#### INSTRUCTIONS FOR COMPLETING SCHEDULES C & D

CHICAGO PARK DISTRICT

#### A. SCHEDULE C [STATEMENT OF SUBMITTER]

#### 1. Completion of Schedule C

- a. Schedule C must be completed and signed by the submitter.
- The submitter must identify the anticipated expenditure of participation by each MBE/WBE subcontractor and each non-MBE/WBE subcontractor listed on the Schedule C.
- Current certification letter for the submitter in the designated commodity area must be submitted.

#### 2. Joint Venture Attachment to Schedule C (Joint Venture only)

- a. If the submitter's plan includes an MBE/WBE joint venture partner, the submitter must submit, with the Schedule C, a copy of the parties' Joint Venture Agreement.
- b. The Alternate Signature Page of the Schedule C must be signed by the joint venture partners.

#### 3. Non-compliant Bid

Failure to submit a properly completed and signed Schedule C (and joint venture documentation, if applicable) will render the proposal non-compliant, which will remove the submitter from further award consideration.

#### B. SCHEDULE D [STATEMENT OF MBE/WBE FIRM(S)]

#### 1. Completion of Schedule D

- a. A Schedule D form must be completed and signed by each firm listed on the Schedule C as participating in the contract as a subcontractor. Only that subcontractor shall sign the Schedule D.
- b. That subcontractor must also submit, with their Schedule D, all of their current Letters of Certification obtained from public or private entities including the City of Chicago, Cook County, State of Illinois (CMS), Chicago Minority Supplier Development Council (CMSDC), Women's Business Development Center (WBDC), or the U.S. Small Business Administration (SBA).

#### 2. Non-compliant Bid

Failure of the submitter to submit a completed and signed Schedule D and current certification letter(s) for subcontractor(s) listed on the Schedule C may render the proposal non-compliant, which will remove the submitter from further award consideration.

#### SCHEDULE C Target Market Program

#### NOTE:

PARTICIPATION IN THE TARGET MARKET PROGRAM IS LIMITED TO SUBMITTERS WHICH ARE MBES, WBES, AND JOINT VENTURES CONSISTING EXCLUSIVELY OF MBES, WBES OR BOTH. HOWEVER, SUBCONTRACTORS MAY BE MBES, WBES, OR NON-MBE/WBES

TO BE COMPLETED BY SUBMITTER ONLY				
Statement of Submitter Regarding Its Subcontractor Utilization Plan				
Submitter: Smith Mainte	nance Company	JANITORIAL SERVICES FOR THE CENTRA COMFORT STATIONS, BEACH HOUSES, AND SPECIAL USE FACILITIES		
Specification #: P-23008				
Please identify the submitter's current certification status: MBE: ☑ Yes □ No WBE: □ Yes ☑ No				
Is the submitter currently certified in the designated commodity/service area?				
The submitter intends to pe	rform work in connection with this pr	oject 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		
Subcontracting:		a other		
<ol> <li>Subcontracting and supplying of goods and services directly related to the performance of this contract are open to MBE/WBE and non MBE/WBE firms. Subcontracting cannot exceed 50% of the total contract amount.</li> </ol>				
<ol> <li>All MBE/WBE firms included in the following plan must be certified as such by a public or private organization which the Chicago Park District accepts. These organizations include the City of Chicago, Cook County, State of Illinois (CMS), Chicago Minority Supplier Development Council (CMSDC), Women Business Development Center (WBDC), and the U.S. Small Business Administration.</li> </ol>				
Subcontractors:				
Identify both MBE/WBE Subcontractors and non MBE/WBE Subcontractors in the designated sections below. Please include the current company information, description of services/commodities being providing, anticipated participation dollar amount and percentage. If these MBE/WBE and non MBE/WBE subcontractors sections are left blank it will be assumed that your company is self performing 100% of the contract.				
MBE/WBE Subcontractors/Suppliers/Consultants: Please provide a current certification letter for each MBE/WBE company. N/A				
Smith Maintenance Company is an MBE company an will be self performing at 100% direct participaton.  1. Name of MBE/WBE: Smith Maintenance Company				

