

SCHEDULE A

Statement of Prime Submitter Regarding Its MBE/WBE Utilization Plan

TO BE COMPLETED BY SUBMITTER ONLY

Submitter: Herc Rentals Inc. Project: _____

Is the submitter a certified MBE/WBE? MBE: ☐ Yes ☒ No WBE: ☐ Yes ☒ No

If yes, attach all current Letters of Certification.

NOTE:

CERTIFICATION OF THE SUBMITTER AS AN **MBE** SATISFIES ONLY THE MBE GOAL; THE **WBE** GOAL MUST STILL BE MET. CERTIFICATION OF THE SUBMITTER AS A **WBE** SATISFIES ONLY THE WBE GOAL; THE **MBE** GOAL MUST STILL BE MET. CERTIFICATION OF THE SUBMITTER AS BOTH **MBE** AND **WBE** MAY SATISFY **ONE GOAL** ONLY.

The submitter intends to perform work in connection with this project as a:

GENDER:

- ☐ Male
☐ Female

RACE/ETHNICITY:

- ☐ Black/African American
☐ Hispanic American
☐ Asian American
☐ White American
☐ Other _____

TYPE OF FIRM:

- ☐ Partnership
☐ Sole Proprietorship
☒ Corporation
☐ Joint Venturer
☐ Other _____

All MBE/WBE firms included in the following plan must be certified as such by a public or private organization such as the City of Chicago, Chicago Minority Supplier Development Council (CMSDC), Women Business Development Center (WBDC), and the Small Business Administration.

I. Participation of MBE/WBE Firms

In determining the manner of MBE/WBE participation in the performance of this contract, the submitter shall consider involvement with MBE/WBE firms as joint venture partners, subcontractors, and suppliers of goods and services, either directly or indirectly.

- A. If submitter is a joint venturer and one or more joint venture partners are certified MBEs or WBEs, attach copies of Letters of Certification and a copy of the Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the joint venture.
- B. Proposing MBE/WBE subcontractors/suppliers/consultants to perform work or supply goods or services not directly related to the performance of this contract is considered to be indirect participation.

MBE/WBE Subcontractors/Suppliers/Consultants:

1. Name of MBE/WBE: JT Barrier

Address: 12301 S New Ave, Lemont, IL 60439

Contact Person: Brett Donaghue Phone: 773-394-1612

E-mail: brett@jtbarrier.com Fax: n/a

MBE/WBE Participation: Dollars \$ _____ Percent: 25 %

Will this subcontractor be used for direct or indirect participation? (circle one)

Schedule B and all current certification letters attached? ☒ Yes ☐ No

2. Name of MBE/WBE: Suburban Truck Parts

Address: 6442 W 111th Street

Contact Person: Lynn Castiglione Phone: 708-827-5902

E-mail: lynn@suburbantruckparts.com Fax: 708-671-8940

MBE/WBE Participation: Dollars \$ _____ Percent: 5 %

Will this subcontractor be used for direct or indirect participation? (circle one)

Schedule B and all current certification letters attached? ☒ Yes ☐ No

3. Name of MBE/WBE: _____

Address: _____

Contact Person: _____ Phone: _____

E-mail: _____ Fax: _____

MBE/WBE Participation: Dollars \$ _____ Percent: _____ %

Will this subcontractor be used for direct or indirect participation? (circle one)

Schedule B and all current certification letters attached? ☐ Yes ☐ No

4. Name of MBE/WBE: _____

Address: _____

Contact Person: _____ Phone: _____

E-mail: _____ Fax: _____

MBE/WBE Participation: Dollars \$ _____ Percent: _____ %

Will this subcontractor be used for direct or indirect participation? (circle one)

Schedule B and all current certification letters attached? ☐ Yes ☐ No

5. Name of MBE/WBE: _____

Address: _____

Contact Person: _____ Phone: _____

E-mail: _____ Fax: _____

MBE/WBE Participation: Dollars \$ _____ Percent: _____ %

Will this subcontractor be used for direct or indirect participation? (circle one)

Schedule B and all current certification letters attached? ☐ Yes ☐ No

6. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$_____ Percent: _____%
Will this subcontractor be used as direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

7. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$_____ Percent: _____%
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

8. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$_____ Percent: _____%
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

9. Name of MBE/WBE: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
MBE/WBE Participation: Dollars \$_____ Percent: _____%
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule B and all current certification letters attached? ☐ Yes ☐ No

Attach additional sheets as needed.

