. dba Ardmore Roderick
 3% Max Escalation
 \$78 Cap on Rates

Labor Classification	2021		2022	
	Avg. Rate	Max. Rate	Avg. Rate	Max. Rate
Executive II	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00
Executive I	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00
Senior Project Manager	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00
Project Manager	\$ 58.35	\$ 69.23	\$ 60.10	\$ 71.31
Assistant Project Manager	\$ 43.17	\$ 56.84	\$ 44.47	\$ 58.55
Project Engineer III	\$ 65.18	\$ 69.95	\$ 67.14	\$ 72.05
Project Engineer II	\$ 55.23	\$ 60.45	\$ 56.89	\$ 62.26
Project Engineer I	\$ 36.88	\$ 40.00	\$ 37.99	\$ 41.20
Engineer III	\$ 48.81	\$ 56.73	\$ 50.27	\$ 58.43
Engineer II	\$ 38.80	\$ 53.63	\$ 39.96	\$ 55.24
Engineer I	\$ 30.47	\$ 35.58	\$ 31.38	\$ 36.65
Project Control Specialist III	\$ 58.88	\$ 63.00	\$ 60.65	\$ 64.89
Project Control Specialist II	\$ 44.39	\$ 53.50	\$ 45.72	\$ 55.11
Project Control Specialist I	\$ 33.60	\$ 36.75	\$ 34.61	\$ 37.85
Technician III	\$ 39.81	\$ 53.05	\$ 41.00	\$ 54.64
Technician II	\$ 29.38	\$ 44.14	\$ 30.26	\$ 45.46
Technician I	\$ 17.94	\$ 34.00	\$ 18.48	\$ 35.02
HR Manager II	\$ 48.08	\$ 48.08	\$ 49.52	\$ 49.52
Office Engineer	\$ 38.38	\$ 42.74	\$ 39.53	\$ 44.02
General Superintendent	\$ 44.67	\$ 66.69	\$ 46.01	\$ 68.69
Marketing Manager II	\$ 37.75	\$ 38.50	\$ 38.88	\$ 39.66
Accounting Manager III	\$ 56.49	\$ 64.90	\$ 58.18	\$ 66.85
Accounting Manager II	\$ 38.50	\$ 38.50	\$ 39.66	\$ 39.66
Accounting Manager I	\$ 26.61	\$ 28.84	\$ 27.41	\$ 29.71
Administrative Assistant III	\$ 34.21	\$ 39.54	\$ 35.24	\$ 40.73
Administrative Assistant II	\$ 27.60	\$ 33.50	\$ 28.43	\$ 34.51
Administrative Assistant I	\$ 22.00	\$ 22.00	\$ 22.66	\$ 22.66



**CKL Engineers, LLC
2021-2023 Direct Hourly Labor Rates**

Classification	Type	FY 2021	FY 2022	FY 2023
Project Principal	Max Rate	\$78.00	\$78.00	\$78.00
	Min Rate	N/A	N/A	N/A
Project Manager	Max Rate	\$64.60	\$66.54	\$68.54
	Min Rate	\$45.60	\$46.97	\$48.38
VP of Administration	Max Rate	\$64.60	\$66.54	\$68.54
	Min Rate	\$45.60	\$46.97	\$48.38
Safety/Quality Manager	Max Rate	\$70.10	\$72.20	\$74.37
	Min Rate	\$51.64	\$53.19	\$54.79
Senior CADD Technician	Max Rate	\$57.40	\$59.12	\$60.89
	Min Rate	\$40.52	\$41.73	\$42.98
Senior Field Inspector	Max Rate	\$64.15	\$66.07	\$68.06
	Min Rate	\$47.27	\$48.68	\$50.14
Field Inspector	Max Rate	\$42.77	\$44.05	\$45.37
	Min Rate	\$36.02	\$37.10	\$38.21
Resident Engineer	Max Rate	\$60.78	\$62.60	\$64.48
	Min Rate	\$47.27	\$48.68	\$50.14
Office Engineer	Max Rate	\$48.40	\$49.85	\$51.35
	Min Rate	\$36.02	\$37.10	\$38.21
Project Engineer	Max Rate	\$46.15	\$47.53	\$48.96
	Min Rate	\$29.26	\$30.13	\$31.03
Project Specialist	Max Rate	\$47.27	\$48.68	\$50.14
	Min Rate	\$28.14	\$28.98	\$29.85
Marketing & Proposal Coordinator	Max Rate	\$42.77	\$44.05	\$45.37
	Min Rate	\$28.14	\$28.98	\$29.85
Administrative Assistant	Max Rate	\$42.77	\$44.05	\$45.37
	Min Rate	\$28.14	\$28.98	\$29.85
Engineering Intern	Max Rate	\$31.51	\$32.45	\$33.42
	Min Rate	\$21.38	\$22.02	\$22.68