2221 W Walnut Street, Suite #2. Chicago, IL 60612

Address:

	Contact Person: Michael Smith	_ Phone: 312.733.4301	
	E-mail: mike@smithmaint.com		
	Services/Commodities Providing: Janitorial services an		
	MBE/WBE Participation: Dollars \$ \$1,136,358.36		%
	Will this subcontractor be used for direct or indirect particition. Schedule D and current certification letter attached? ☑ You	pation? (circle one)	
2.	Name of MBE/WBE: N/A		
	Address:		
	Contact Person:	Phone:	_
	E-mail:	Fax:	_
	Services/Commodities Providing:		
	MBE/WBE Participation: Dollars \$	Percent:	%
	Will this subcontractor be used for <u>direct</u> or <u>indirect</u> particing Schedule D and current certification letter attached?   Yellow		
3.	Name of MBE/WBE: N/A		
	Address:		
	Contact Person:	Phone:	_
	E-mail: Fax	α	
	Services/Commodities Providing:		
	MBE/WBE Participation: Dollars \$	Percent:	%
	Will this subcontractor be used for <u>direct</u> or <u>indirect</u> partici Schedule D and current certification letter attached? □ Ye	. , ,	
4.	Name of MBE/WBE: N/A	(A)	
	Address:		
	Contact Person:	Phone:	
	E-mail:Fax:		
	Services/Commodities Providing:		
	MBE/WBE Participation: Dollars \$	Percent:	%
	Will this subcontractor be used for <u>direct</u> or <u>indirect</u> partici Schedule D and current certification letter attached? □ Ye		

#### Non-MBE/WBE Subcontractors:

1.	Name of Subcontractor: N/A	<u>-</u>	
	Address:		
	Contact Person:	Phone:	_,
	E-mail: Fax:		
	Services/Commodities Providing:		
	Participation: Dollars \$	Percent:	%
2.	Name of Subcontractor: N/A		
	Address:		
	Contact Person:	Phone	_
	E-mail: Fax:		
	Services/Commodities Providing:		
	Participation: Dollars \$	Percent:	%
3.	Name of Subcontractor: N/A		
	Address:		
	Contact Person:	Phone:	
	E-mail: Fax: _		
	Services/Commodities Providing:		
	Participation: Dollars \$	Percent:	%
4.	Name of Subcontractor: N/A		
	Address:		
	Contact Person:	Phone:	_
	E-mail:	Fax:	
	Services/Commodities Providing:	· · · · · · · · · · · · · · · · · · ·	
	Participation: Pollars \$	Parcent:	0/

## (Attach additional sheets if necessary)

### II. Summary of Subcontractor Utilization Plan:

A.	MBE Participation:			
	MBE Firm Name	Dollar amount of Participation	Percent amount of Participation	Direct or Indirect (check $\sqrt{\text{one}}$ )
	Smith Maintenance Company	\$ 1,136,358.36	100 <u></u> %	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
			Percent amount of	
	WBE Firm Name	Participation	Participation	(check √ one)
	N/A	\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
		\$	%	
	Total WBE Participation:	\$		%

C. Non-MBE/WBE Participation	tion:	articip	VBE	MBE/	Non-I	C.
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Non-MBE/WBE Firm Name	Dollar Amoun	t of	Percent Amount of	Direct / Indirect
	Participation		Participation	(check √ one)
N/A	\$		%	
	\$		%	
	\$		%	
	\$		%	
	\$		%	
	\$		%	
	\$	===	%	
	\$		%	
Total Non-MBE/WBE Particip	oation:		\$	%
The submitter designates the following pe	erson as its Sch	nedule	C Liaison:	
Michael Smith , President		( <mark>312</mark>	733.4301	
(Name and Title)		(Phone	Number)	
(312.) 733.4301		_		
(Fax Number)				

mike@smithmaint.com

(Email Address)

#### SCHEDULE C SIGNATURE PAGE

#### (Complete this signature page only if you are the MBE/WBE operating as the submitter)

To the best of my knowledge, information and belief, the facts and representations contained in this Schedule C are true, and no material facts have been omitted.

