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September 2, 2020

FPD New Headquarters at Salt Creek Landscape Maintenance Campus North Riverside, IL SUBCONTRACTORS BID SUBMITTALS

Below is a list of documents that <u>we must submit with our proposal</u>. This is for all MBE/WBE Subcontractors. (ALL BLANK TEMPLATES HAVE BEEN ATTACHED FOR YOUR USE)

MUST BE COMPLETED BY ALL MBE AND WBE SUBCONTRACTORS

- 1. Forest Preserves of Cook County LETTER OF INTENT (SECTION 2)
 - · Complete all requested information.
 - · Make sure to sign and notarize.
 - Provide your MBE/WBE Minority Certificate
- 2. Forest Preserve of Cook County M/WBE RECIPROCAL CERTIFICATION AFFADAVIT
 - Complete all required information.
 - Make sure to sign and notarize.

MUST BE COMPLETED BY ALL SUBCONTRACTORS

- 3. RESPONSIBLE BIDDER AFFIDAVIT OF COMPLIANCE
 - Complete all required information.
 - · Make sure to sign and notarize.
 - Provide Letter of Good Standing.

Please submit these forms ASAP. Final numbers can be written in on the LOI when we received your proposal.

If you have any questions please contact me direct at deaker@pathcc.com or 847-398-7100 Ext 213 or Cell# 847-997-3028.

Thank you, Debbie Eaker Senior Estimating Coordinator

FOREST PRESERVES OF COOK COUNTY LETTER OF INTENT (SECTION 2)

M/WBE Firm:	Certifying Agency:
Contact Person:	Certification Expiration Date:
Address:	Ethnicity:
City/State:Zip	Bid/Proposal/Contract #:
Phone: Fax:	FEIN#:
Email:	
Participation: Direct Indirect	
Will the M/WBE firm be subcontracting any of the performa	ance of this contract to another firm?
No Yes – Please attach explanation. Pro	posed Subcontractor:
The undersigned M/WBE is prepared to provide the followi MWBE firm's proposed scope of work and/or payment sch	ing Commodities/Services for the above named Project/ Contract (If more space is needed to fully describe redule, attach additional sheets).
THE UNDERSIGNED PARTIES AGREE that this Letter	r of Intent will become a binding Subcontract Agreement conditioned upon the Bidder/Proposer' istrict of Cook County. The Undersigned Parties do also certify that they did not affix their signature ervice/ Supply and Fee/Cost were completed.
Signature (<i>M/WBE</i>)	Signature (<i>Prime Bidder/Proposer</i>)
Print Name	Richard Krause - President Print Name Path Construction Company, Inc.
Firm Name	Firm Name
	9/18/2020
Date	Date
Subscribed and sworn before me	Subscribed and sworn before me
this day of	this 18 day of, 20
Notary Public	Notary Public
SEAL	Deborah Eaker SEAL



Forest Preserves of Cook County M/WBE Reciprocal Certification Affidavit

Firm Name				
Address		City		
County	State	e	Zi	ip
Phone ()		Email		
I		,		
(Authorized Rep			(Print Title	(e)
of(Name of Firm	n)	do herel	y affirm:	
1)(Name of	of Firm)	is a Min	ority and/or Wo	omen Business Enterprise
currently certified by the Cit	y of Chicago as:	Black His	spanic Asian	Woman-owned business
the M/WBE firm and requirements of Chapter	(Name of Firms not exceed \$2,2 the equity of the 34, Article IV of Procurement Code jointly or as common services receipts of as over the five make U.S. Small Bus	76,550.06, exclud the owner's prima the Cook County e, an individual's primunity/marital pro (Namost recent years, disiness Administration)	ing the individuary residence, a Procurement Control of the interest of the procure of the interest of the individual interest of the individua	tal's ownership interest in and otherwise meets the ode. (As per Section 34-th includes only his or her ndividual's spouse.) the Small Business Size tele 13, Code of Federal
Upon penalty of perjury, I _	(Authorized	Representative)	affirm tha	t, to the best of my
knowledge and belief, the in	formation herein	is true and accurat	e.	
Signature		Title		Date
Subscribed and sworn to bef	fore me this	day of	(Month)	/(Year)
(Notary's Signature)			Notary	y's Seal
My Commission Expires				

