

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: DuSABLE PARK DESIGN ALLIANCE

Project: DuSABLE PARK (PARK 478) PLANNING AND DESGN

Specification #: P-21009

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? Yes No

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

Subcontracting:

1. 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.

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.

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.

1. Name of MBE/WBE: DAVID MASON

Address: 333 N. DESPLAINES STREET, CHICGAO IL 60661

Contact Person: NOULA FRIGELIS Phone: (312) 884-5100
E-mail: NFRIGELIS@DAVIDMASON.COM Fax: (312) 884-5100
Services/Commodities Providing: ENGINEERING SERVICES
MBE/WBE Participation: Dollars \$ 362,820.00 Percent: 12.64 %
Will this subcontractor be used for direct or indirect participation? (**circle one**)
Schedule D and current certification letter attached? Yes No

2. Name of MBE/WBE: DELTA ENGINEERING
Address: 111 W. JACKSON BLVD, SUITE 910, CHICAGO IL 60604
Contact Person: KATHLEEN PORTER Phone: (312) 291-6576
E-mail: KPORTER@DEG-AMERICA.COM Fax: (312) 377-7700
Services/Commodities Providing: ENGINEERING SERVICES
MBE/WBE Participation: Dollars \$ 94,612.00 Percent: 3.30 %
Will this subcontractor be used for direct or indirect participation? (**circle one**)
Schedule D and current certification letter attached? Yes No

3. Name of MBE/WBE: HUGH LIGHTING DESIGN
Address: 212 SOUTH MARION STREET, SUITE 1, OAK PARK IL 60302
Contact Person: PETER HUGH Phone: (708) 445-0995
E-mail: PETER@HUGHLIGHTINGDESIGN.COM Fax: N/A
Services/Commodities Providing: LIGHTING DESIGN
MBE/WBE Participation: Dollars \$ 85,280.00 Percent: 2.97 %
Will this subcontractor be used for direct or indirect participation? (**circle one**)
Schedule D and current certification letter attached? Yes No

4. Name of MBE/WBE: BROOK ARCHITECTURE
Address: 2301 S. MICHIGAN AVE, CHICAGO IL 60616
Contact Person: RAMONA WESTBROOK Phone: (312) 348.1041
E-mail: RWESTBROOK@BROOKARCHITECTURE.COM Fax: (312) 356-1041
Services/Commodities Providing: ARCHITECTURAL (EXCEPT LANDSCAPE) DESIGN SERVICES
MBE/WBE Participation: Dollars \$ 740,758.30 Percent: 25.80 %
Will this subcontractor be used for direct or indirect participation? (**circle one**)
Schedule D and current certification letter attached? Yes No

5. Name of MBE/WBE: ROSS BARNEY ARCHITECTS
Address: 10 W. HUBBARD STREET, CHICAGO ILLINOIS 60654
Contact Person: CAROL ROSS BARNEY, FAIA, HON. ASLA Phone: (312) 897-1750
E-mail: CRB@R-BARC.COM Fax: N/A
Services/Commodities Providing: LICENSED PROFESSIONAL SERVICES; ARCHITECTURAL SERVICES;
INTERIOR DESIGN; URBAN PLANNING AND HISTORIC RESTORATION;
LANDSCAPE ARCHITECTURAL SERVICES
MBE/WBE Participation: Dollars \$ 723,682.70 Percent: 25.21 %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule D and current certification letter attached? Yes No

6. Name of MBE/WBE: MBDB CONSULTANTS
Address: 6757 S JEFFERY BLVD, CHICAGO IL 60649
Contact Person: JULIA PERKINS Phone: (773) 288-2988
E-mail: MBMDConsultants@msn.com Fax: _____
Services/Commodities Providing: GENERAL MANAGEMENT CONSULTING SERVICES
MBE/WBE Participation: Dollars \$ 29,640.00 Percent: 1.03 %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule D and current certification letter attached? Yes No