The submitter is currently certified in the appropriate category of services and is self performing a minimum of 50% of the contract value.

Any material misrepresentation will be grounds for terminating any contract that may be awarded and for initiating action under federal or state laws concerning false statements.

Submitter:	Smith Maintenance Company		Date: 02/20/2024
Signature:	(Print or Type Name of Business)		Date: 02/20/2024
51511ata101	(Written Signature of Authorized Officer/Representative)		<i></i>
Name/Title:	Michael Smith , President		
	(Print or Type Name and Title of Person Signing Statement)		
Subscribed to before n County,	ne on (date) 20th February	at Cook	<u> </u>
Illinois	(state).		
	(2-3-3-5).		
Print or type name of s	signatory:		
Michael Smith		-	
M	aria Diag Bermudez		, Notary Public
	0		
Commission Euripes	01/31/2028		Seal
Commission Expires: _	0170172020		
		Notary P	Official Seal
		Mari	Official Seal a Diaz-Bermudez mission # 907750 mission Expires 1/31/2028
		, 50	

#### SCHEDULE C SIGNATURE PAGE FOR MBE/WBE JOINT VENTURE FIRMS N/A

(Complete this signature page only if you are a MBE/WBE operating as a joint venture with a MBE/WBE firm)

To the best of my knowledge, information and belief, the facts and representations contained in this Schedule are true, and no material facts have been omitted.

Any material misrepresentation will be grounds for terminating any contract that may be awarded and for initiating action under federal or state laws concerning false statements.

#### NOTE:

After filing this statement and before the completion of the joint venture's work on this project, if there is any change in the information submitted, the joint venturer must inform the Chicago Park District.

Attach joint venture agreement clearly describing the role of each MBE/WBE firm and its ownership interest in the joint venture.

(Name of MBE/WBE Partner Firm)	(Name of MBE/WBE Partner Firm)
(Written Signature of Authorized Officer/Representative)	(Written Signature of Authorized Officer/Representative)
(Print or Type Name and Title)	(Print or Type Name and Title)
(Date)	(Date)
Subscribed to before me on (date) County,	, at
Print or type name of signatory:	
	, Notary Public
Commission Expires:	Seal
9	

# SCHEDULE D FOR MBE OR WBE SUBCONTRACTOR

## Target Market Program

	CON	MPLETE THIS PAGE ONLY IF Y	OU ARE A MBE or WBE SUBCONTRACTOR
	State		erform as Subcontractor, Supplier and/or Consultant FORM IF YOU ARE THE PRIME SUBMITTER
	CENTRAL L	AKEFRONT COMFORT STATIONS,	IFICATION NUMBER: P-23008 BEACH HOUSES, AND SPECIAL USE FACILITIES
From:		ance Company	MBE: □ Yes □ No
	(Name of MBE		WBE: ☐ Yes ☐ No
To:		ance Company	and the Chicago Park District
	(Name of Prim	e Contractor-Submitter)	
	Th	ne undersigned intends to perform wo	rk in connection with the above projects as a:
	GENDER:	RACE/ETHNICITY:	Type of Firm:
	Male	☐ Black/African American	☐ Partnership
	Female	☐ Hispanic American	☐ Sole Proprietorship
		Asian American	☑ Corporation
		☐ White American	☐ Joint Venture
		Other	Other
the	City of Chicago, Women's B undersigned is p	Cook County, State of Illinois (CMS tusiness Development Center (WBDC Attach all current certific repared to provide the following serv	rent Letters of Certification from public or private entities including ), Chicago Minority Supplier Development Council (CMSDC), C), and the U.S. Small Business Administration (SBA).  ation letters behind Schedule D.  ices or supply the following goods in connection with the above CENTRAL LAKEFRONT COMFORT
STATIO	ONS, BEACH H	IOUSES, AND SPECIAL USE FA	CILITIES
\$1,136	The above 6,358.36	e described performance is offered for	the following price and described terms of payment:
If n	nore space is need		firm's proposed scope of work and/or payment schedule, attach onal sheets.
Signatur		ature of Owner or Authorized Agent	Date: 02/20/2024
N. //			
Name/T		t or Type Name and Title)	
Address	222	21 W Walnut Street, Suite #2 C	hicago, IL 60612
Telepho		2.733.4301 312	2.733.4601