CKL Engineers, LLC
List of Direct Costs

Item	Rate
Copies	\$0.10/page
Blue prints 24" x 36"	\$1.25/sheet
Vellum Reproducton 24" x 36"	\$2.00/sheet
Mylar Reproduction 24" x 36"	\$11.50/sheet
Color Reproduction	\$1.50/page
Vehicle	\$65.00/day
Cell Phone	\$70.00 per month

700 N. Green Street, Suite 204 Chicago, IL 60642

Company Name: Illinois Construction & Environmental Consulting, Inc.

Cook County Department of Transportation and Highways

RFQ# 1628-15611 (Various Various Task Orders)

<u>IDOT Job Classification</u>	2021		2022	
	Avg. Rate	Max. Rate	Avg. Rate	Max. Rate
President	72.50	78.00	74.68	78.00
Vice President - Materials	64.00	70.00	65.92	70.00
Construction Manager	71.50	78.00	73.65	78.00
Technical Director	61.50	70.00	63.35	70.00
Senior Resident Engineer	60.33	70.00	62.14	72.10
Construction Field Inspector	33.75	50.00	34.76	51.50
Materials Technician	43.31	50.00	44.61	51.50
Laboratory Technician	17.5	30.00	18.03	30.00
Intern	16.50	20.00	17.00	20.00

Synnov Group, Inc.
 AVG/MAX Hourly Rate Schedule 2021-2022

CLASSIFICATION	2021		2022	
	AVG.	MAX	AVG.	MAX
Contracts Administrator	\$45.02	\$50.65	\$46.37	\$52.17
Cost Analyst	\$44.00	\$51.50	\$45.32	\$53.05
Cost Control Manager	\$70.00	\$70.00	\$72.10	\$78.00
Cost Engineer	\$50.65	\$56.28	\$52.17	\$57.96
Cost Estimator	\$59.50	\$70.00	\$61.29	\$72.10
Document Control Manager	\$47.50	\$61.90	\$48.93	\$63.76
Field Engineer	\$39.32	\$52.45	\$40.50	\$60.10
Office Engineer	\$45.73	\$56.28	\$47.10	\$57.96
Principal in Charge	\$70.00	\$70.00	\$78.00	\$78.00
Project Controls Manager	\$70.00	\$70.00	\$78.00	\$78.00
Project Controls Specialist	\$50.65	\$61.90	\$52.17	\$63.76
Project Engineer	\$41.50	\$51.00	\$42.75	\$52.53
Scheduler	\$56.28	\$65.56	\$57.96	\$67.53
Senior Cost Engineer	\$67.53	\$70.00	\$69.56	\$78.00
Senior Estimator	\$61.41	\$70.00	\$63.25	\$78.00
Senior Scheduler	\$68.84	\$70.00	\$70.91	\$78.00
QA/QC Manager	\$73.16	\$70.00	\$75.35	\$78.00

MAXIMUM HOURLY LABOR RATES
January 1, 2020 to December 31, 2026

Title	Inflation factor 3%	2021 max hourly rate	2022 max hourly rate	2023 max hourly	2024 max hourly	2025 max hourly	2026 max hourly
Principle*	3.00%	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00
Administrative	3.00%	\$ 24.17	\$ 24.89	\$ 25.64	\$ 26.41	\$ 27.20	\$ 28.01
Project Manager	3.00%	\$ 41.28	\$ 42.52	\$ 43.80	\$ 45.11	\$ 46.46	\$ 47.86
Senior GIS Analyst*	3.00%	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00	\$ 78.00
GIS Analyst	3.00%	\$ 29.85	\$ 30.75	\$ 31.67	\$ 32.62	\$ 33.60	\$ 34.61
GIS Technician	3.00%	\$ 29.41	\$ 30.29	\$ 31.20	\$ 32.13	\$ 33.10	\$ 34.09

*Pay rates capped at \$78/hour per CDOT

**COOK COUNTY
ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX**

Section	Description	Pages
1	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1– 2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13- 14
5	Contract and EDS Execution Page	EDS 15
6	Cook County Signature Page	EDS 16

SECTION 1
INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

This Economic Disclosure Statement and Execution Document (“EDS”) is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

Definitions. Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

Affiliate means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

Applicant means a person who executes this EDS.