7. Name of MBE/WBE: DYNASTY GROUP
Address: 211 W. WACKER DR, SUITE 305
Contact Person: KRISTEN BOUCHARD Phone: (312) 704.1970
E-mail: KNOUCHARD@DYNASTYGROUP.COM Fax: _____
Services/Commodities Providing: LAND SURVEYING
MBE/WBE Participation: Dollars \$ 42,050.00 Percent: 1.46 %
Will this subcontractor be used for direct or indirect participation? (circle one)
Schedule D and current certification letter attached? Yes No

MBE/WBE Subcontractors:

5 Name of Subcontractor: GSG CONSULTANTS
Address: 735 REMINGTON ROAD SCHAUMBURG, IL 60173
Contact Person: ALA SASSILA, PH.D, PE Phone: (630) 994-2600
E-mail: asassila@gsg-consultants.com Fax: _____
Services/Commodities Providing: GEOTECHNICAL ENGINEERING DESIGN
Participation: Dollars \$ 54,460.00 Percent: 1.90 %

6. Name of Subcontractor: _____
Address: _____
Contact Person: _____ Phone _____
E-mail: _____ Fax: _____
Services/Commodities Providing: _____
Participation: Dollars \$ _____ Percent: _____ %

7. Name of Subcontractor: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
Services/Commodities Providing: _____
Participation: Dollars \$ _____ Percent: _____ %

8 Name of Subcontractor: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
Services/Commodities Providing: _____
Participation: Dollars \$ _____ Percent: _____ %

Non-MBE/WBE Subcontractors:

1. Name of Subcontractor: DR. CHRISTOPHER REED, PH.D
Address: 430 S. MICHIGAN AVENUE, CHICAGO IL 60605
Contact Person: DR. CHRISTOPHER REED Phone: (312) 385.9179
E-mail: CREED@ROOSEVELT.EDU Fax: N/A
Services/Commodities Providing: HISTORICAL REFERENCE
Participation: Dollars \$ 28,230.00 Percent: 0.98 %

2. Name of Subcontractor: SCOLEMAN DESIGN
Address: 1932 S. WABASH AVENUE, CHICAGO IL 60616
Contact Person: SUSAN COLEMAN Phone (312) 925.3835
E-mail: INFO@SCOLEMANDESIGN.NET Fax: N/A
Services/Commodities Providing: ENVIRONMENTAL GRAPHICS AND WAYFINDING
Participation: Dollars \$ 86,550.00 Percent: 3.01 %

3. Name of Subcontractor: SYLVAIN STUDIOS
Address: 1364 E. 48TH STREET, CHICAGO, IL 60615
Contact Person: DORIAN SYLVAIN Phone: (773) 544.1715
E-mail: SYLVAINSTUDIO@DORIANSYLVAIN.COM Fax: N/A
Services/Commodities Providing: ART CURATION
Participation: Dollars \$ 91,730.00 Percent: 3.20 %

4. Name of Subcontractor: BENESCH
Address: 1230 DIEHL ROAD, #109, NAPERVILLE IL 60523
Contact Person: KURT NAUS Phone: _____
E-mail: KNAUS@BENESCH.COM Fax: N/A
Services/Commodities Providing: MARINE ENGINEERING
Participation: Dollars \$ 53,500.00 Percent: 1.86 %

Non-MBE/WBE Subcontractors:

5 Name of Subcontractor: THE CONCORD GROUP
Address: 55 E. MONROE, SUITE 2850, CHICAGO IL 60603
Contact Person: JOHN TILLMAN Phone: (312) 424.0250
E-mail: JTILLMAN@CONCORD-CC.COM Fax: _____
Services/Commodities Providing: COST ESTIMATING
Participation: Dollars \$ 110,600.00 Percent: 3.85 %

6. Name of Subcontractor: K2N CREST
Address: 1010 JORIE BLVD. SUITE 320, OAK BROOK IL 60523
Contact Person: RENEE KIMBALL Phone (630) 990.9595
E-mail: RENEEKIMBALL@K2N.COM Fax: N/A
Services/Commodities Providing: ENGINEERING SERVICES
Participation: Dollars \$ 127,900.00 Percent: 4.46 %