## SCHEDULE D FOR NON-MBE OR NON-WBE SUBCONTRACTOR

N/A

# Target Market Program

## COMPLETE THIS PAGE ONLY IF YOU ARE A NON-MBE or NON-WBE SUBCONTRACTOR

Statement of Intent from NON-MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

Statement of Intent from NON-MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant PROJECT\_\_\_\_\_\_SPECIFICATION NUMBER: From: (Name of Non-MBE/WBE Firm) To: and the Chicago Park District: (Name of Prime Contractor-Submitter) The undersigned intends to perform work in connection with the above projects as a: TYPE OF FIRM: ☐ Partnership ☐ Sole Proprietorship ☐ Corporation ☐ Joint Venture Other The undersigned is prepared to provide the following services or supply the following goods in connection with the above project: The above described performance is offered for the following price and described terms of payment: If more space is needed to fully describe the Non-MBE/WBE firm's proposed scope of work and/or payment schedule, attach additional sheets. Signature: (Signature of Owner or Authorized Agent of Non- MBE/WBE) Name/Title: (Print or Type Name and Title) Address:

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

#### MBE/WBE UTILIZATION REPORTING REQUIREMENTS

CHICAGO PARK DISTRICT

The MBE/WBE Utilization Report form will be provided to the awardee after the awardee's has received a notice to proceed. The awardee's MBE/WBE Utilization Report will be due with each request for payment.

All utilization reports must be accompanied by the following supporting documentation:

- 1. Signed & notarized waivers of lien, when applicable
- 2. Copies of invoices from MBE(s) & WBE(s) for services provided ON THIS CONTRACT ONLY
- 3. Copies of cancelled checks (both sides), wire transfers, and other forms of payments to MBE(s) and WBE(s). These payments must be for services provided ON THIS CONTRACT ONLY

Do not submit invoices with the "MBE/WBE Utilization Report."

Submission Address: MBE/WBE Utilization Reports are to be submitted directly to:

Compliance Officer
Department of Purchasing
Chicago Park District
541 N. Fairbanks Court
3rd Floor
Chicago, IL. 60611

**Submission Fax: 312-742-5326** 

**End of MBE/WBE Utilization Reporting Requirements** 



#### DEPARTMENT OF PROCUREMENT SERVICES

Smith Maintenance Company 2221 W. Walnut, Suite 2 Chicago, Illinois 60612

We are pleased to inform you that Smith Maintenance Company is recertified as a Minority-Owned Business Enterprise ("MBE") by the City of Chicago ("City"). This MBE certification is valid until 6/15/2025; 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 6/15/2021, 6/15/2022, 6/15/2023 and 6/15/2024. 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 6/15/2025. 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 4/15/2025.

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:

- 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;
- 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):

238350 - Carpenters (except framing)

238990 – Asphalt Coating and Sealing, Residential and Commercial Parking Lot and Driveway

237110 – Distribution and Utility Line, Sewer and Water, Construction (i.e., water main/line Construction)

237310 - Parking Lot Marking and Line Painting

561720 - Janitorial Services (i.e., window cleaning)

561790 - Parking Lot Cleaning (e.g., power sweeping, washing) Services

561990 - Flagging (i.e., traffic control) Services

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

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SEA/li