Bidder means any person who submits a Bid.

Code means the Code of Ordinances, Cook County, Illinois available on municode.com.

Contract shall include any written document to make Procurements by or on behalf of Cook County.

Contractor or *Contracting Party* means a person that enters into a Contract with the County.

Control means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

EDS means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

Joint Venture means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

Lobby or *lobbying* means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

Lobbyist means any person who lobbies.

Person or *Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

Prohibited Acts means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Proposal means a response to an RFP.

Proposer means a person submitting a Proposal.

Response means response to an RFQ.

Respondent means a person responding to an RFQ.

RFP means a Request for Proposals issued pursuant to this Procurement Code.

RFQ means a Request for Qualifications issued to obtain the qualifications of interested parties.

**INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

Section 1: Instructions. Section 1 sets forth the instructions for completing and executing this EDS.

Section 2: Certifications. Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 3: Economic and Other Disclosures Statement. Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

Required Updates. The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at cookcountyil.gov/ethics-board-of.

Authorized Signers of Contract and EDS Execution Page. If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

SECTION 2

CERTIFICATIONS

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in subparagraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE APPLICANT HEREBY CERTIFIES THAT: *In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.*

C. DRUG FREE WORKPLACE ACT

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT: *The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.*

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: *It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for -profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name	Address
None	
_____	_____
_____	_____
_____	_____

2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)

Local business means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

a) Is Applicant a "Local Business" as defined above?
 Yes: _____ No: _____

b) If yes, list business addresses within Cook County:

c) Does Applicant employ the majority of its regular full-time workforce within Cook County?
 Yes: _____ No: _____

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

4. REAL ESTATE OWNERSHIP DISCLOSURES.

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): _____

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)

OR:

- b) The Applicant owns no real estate in Cook County.

5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

None

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 et seq.) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing. **County reserves the right to request additional information to verify veracity of information contained in this statement.**

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name H.W. Lochner, Inc.

D/B/A: _____ FEIN # Only: 36-2338811

Street Address: 225 W. Washington, 12th Floor

City: Chicago State: IL Zip Code: 60606

Phone No.: 312-372-3011 Fax Number: 312-372-5974 Email: ahasler@hwlochner.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Elysium Infrastructure Group, LLC	445 Park Avenue, New York, NY 10022	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [] No
 If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
Elysium Investors (Eleventh) LLC, a Delaware limited liability company	c/o Elysium Management LLC, 445 Park Avenue, Suite 1401, New York, NY 10022	100%	Stockholder

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office
Jeanne T. Cormier	225 W. Washington, 12th Floor, Chicago, IL 60606	President, CEO	
James Doyna	225 W. Washington, 12th Floor, Chicago, IL 60606	Officer	
Paula Tomlins	225 W. Washington, 12th Floor, Chicago, IL 60606	Officer	

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Alan C. Hasler

Vice President

Name of Authorized Applicant/Holder Representative (please print or type)

Title

Alan C. Hasler

August 12, 2021

Signature

Date

ahasler@hwlochner.com

309-230-0403

E-mail address

Phone Number

Subscribed to and sworn before me
this 12th day of August, 2021.

My commission expires:

X *Laurie Anita Davis*

Notary Public Signature

Notary Seal





COOK COUNTY BOARD OF ETHICS
 69 W. WASHINGTON STREET, SUITE 3040
 CHICAGO, ILLINOIS 60602
 312/603-4304 Office 312/603-9988 Fax

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION

Nepotism Disclosure Requirement:

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

Additional Definitions:

“*Familial relationship*” means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- | | | |
|----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Parent | <input type="checkbox"/> Grandparent | <input type="checkbox"/> Stepfather |
| <input type="checkbox"/> Child | <input type="checkbox"/> Grandchild | <input type="checkbox"/> Stepmother |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Father-in-law | <input type="checkbox"/> Stepson |
| <input type="checkbox"/> Sister | <input type="checkbox"/> Mother-in-law | <input type="checkbox"/> Stepdaughter |
| <input type="checkbox"/> Aunt | <input type="checkbox"/> Son-in-law | <input type="checkbox"/> Stepsister |
| <input type="checkbox"/> Uncle | <input type="checkbox"/> Daughter-in-law | <input type="checkbox"/> Stepsister |
| <input type="checkbox"/> Niece | <input type="checkbox"/> Brother-in-law | <input type="checkbox"/> Halfbrother |
| <input type="checkbox"/> Nephew | <input type="checkbox"/> Sister-in-law | <input type="checkbox"/> Halfsister |