7. Name of Subcontractor: HNTB CORPORATION
Address: 1 S WACKER DR, CHICAGO, IL 60606
Contact Person: TONY SHKURTI Phone: (312) 798-0230
E-mail: TSHKURTI@HNTB.COM Fax: _____
Services/Commodities Providing: ENGINEERING SERVICES
Participation: Dollars \$ 81,300.00 Percent: 2.83 %

8 Name of Subcontractor: _____
Address: _____
Contact Person: _____ Phone: _____
E-mail: _____ Fax: _____
Services/Commodities Providing: _____
Participation: Dollars \$ _____ Percent: _____ %

C. Non-MBE/WBE Participation:

<u>Non-MBE/WBE Firm Name</u>	<u>Dollar Amount of Participation</u>	<u>Percent Amount of Participation</u>	<u>Direct / Indirect (check \checkmark one)</u>
<u>DR. CHRISTOPHER REED, PH.D</u>	<u>\$ 28,230.00</u>	<u>0.98 %</u>	<u>\checkmark _____</u>
<u>sCOLEMAN DESIGN</u>	<u>\$ 86,550.00</u>	<u>3.01 %</u>	<u>\checkmark _____</u>
<u>SYLVAIN STUDIOS</u>	<u>\$ 91,730.00</u>	<u>3.20 %</u>	<u>\checkmark _____</u>
<u>BENESCH</u>	<u>\$ 53,500.00</u>	<u>1.86 %</u>	<u>\checkmark _____</u>
<u>THE CONCORD GROUP</u>	<u>\$ 110,600.00</u>	<u>3.85 %</u>	<u>\checkmark _____</u>
<u>K2N CREST</u>	<u>\$ 127,900.00</u>	<u>4.46 %</u>	<u>\checkmark _____</u>
<u>HNTB CORPORATION</u>	<u>\$ 81,300.00</u>	<u>2.83 %</u>	<u>\checkmark _____</u>
<u>_____</u>	<u>\$ _____</u>	<u>_____ %</u>	<u>_____</u>
Total Non-MBE/WBE Participation:		\$ 579,810.00	21.37 %

The submitter designates the following person as its Schedule C Liaison:

RaMona Westbrook, President (312) 348.1041

(Name and Title)

(Phone Number)

(312) 356.1041

(Fax Number)

rwestbrook@brookarchitecture.com

(Email Address)

SCHEDULE C SIGNATURE PAGE FOR MBE/WBE JOINT VENTURE FIRMS

(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)

Brook Architecture

(Written Signature of Authorized Officer/Representative)

(Print or Type Name and Title)

RaMona Westbrook, President

(Date)

3/26/2026

(Name of MBE/WBE Partner Firm)

Ross Barney Architects

(Written Signature of Authorized Officer/Representative)

(Print or Type Name and Title)

Carol Ross Barney, President

(Date)

03.26.26

Subscribed to before me on (date) 3/26/26, at Cook County,

Illinois (state).

Print or type name of signatory:

Lauren Eaton

, Notary Public

Commission Expires: 2/6/28

Seal

OFFICIAL SEAL
LAUREN ELIZABETH EATON
Notary Public, State of Illinois
Commission No. 988643
My Commission Expires February 06, 2028

SCHEDULE D FOR MBE OR WBE SUBCONTRACTOR Target Market Program

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

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

PROJECT RFP DuSable Park Planning & Design SPECIFICATION NUMBER: P-21009

From: David Mason & Associates MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSable Park Design Alliance 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 Venture
 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

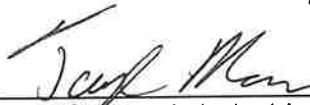
The undersigned is prepared to provide the following services or supply the following goods in connection with the above project:

Engineering Services – Civil and Structure

The above-described performance is offered for the following price and described terms of payment:

<u>Engineering Services</u>	<u>\$274,070 (Structure)</u>
	<u>\$88,750 (Civil)</u>
	<u>\$362,820 (TOTAL)</u>
	<u>Payment Terms Percentage Complete Monthly</u>