II. Summary of MBE/WBE Proposal:

A. MBE Proposal:

1. MBE Participation:

<u>MBE Firm Name</u>	Dollar Amount of Participation	Percent Amount of Participation	Direct	Indirect (check <input checked="" type="checkbox"/> one)
JT Barrier	\$ _____	25 %	_____	<input checked="" type="checkbox"/>
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
Total MBE Participation:	\$ _____	_____ %		

2. WBE Participation:

<u>WBE Firm Name</u>	Dollar Amount of Participation	Percent Amount of Participation		
Suburban Truck Parts	\$ _____	5 %	_____	<input checked="" type="checkbox"/>
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
_____	\$ _____	_____ %	_____	_____
Total WBE Participation:	\$ _____	_____ %		

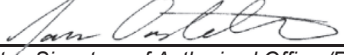
The submitter designates the following person as its MBE/WBE Liaison Officer:

Richard Shugg _____ (_____) 239-301-1344
(Name and Title) (Phone Number)

Hercbids@hercrentals.com _____
(E-mail address)

The Contractor certifies to the best of its knowledge and belief that it, its principals and any subcontractors used in the performance of this contract, meet the Park District requirements and have not violated any City or Sister Agency policy, codes, state, federal, or local laws, rules or regulations and have not been subject to any debarment, suspension or other disciplinary action by any government agency. Additionally, if at any time the contractor becomes aware of such information, it must immediately disclose it to the Park District.

Submitter: Herc Rentals Inc.
(Print or Type Name of Business)

Signature:  Date: 4/29/2024
(Written Signature of Authorized Officer/Representative)

Name/Title: Jason Oosterbeek, Vice President
(Print or Type Name and Title of Person Signing Statement)

NOTE

**If submitter is an MBE/WBE joint venture with a non-MBE/WBE firm,
use the following signature page instead:**

End of Schedule A

SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
MBE/WBE PRIME CONTRACTOR MUST SUBMIT A SCHEDULE B, IF SELF-PERFORMING ANY WORK, TO RECEIVE MBE/WBE CREDIT

Project: _____

From: JT Barrier MBE: ☐ Yes ☐ No
(Name of MBE/WBE Firm) WBE: ☐ Yes ☐ No

To: Herc Rentals and the Chicago Park District:
(Name of Prime Contractor-Submitter)

The undersigned intends to perform work in connection with the above projects as a:

GENDER:	RACE/ETHNICITY:	TYPE OF FIRM:
<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Black/African American	<input type="checkbox"/> Partnership
<input type="checkbox"/> Female	<input checked="" type="checkbox"/> Hispanic American	<input type="checkbox"/> Sole Proprietorship
	<input type="checkbox"/> Asian American	<input checked="" type="checkbox"/> Corporation
	<input type="checkbox"/> White American	<input type="checkbox"/> Joint Venturer
	<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Other <u>single member LLC</u>

The MBE/WBE status of the undersigned is confirmed by the attached current Letters of Certification from public or private entities such as the City of Chicago, the Chicago Minority Supplier Development Council (CMSDC), the Women's Business Development Center (WBDC), and the Small Business Administration.

Attach all current certification letters behind Schedule B.

The undersigned is prepared to provide the following services or supply the following goods in connection with the above project/contract:

Petroleum product delivery

The above described performance is offered for the following price and described terms of payment:
Net 30 days

If more space is needed to fully describe the MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets.

The undersigned will enter into a written agreement for the above work with you as prime contractor, conditioned upon your execution of a contract with the Chicago Park District, and will do so within (3) three working days of receipt of a signed contract from the Chicago Park District.

Signature: [Signature] Date: 4/29/24
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: JAVIER CAZARO PRESIDENT
(Print or Type Name and Title)

Address: 12301 NEW AVE UNIT E LEMONT IL 60439

Telephone: 630-312-8701 Fax: 630-312-8742

End of Schedule B



CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

SEP 02 2020

Javier Lazaro
J.T. Barrier, LLC
12305 S. New Ave. Unit E
Lemont, IL 60439

Dear Mr. Lazaro:

We are pleased to inform you that **J.T. Barrier, LLC** is certified as a **Minority-Owned Business Enterprise ("MBE")** by the City of Chicago ("City"). This **MBE** certification is valid until **8/15/2025**; however, your firm's certification must be revalidated annually. In the past the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. Therefore, we require you to be even more diligent in filing your **annual No-Change Affidavit 60 days** before your annual anniversary date.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification during the five year period stated above, you must file an **annual No-Change Affidavit**. Your firm's annual No-Change Affidavit is due by **8/15/2021, 8/15/2022, 8/15/2023 and 8/15/2024**. Please remember, you have an affirmative duty to file your No-Change Affidavit 60 days prior to the date of expiration. Failure to file your annual No-Change Affidavit may result in the suspension or rescission of your certification.