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY

Name of Person Doing Business with the County: H.W. Lochner, Inc.
 Address of Person Doing Business with the County: 225 W. Washington St, 12th Floor, Chicago, IL 60606
 Phone number of Person Doing Business with the County: 312-997-9764
 Email address of Person Doing Business with the County: ahasler@hwlochner.com

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

Business Entity: H.W. Lochner, Inc. Contact: Alan Hasler
225 W. Washington St, 12th Floor, Chicago, IL 60606 ahasler@hwlochner.com 312-997-9764

B. DESCRIPTION OF BUSINESS WITH THE COUNTY

Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: _____

Request for Qualifications No. 1655-15826

The aggregate dollar value of the business you are doing or seeking to do with the County: \$ \$5,000,000

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: Cho Ng, Transportation and Highways, 312-603-7338, cho.ng@cookcountyil.gov

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: Holly A. Cichy, Bureau Chief of Construction, holly.cichy@cookcountyil.gov

Cook County Department of Transportation and Highways; 69 W. Washington St., Suite 2400, Chicago, IL 60602; 312-603-1613

C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS

Check the box that applies and provide related information where needed

- The Person Doing Business with the County is an **individual** and there is **no familial relationship** between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.
- The Person Doing Business with the County is a **business entity** and there is **no familial relationship** between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

The Person Doing Business with the County **is an individual** and **there is a familial relationship** between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

Name of Individual Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

The Person Doing Business with the County **is a business entity** and **there is a familial relationship** between at least one member of this business entity’s board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows:**

Name of Member of Board of Director for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Officer for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Employee of Business Entity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

VERIFICATION: To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.



August 12, 2021

Signature of Recipient

Date

SUBMIT COMPLETED FORM TO: Cook County Board of Ethics
 69 West Washington Street, Suite 3040, Chicago, Illinois 60602
 Office (312) 603-4304 – Fax (312) 603-9988
 CookCounty.Ethics@cookcountyil.gov

* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (*i.e.* in laws and step relations) or adoption.

SECTION 4

COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE

Effective May 1, 2015, every Person, **including Substantial Owners**, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information. **County reserves the right to request additional information to verify veracity of information contained in this Affidavit.**

I. Contract Information:

Contract Number: 1655-15826

County Using Agency (requesting Procurement): Department of Transportation and Highways

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): H.W. Lochner, Inc.

Substantial Owner Complete Name: _____

FEIN# 36-2338811

Date of Birth: _____ E-mail address: N/A

Street Address: 225 W. Washington, 12th Floor

City: Chicago State: IL Zip: 60606

Home Phone: [REDACTED]

III. Compliance with Wage Laws:

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

- No *Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq., YES or NO*
- No *Illinois Minimum Wage Act, 820 ILCS 105/1 et seq., YES or NO*
- No *Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq., YES or NO*
- No *Employee Classification Act, 820 ILCS 185/1 et seq., YES or NO*
- No *Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq., YES or NO*
- No *Any comparable state statute or regulation of any state, which governs the payment of wages YES or NO*

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV**.

SECTION 5

CONTRACT AND EDS EXECUTION PAGE

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

Execution by Corporation

H. W. Lochner, Inc.

Corporation's Name

312-372-7346

Telephone

CFO

Paula D. Taylor

Secretary Signature

Jeanne T. Cormier

President's Printed Name and Signature

Jeanne T. Cormier / jcormier@hwlochner.com

Email

August 13, 2021

Date

Execution by LLC

LLC Name

*Member/Manager Printed Name and Signature

Date

Telephone and Email

Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

Telephone and Email

Subscribed and sworn to before me this August 13th day of 13TH, 20 21.

Laurie Anita Davis

Notary Public Signature

My commission expires:

Notary Seal



*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

OCPO ONLY: <input type="radio"/> Disqualification <input type="radio"/> Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract.** In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.:	Date:
Total Bid or Proposal Amount: \$	Contract Title:
Contractor:	Subcontractor/Supplier/ Subconsultant to be added or substitute:
Authorized Contact for Contractor:	Authorized Contact for Subcontractor/Supplier/ Subconsultant:
Email Address (Contractor):	Email Address (Subcontractor):
Company Address (Contractor):	Company Address (Subcontractor):
City, State and Zip (Contractor):	City, State and Zip (Subcontractor):
Telephone and Fax (Contractor)	Telephone and Fax (Subcontractor)
Estimated Start and Completion Dates (Contractor)	Estimated Start and Completion Dates (Subcontractor)

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

<u>Description of Services or Supplies</u>	<u>Total Price of Subcontract for Services or Supplies</u>

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Contractor

Prime Contractor Signature

Date

**COOK COUNTY
ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX**

Section	Description	Pages
1	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1- 2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13-14
5	Contract and EDS Execution Page	EDS 15
6	Cook County Signature Page	EDS 16

SECTION 1
INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

This Economic Disclosure Statement and Execution Document (“EDS”) is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

Definitions. Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

Affiliate means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

Applicant means a person who executes this EDS.