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

Signature:  Date: 3/26/26
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Taylor Mason, Principal
(Print or Type Name and Title)

Address: 333 S. Desplaines St., Suite 200, Chicago, IL 60661

Telephone: 312.884.5100 Fax: 312.884.5101

**SCHEDULE D
FOR MBE OR WBE SUBCONTRACTOR
Target Market Program**

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

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

PROJECT DuSABLE PARK (PARK 478)
PARK PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: Delta Engineering Group, LLC MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSABLE PARK DESIGN ALLIANCE 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 Venture
 Other Limited Liability Corporation

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

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

Electrical Engineering Services

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

\$94,612.00

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

Signature:  Date: 3/25/2026
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Syed Shuja Kazi, Chief Executive Officer
(Print or Type Name and Title)

Address: 111 W Jackson Blvd Suite 910

Telephone: 312-291-6564 Fax: 312-427-6145

**SCHEDULE D
FOR MBE OR WBE SUBCONTRACTOR
Target Market Program**

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

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

PROJECT DuSABLE PARK (PARK 478)
PARK PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: Hugh Lighting Design, LLC MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSABLE PARK DESIGN ALLIANCE 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 Venture
 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

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

Lighting Design

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

\$85,280.00

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

Signature: _____ Date: 3/25/2026
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Peter A. Hugh, President
(Print or Type Name and Title)

Address: 4753 N. Broadway, #P128 Chicago, IL 60640

Telephone: 708-445-0995 Fax: _____

SCHEDULE D FOR MBE OR WBE SUBCONTRACTOR Target Market Program

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

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

PROJECT DuSABLE PARK (PARK 478)
PARK PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: Brook Architecture MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSABLE PARK DESIGN ALLIANCE 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 Venture
 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

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

Architectural (except landscape) design services

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

\$740,758.30

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

Signature:  Date: 03/26/2026

Name/Title: RaMona Westbrook, President
(Print or Type Name and Title)

Address: 2301 S. Michigan Ave., Chicago, IL 60616

Telephone: (312) 348-1041 Fax: (312) 356-1041

SCHEDULE D FOR MBE OR WBE SUBCONTRACTOR Target Market Program

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

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

DuSABLE PARK (PARK 478)

SPECIFICATION NUMBER: P-21009

PROJECT PARK PLANNING AND DESIGN

From: Ross Barney Architects

(Name of MBE/WBE Firm)

MBE: Yes No

WBE: Yes No

To: DuSABLE PARK DESIGN ALLIANCE

(Name of Prime Contractor-Submitter)

and the Chicago Park District:

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

TENDER:

Male
 Female

RACE/ETHNICITY:

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

TYPE OF FIRM:

Partnership
 Sole Proprietorship
 Corporation
 Joint Venture
 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

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

Licensed Professional Services: Architectural Services; Interior Design, Urban Planning and Historic Restoration; Landscape Architectural Services

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

\$723,682.70

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

Signature: _____

Carol Ross Barney
(Signature of Owner or Authorized Agent of MBE/WBE)

Date: 03.26.26

Name/Title: _____

Carol Ross Barney, Principal

Address: _____

10 West Hubbard Street, 4th Floor, Chicago.

Telephone: 312 897 1750

F : N/A

**SCHEDULE D
FOR MBE OR WBE SUBCONTRACTOR
Target Market Program**

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Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

PROJECT DuSABLE PARK (PARK 478)
PARK PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: MBMD Strategic Consultants, LLC MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSABLE PARK DESIGN ALLIANCE 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 Venture
 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

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

Community Outreach Consultant

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

\$29,640.00

Payment Terms Percentage Complete Monthly

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

Signature:  Date: 3-25-26
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Julia Perkins, Chief Strategist
(Print or Type Name and Title)

Address: 6757 S. Jeffery Blvd, Chicago IL 60649

Telephone: 773-288-2988 Fax: _____

SCHEDULE D FOR MBE OR WBE SUBCONTRACTOR Target Market Program

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

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant
Do NOT fill out or sign this form if you are the PRIME SUBMITTER

PROJECT RFP DuSable Park Planning & Design SPECIFICATION NUMBER: P-21009

From: Dynasty Group, Inc. MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSable Park Design Alliance 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
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 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.