Responsible Bidder Affidavit of Compliance

COMPLETION OF THIS FORM IS REQUIRED BY CONTRACTOR

AND ALL SUB-CONTRACTORS¹

Project: _.	New 1	Headquarte	rs Buildi	ng at	Contract Nu	mber: 20-80-50
	Salt	Creek Lan	ndscape Ma	aint. Car	npus	
Business	Name:	Path Cons		Company	inc.	
Business	Business Address:					
Contact I	Person:					
Phone: _			Fax:		_ E-mail:	
supportir Requiren Affidavit to all su	ng doci nents or and all bcontra	umentation as In Public Works I Irelated evidence Ictors who will	required pur Projects (Sec. 1 ce with its bid. perform worl	suant to <i>Ar</i> 1-8-2(S)). Co Contractors k on the pro	Ordinance ntractor and shall be responded. Spect. Failure	npliance ("Affidavit") and submit Establishing Responsible Bidder sub-contractors must submit this onsible for providing this Affidavit e to comply with all submission responsible bidder.
			•	•	•	Contractor and all subcontractors. IA." If the answer is none, answer
The certifications set forth in this Affidavit and all documents attached hereto shall become a part of any Contract awarded to the Contractor. Furthermore, Contractor shall comply with these certifications during the term and/or performance of the Contract.						
The unde	ersigned	l(Na	me)	, as	(Title)	and on behalf

¹ Per Section IB-2, the Responsible Bidder Affidavit of Compliance for subcontractors may be submitted

within a reasonable time after the bid submission date as determined by the Purchasing Agent.

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of having been duly sworn under oath certifies that:
(Contractor)
Business Organization
The form of business organization of the Contractor is (indicate the state and date of incorporation i applicable):
Are you Authorized to do business in the State of Illinois: Yes [] No []
Attach copy of the Office of the Secretary of State of Illinois, Department of Business Services Certificate of Good Standing.
Federal Employer I.D. # or SSN (if an individual or sole proprietor):
The Contractor, agent, partner, employee, or officer of the Contractor, is not debarred, suspended proposed for debarment, or declared ineligible from Contracting with any unit of state or local government. ("Yes" indicates the above statement is correct): Yes [] No []
<u>Subcontractors</u>
 Contractor disclosed the name and address of each subcontractor for whom the Contractor has accepted a bid and/or intends to hire on any part of the project on the Bidder's Key Personnel & Subcontractor Form:
EOE Compliance
Contractor is in compliance with provisions of Section 2000e of Chapter 21, Title 42 of the United States Code and Federal Executive Order No. 11246 as amended by Executive Order No. 11375 (known as the Equal Opportunity Employer provisions): Yes [] No []
I.D.H.R. #: Expiration Date:
Prevailing Wage Compliance
 Contractor has reviewed the applicable prevailing wage laws (including the Illinois Prevailing Wage Act, and federal Davis-Bacon Act), will strictly comply with applicable prevailing wage laws, and will pay the applicable prevailing wage rates: Yes [_] No [_]
 Contractor has <u>not</u> been found by the Illinois Department of Labor to be in violation of the Illinois Prevailing Wage Act more than once within the past three year period:
Yes [] No []

"Yes" indicates compliance with the Act. If the above answer is "No," list the date(s) of the Department finding of a violation: $___N/A$
Participation in Approved Apprenticeship Program(s)
 Contractor participates in apprenticeship and training programs applicable to the work to be performed, which are approved by and registered with the United States Department of Labor's Office of Apprenticeship, or its successor organizations: Yes [_] No [_]
Attach supporting documentation (e.g. Verification letter of signatory Contractor, United State Department of Labor's Office of Apprenticeship Certification of Registration, Standards of Apprenticeship, Apprenticeship Agreement).
Substance Abuse
Contractor complies with the Illinois Substance Abuse Prevention on Public Works Projects Act by:
Having a written substance abuse program in effect for its employees that meets or exceeds the requirements of the Act: Yes [] No [] or:
 Having signed a collective bargaining agreement that deals with the subject matter of the Act and the currently is in effect: Yes [] No []
Workers' Compensation
Contractor's employees who will perform work on the project are properly classified and covered under a current workers' compensation policy:Yes [] No []
Employee Benefits
• Contractor's employees who will perform work on the project are covered by a health and welfar plan: Yes [] No []
• Contractor's employees who will perform work on the project are covered by a retirement plan: Yes [] No []
I certify that I am authorized to execute this Affidavit of Compliance on behalf of the Contractor set forton the first page of this Affidavit, that I have personal knowledge of all the information set forth here and that all statements, representations, information and documents provide in or with this Affidavit an attachments hereto are true and accurate.

The Contractor may report any change in any of the facts stated in this Affidavit within fourteen (14) days of the effective date of such change by completing and submitting a new Affidavit. Failure to comply with this requirement is grounds for the Contractor to be deemed a non-responsible bidder.

	Signature of Authorized Officer
	Name of Authorized Officer (Print or Type)
	Title
	Telephone Number
State of Illinois County of	
Subscribed and sworn to before me this day of	
, 20	
Notary Public Signature & Seal	