Bidder means any person who submits a Bid.

Code means the Code of Ordinances, Cook County, Illinois available on municode.com.

Contract shall include any written document to make Procurements by or on behalf of Cook County.

Contractor or *Contracting Party* means a person that enters into a Contract with the County.

Control means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

EDS means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

Joint Venture means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

Lobby or *lobbying* means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

Lobbyist means any person who lobbies.

Person or *Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

Prohibited Acts means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Proposal means a response to an RFP.

Proposer means a person submitting a Proposal.

Response means response to an RFQ.

Respondent means a person responding to an RFQ.

RFP means a Request for Proposals issued pursuant to this Procurement Code.

RFQ means a Request for Qualifications issued to obtain the qualifications of interested parties.

**INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT**

Section 1: Instructions. Section 1 sets forth the instructions for completing and executing this EDS.

Section 2: Certifications. Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 3: Economic and Other Disclosures Statement. Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

Required Updates. The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at cookcountyil.gov/ethics-board-of.

Authorized Signers of Contract and EDS Execution Page. If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

SECTION 2**CERTIFICATIONS**

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- 3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.*;
- 5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- 6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in subparagraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE APPLICANT HEREBY CERTIFIES THAT: *In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.*

C. DRUG FREE WORKPLACE ACT

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT: *The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.*

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: *It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for -profit law);
- 2) Community Development Block Grants;
- 3) Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name	Address
_____	_____
_____	_____
_____	_____

2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)

Local business means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

a) Is Applicant a "Local Business" as defined above?
Yes: _____ No: _____

b) If yes, list business addresses within Cook County:

c) Does Applicant employ the majority of its regular full-time workforce within Cook County?
Yes: _____ No: _____

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

4. REAL ESTATE OWNERSHIP DISCLOSURES.

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

- a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): _____

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)

OR:

- b) The Applicant owns no real estate in Cook County.

5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing. **County reserves the right to request additional information to verify veracity of information contained in this statement.**

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and
2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the Applicant or Stock/Beneficial Interest Holder

This Statement is an: Original Statement or Amended Statement

Identifying Information:

Name _____

D/B/A: _____ FEIN # Only: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone No.: _____ Fax Number: _____ Email: _____

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

Sole Proprietor Partnership Corporation Trustee of Land Trust

Business Trust Estate Association Joint Venture

Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address

3. Is the Applicant constructively controlled by another person or Legal Entity? [] Yes [] No
If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office

Declaration (check the applicable box):

- I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.
- I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Name of Authorized Applicant/Holder Representative (please print or type)

Title

Signature

Date

E-mail address

Phone Number

Subscribed to and sworn before me
this _____ day of _____, 20__.

My commission expires:

X _____
Notary Public Signature

Notary Seal



COOK COUNTY BOARD OF ETHICS
 69 W. WASHINGTON STREET, SUITE 3040
 CHICAGO, ILLINOIS 60602
 312/603-4304 Office 312/603-9988 Fax

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION

Nepotism Disclosure Requirement:

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

Additional Definitions:

“*Familial relationship*” means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- | | | |
|----------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Parent | <input type="checkbox"/> Grandparent | <input type="checkbox"/> Stepfather |
| <input type="checkbox"/> Child | <input type="checkbox"/> Grandchild | <input type="checkbox"/> Stepmother |
| <input type="checkbox"/> Brother | <input type="checkbox"/> Father-in-law | <input type="checkbox"/> Stepson |
| <input type="checkbox"/> Sister | <input type="checkbox"/> Mother-in-law | <input type="checkbox"/> Stepdaughter |
| <input type="checkbox"/> Aunt | <input type="checkbox"/> Son-in-law | <input type="checkbox"/> Stepbrother |
| <input type="checkbox"/> Uncle | <input type="checkbox"/> Daughter-in-law | <input type="checkbox"/> Stepsister |
| <input type="checkbox"/> Niece | <input type="checkbox"/> Brother-in-law | <input type="checkbox"/> Halfbrother |
| <input type="checkbox"/> Nephew | <input type="checkbox"/> Sister-in-law | <input type="checkbox"/> Halfsister |