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

Surveying

The above-described performance is offered for the following price and described terms of payment:

\$42,050.00

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

Signature:  Date: 3/26/2026
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Zhong Chen, President
(Print or Type Name and Title)

Address: 211 W. Wacker Dr., Suite 304, Chicago, IL 60606

Telephone: 312.656.4756 Fax: _____

SCHEDULE D FOR MBE OR WBE SUBCONTRACTOR Target Market Program

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

Statement of Intent from MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

PROJECT DuSABLE PARK (PARK 478)
PARK PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: GSG Consultants MBE: Yes No
(Name of MBE/WBE Firm) WBE: Yes No

To: DuSABLE PARK DESIGN ALLIANCE 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 Venture
 Other _____

The MBE/WBE status of the undersigned is confirmed by current Letters of Certification 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), and the U.S. Small Business Administration (SBA).

Attach all current certification letters behind Schedule D.

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

Geotechnical Engineering Design

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

\$54,460.00

Payment Terms Percentage Complete Monthly

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

Signature:  Date: 3/25/2026
(Signature of Owner or Authorized Agent of MBE/WBE)

Name/Title: Ala Sassila, Principal
(Print or Type Name and Title)

Address: 735 Remington Road Schaumburg, IL 60173

Telephone: 630-994-2600 Fax: _____

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

RFP DuSable Park (Park 478)

PROJECT: Park Planning and Design SPECIFICATION NUMBER: P-21009

From: Dr. Christopher Reed, PH.D
(Name of Non-MBE/WBE Firm)

To: DuSable Park Design Alliance 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:

Historical Reference

The above-described performance is offered for the following price and described terms of payment:

\$28,230.00

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: Christopher R. Reed Date: March 25, 2026
(Signature of Owner or Authorized Agent of Non-MBE/WBE)

Name/Title: Christopher R. Reed, Historical Consultant
(Print or Type Name and Title)

Address: 7000 S Lake Shore Drive, Unit D 1201

Telephone: 312-385-9179 Fax: _____

SCHEDULE D FOR NON-MBE OR NON-WBE SUBCONTRACTOR Target Market Program

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

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Statement of Intent from NON-MBE/WBE to Perform as Subcontractor, Supplier and/or Consultant

RFP DuSable Park (Park 478)

PROJECT Park Planning and Design SPECIFICATION NUMBER: P-21009

From: sColeman Design
(Name of Non-MBE/WBE Firm)

To: DuSable Park Design Alliance 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:

Environmental graphics and wayfinding

The above-described performance is offered for the following price and described terms of payment:

\$86,550.00

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:  Date: 3/25/24
(Signature of Owner or Authorized Agent of Non-MBE/WBE)

Name/Title: Susan Coleman
(Print or Type Name and Title)

Address: 1932 S Wabash Ave Unit 2, Chicago, IL 60616

Telephone: 312-925-3835 Fax: _____

SCHEDULE D FOR NON-MBE OR NON-WBE SUBCONTRACTOR Target Market Program

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

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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

DuSABLE PARK (Park 478) PARK
PROJECT PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: Benesch
(Name of Non-MBE/WBE Firm)

To: DuSABLE PARK DESIGN ALLIANCE 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:

Marine engineering

The above-described performance is offered for the following price and described terms of payment:
\$53,500.00

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:  Date: 03/26/2026
(Signature of Owner or Authorized Agent of Non-MBE/WBE)

Name/Title: Andrew Keaschall, Senior Vice President
(Print or Type Name and Title)