Your firm's five year certification will expire on **8/15/2025**. You have an affirmative duty to file for recertification **60 days** prior to the date of the five year anniversary date. Therefore, you must file for recertification by **6/15/2025**.

It is important to note that you also have an ongoing affirmative duty to notify the City of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification **within 10 days** of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, gross receipts and or personal net worth that exceed the program threshold. Failure to provide the City with timely notice of such changes may result in the suspension or rescission of your certification. In addition, you may be liable for civil penalties under Chapter 1-22, "False Claims", of the Municipal Code of Chicago.

Please note – you shall be deemed to have had your certification lapse and will be ineligible to participate as an **MBE** if you fail to:

DMW

- File your annual No-Change Affidavit within the required time period;
- Provide financial or other records requested pursuant to an audit within the required time period;
- Notify the City of any changes affecting your firm's certification **within 10 days** of such change; or
- File your recertification within the required time period.

Please be reminded of your contractual obligation to cooperate with the City with respect to any reviews, audits or investigation of its contracts and affirmative action programs. We strongly encourage you to assist us in maintaining the integrity of our programs by reporting instances or suspicions of fraud or abuse to the **City's Inspector General at chicagoinspectorgeneral.org, or 866-IG-TIPLINE (866-448-4754).**

Be advised that if you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. In addition to any other penalty imposed by law, any person who knowingly obtains, or knowingly assists another in obtaining a contract with the City by falsely representing the individual or entity, or the individual or entity assisted is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months, or a fine of not less than \$5,000 and not more than \$10,000 or both.

Your firm's name will be listed in the City's Directory of Minority and Women-Owned Business Enterprises in the specialty area(s) of:

NAICS Code(s):

484220 – Tanker Trucking (e.g., chemical, juice, milk, petroleum), Local

484230 – Tanker Trucking (e.g., chemical, juice, milk, petroleum,) Long-Distance

Your firm's participation on City contracts will be credited only toward **MBE** goals in your area(s) specialty. While your participation on City contracts is not limited to your area of specialty, credit toward goals will be given only for work that is self-performed and providing a commercially useful function that is done in the approved specialty category.

Thank you for your interest in the City's Minority, Women-Owned Business Enterprise, Veteran-Owned Business Enterprise and Business Enterprise Owned or Operated by People with Disabilities (MBE/WBE/VBE/BEPD) Program.

Sincerely,



Shannon E. Andrews
Chief Procurement Officer

SEA/bbo



CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

JUN 15 2022
Lynette Castiglione
Suburban Truck Parts LLC
6442 West 111th Street
Worth, Illinois 60482-1209

Dear Ms. Castiglione:

We are pleased to inform you that **Suburban Truck Parts LLC** has been recertified as a **Women-Owned Business Enterprise ("WBE")** by the City of Chicago ("City"). This **WBE** recertification is a continuation of your previous certification which expired **07/15/2022** and will remain effective for as long as your firm continues to meet all certification eligibility requirements and is contingent upon the firm affirming its eligibility by filing an **annual No-Change Affidavit** each year. In the past the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. Therefore, we require you to be even more diligent in filing your **annual No-Change Affidavit 60 days** before your annual anniversary date.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification, you must **file an annual No-Change Affidavit by your anniversary date of June 15th**. Please remember, you have an affirmative duty to file your No-Change Affidavit 60 days prior to the anniversary date for timely processing. Failure to file your annual No-Change Affidavit may result in the suspension or rescission of your certification.

It is important to note that you also have an ongoing affirmative duty to notify the City of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification **within 10 days** of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, gross receipts and or personal net worth that exceed the program threshold. Failure to provide the City with timely notice of such changes may result in the suspension or rescission of your certification. In addition, you may be liable for civil penalties under Chapter 1-22, "False Claims", of the Municipal Code of Chicago.

Please note – you shall be deemed to have had your certification lapse and will be ineligible to participate as a WBE if you fail to:

- File your annual No-Change Affidavit within the required time period;

- Provide financial or other records requested pursuant to an audit within the required time period;
- Notify the City of any changes affecting your firm's certification **within 10 days** of such change; or
- File your recertification within the required time period.