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY

Name of Person Doing Business with the County: _____

Address of Person Doing Business with the County: _____

Phone number of Person Doing Business with the County: _____

Email address of Person Doing Business with the County: _____

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

B. DESCRIPTION OF BUSINESS WITH THE COUNTY

Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: _____

The aggregate dollar value of the business you are doing or seeking to do with the County: \$_____

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: _____

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: _____

C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS

Check the box that applies and provide related information where needed

- The Person Doing Business with the County **is an individual** and there is **no familial relationship** between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.
- The Person Doing Business with the County **is a business entity** and there is **no familial relationship** between any member of this business entity’s board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

**COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM**

The Person Doing Business with the County **is an individual** and **there is a familial relationship** between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

Name of Individual Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

The Person Doing Business with the County **is a business entity** and **there is a familial relationship** between at least one member of this business entity’s board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows:**

Name of Member of Board of Director for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Officer for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
---	--	--	----------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
--	--	--	----------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Name of Employee of Business Entity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
--	--	--	----------------------------------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If more space is needed, attach an additional sheet following the above format.

VERIFICATION: To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.

Signature of Recipient

Date

SUBMIT COMPLETED FORM TO: Cook County Board of Ethics
69 West Washington Street, Suite 3040, Chicago, Illinois 60602
Office (312) 603-4304 – Fax (312) 603-9988
CookCounty.Ethics@cookcountyil.gov

* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (i.e. in laws and step relations) or adoption.

SECTION 4

COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE

Effective May 1, 2015, every Person, **including Substantial Owners**, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information. **County reserves the right to request additional information to verify veracity of information contained in this Affidavit.**

I. Contract Information:

Contract Number: _____

County Using Agency (requesting Procurement): _____

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): _____

Substantial Owner Complete Name: _____

FEIN# _____

Date of Birth: _____

E-mail address: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Home Phone: () _____ - _____

III. Compliance with Wage Laws:

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

No *Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq., YES or NO*

No *Illinois Minimum Wage Act, 820 ILCS 105/1 et seq., YES or NO*

No *Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq., YES or NO*

No *Employee Classification Act, 820 ILCS 185/1 et seq., YES or NO*

No *Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq., YES or NO*

No *Any comparable state statute or regulation of any state, which governs the payment of wages YES or NO*

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV**.

IV. Request for Waiver or Reduction

If Person/Substantial Owner answered **“Yes”** to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

- No There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner. YES or NO
- No Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation. YES or NO
- No Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default. YES or NO
- No Other factors that the Person or Substantial Owner believe are relevant. YES or NO

The Person/Substantial Owner must submit documentation to support the basis of its request for a reduction or waiver. The Chief Procurement Officer reserves the right to make additional inquiries and request additional documentation.

V. Affirmation

The Person/Substantial Owner affirms that all statements contained in the Affidavit are true, accurate and complete.

Signature: _____ Date: _____

Name of Person signing (Print): _____ Title: _____

Subscribed and sworn to before me this _____ day of _____, 20_____

X _____
Notary Public Signature **Notary Seal**

Note: The above information is subject to verification prior to the award of the Contract.

SECTION 5

CONTRACT AND EDS EXECUTION PAGE

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

Execution by Corporation

Corporation's Name

President's Printed Name and Signature

Telephone

Email

Secretary Signature

Date

Execution by LLC

LLC Name

*Member/Manager Printed Name and Signature

Date

Telephone and Email

Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

Telephone and Email

Subscribed and sworn to before me this

_____ day of _____, 20__.

My commission expires:

Notary Public Signature

Notary Seal

*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.

**SECTION 6
COOK COUNTY SIGNATURE PAGE**

ON BEHALF OF THE COUNTY OF COOK, A BODY POLITIC AND CORPORATE OF THE STATE OF ILLINOIS, THIS CONTRACT IS
HEREBY EXECUTED BY:

Cook County Chief Procurement Officer

Date

APPROVED AS TO FORM:

James Beligratis

Assistant State's Attorney
(Required on contracts over \$1,000,000)

September 16, 2021

Date

CONTRACT TERM & AMOUNT

Contract #

Original Contract Term

Renewal Options (If Applicable)

Contract Amount

Cook County Board Approval Date (If Applicable)