Please be reminded of your contractual obligation to cooperate with the City with respect to any reviews, audits or investigation of its contracts and affirmative action programs. We strongly encourage you to assist us in maintaining the integrity of our programs by reporting instances or suspicions of fraud or abuse to the **City's Inspector General at chicagoinspectorgeneral.org, or 866-IG-TIPLINE (866-448-4754).**

Be advised that if you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. In addition to any other penalty imposed by law, any person who knowingly obtains, or knowingly assists another in obtaining a contract with the City by falsely representing the individual or entity, or the individual or entity assisted is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months, or a fine of not less than \$5,000 and not more than \$10,000 or both.

Your firm's name will be listed in the City's Directory of Minority and Women-Owned Business Enterprises in the specialty area(s) of:

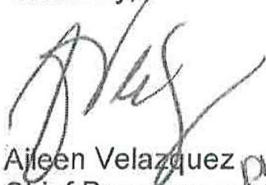
NAICS Code(s):

423120 -- Motor Vehicle Supplies and New Parts Merchant Wholesalers

Your firm's participation on City contracts will be credited only toward **WBE** goals in your area(s) specialty. While your participation on City contracts is not limited to your area of specialty, credit toward goals will be given only for work that is self-performed and providing a commercially useful function that is done in the approved specialty category.

Thank you for your interest in the City's Minority, Women-Owned Business Enterprise, Veteran-Owned Business Enterprise and Business Enterprise Owned or Operated by People with Disabilities (MBE/WBE/VBE/BEPD) Program.

Sincerely,



Aileen Velazquez
Chief Procurement Officer

AV/sl

SCHEDULE B

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
MBE/WBE PRIME CONTRACTOR MUST SUBMIT A SCHEDULE B, IF SELF-PERFORMING ANY WORK, TO RECEIVE MBE/WBE CREDIT

Project: _____

From: Suburban Truck Parts MBE: ☐ Yes ☒ No
(Name of MBE/WBE Firm) WBE: ☒ Yes ☐ No

To: Herc Rentals and the Chicago Park District:
(Name of Prime Contractor-Submitter)

The undersigned intends to perform work in connection with the above projects as a:

GENDER:

☐ Male
☒ Female

RACE/ETHNICITY:

☐ Black/African American
☐ Hispanic American
☐ Asian American
☒ White American
☐ Other _____

TYPE OF FIRM:

☐ Partnership
☐ Sole Proprietorship
☐ Corporation
☐ Joint Venturer
☒ Other LLC

The MBE/WBE status of the undersigned is confirmed by the attached current Letters of Certification from public or private entities such as the City of Chicago, the Chicago Minority Supplier Development Council (CMSDC), the Women's Business Development Center (WBDC), and the Small Business Administration.

Attach all current certification letters behind Schedule B.

The undersigned is prepared to provide the following services or supply the following goods in connection with the above project/contract:

Truck parts and supplies

The above described performance is offered for the following price and described terms of payment:
Net 30 days

If more space is needed to fully describe the MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets.

The undersigned will enter into a written agreement for the above work with you as prime contractor, conditioned upon your execution of a contract with the Chicago Park District, and will do so within (3) three working days of receipt of a signed contract from the Chicago Park District.

Signature: _____

(Signature of Owner or Authorized Agent of MBE/WBE)

Date: _____

4-29-2024

Name/Title: _____

LYNETTE CASTIGLIONE, MANAGING MEMBER

(Print or Type Name and Title)

Address: _____

6442 W. 111TH STREET, WORTH, IL 60482

Telephone: _____

708-827-5902

Fax: _____

708-671-8940

End of Schedule B

Certified Profile**CLOSE WINDOW** [Print](#)**Business & Contact Information**

BUSINESS NAME	Suburban Truck Parts, LLC
OWNER	Ms. Lynette Castiglione
ADDRESS	6442 W. 111th ST Worth, IL 60482 [map]
PHONE	708-827-5902
FAX	708-671-8940
EMAIL	Lynn@suburbantruckparts.com
ETHNICITY	Caucasian

Certification Information

CERTIFYING AGENCY	City of Chicago
CERTIFICATION TYPE	WBE - Women Business Enterprise
CERTIFICATION DATE	9/12/2023
RENEWAL DATE	6/15/2024
EXPIRATION DATE	6/15/2027
CERTIFIED BUSINESS DESCRIPTION	423120 -- Motor Vehicle Supplies and New Parts Merchant Wholesalers

Commodity Codes

Code	Description
NAICS 423120	Automotive parts, new, merchant wholesalers

Additional Information

WARD	N/A
COMMUNITY AREA	N/A