Address: 35 W. Wacker Drive, Suite 3300, Chicago, IL 60601

Telephone: 312-565-0450 Fax: _____

SCHEDULE D FOR NON-MBE OR NON-WBE SUBCONTRACTOR 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

DuSABLE PARK (Park 478) PARK
PROJECT PLANNING AND DESIGN SPECIFICATION NUMBER: P-21009

From: The Concord Group
(Name of Non-MBE/WBE Firm)

To: DuSABLE PARK DESIGN ALLIANCE 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:

Cost estimating

The above-described performance is offered for the following price and described terms of payment:

\$110,600.00

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:  Date: March 25, 2026
(Signature of Owner or Authorized Agent of Non-MBE/

Name/Title: WBE) John Tilleman, Director, Analytics & Technology
(Print or Type Name and Title)

Address: 55 E. Monroe St. Suite 2850 Chicago, IL 60603

Telephone: 312-424-0250 Fax: 312-424-0252

SCHEDULE D FOR NON-MBE OR NON-WBE SUBCONTRACTOR 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

RFP DuSable Park (Park 478)

PROJECT Park Planning and Design SPECIFICATION NUMBER: P-21009

From: K2N Crest
(Name of Non-MBE/WBE Firm)

To: DuSable Park Design Alliance 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:

Structural Engineering

The above-described performance is offered for the following price and described terms of payment:

\$127,900.00

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:  Date: 03-26-2026
(Signature of Owner or Authorized Agent of Non-MBE/WBE)

Name/Title: _____
(Print or Type Name and Title)

Address: 1010 Jorie Blvd., Suite 320, Oak Brook, IL 60523

Telephone: 630-990-9595 Fax: 630-990-9598

SCHEDULE D FOR NON-MBE OR NON-WBE SUBCONTRACTOR 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

RFP DuSable Park (Park 478)

PROJECT ParkPlanning and Design SPECIFICATION NUMBER: P-21009

From: HNTB Corporation
(Name of Non-MBE/WBE Firm)

To: DuSable Park Design Alliance 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:

Structural Engineering Peer Review

The above-described performance is offered for the following price and described terms of payment:

\$81,300.00

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:  Date: 3/25/2026
(Signature of Owner or Authorized Agent of Non- MBE/WBE)

Name/Title: _____
(Print or Type Name and Title)

Address: 1 S Wacker Dr, Chicago, IL 60606

Telephone: 312-798-0230 Fax: _____

Certified Profile

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Business & Contact Information

BUSINESS NAME **Ross Barney Architects, P.C., DBA none**

OWNER **Ms. Carol Ross Barney**

ADDRESS **10 W. Hubbard St., 4th Floor
Chicago, IL 60654-4638 [\[map\]](#)**

PHONE **312-832-0600**

FAX **312-832-0601**

EMAIL **wba@r-barc.com**

WEBSITE **<http://r-barc.com>**

ETHNICITY **Caucasian**

Certification Information

CERTIFYING AGENCY **Cook County**

CERTIFICATION TYPE **WBE - Women Business Enterprise**

CERTIFICATION DATE **10/18/2024**

RENEWAL DATE **9/7/2025**

EXPIRATION DATE **9/7/2027**

CERTIFIED BUSINESS DESCRIPTION **Licensed Professional Services; Architectural Services; Interior Design; Urban Planning and Historic Restoration; Landscape Architectural Services**

Business & Contact Information

BUSINESS NAME MBMD Strategic Consultants, LLC
OWNER Julia Perkins
ADDRESS 6757 South Jeffery, Suite A
Chicago, IL 60649-1051 [\[map\]](#)
PHONE 773-288-2988
FAX 773-288-1994
EMAIL mbmdconsultants@msn.com
WEBSITE <http://www.mbmdconsultants.com>
ETHNICITY African American

Certification Information

CERTIFYING AGENCY City of Chicago
CERTIFICATION TYPE WBE - Women Business Enterprise
CERTIFICATION DATE 8/28/2024
RENEWAL DATE 10/1/2025
EXPIRATION DATE 10/1/2025
CERTIFIED BUSINESS DESCRIPTION NAICS 541611 General management consulting services
NAICS 541613 Marketing consulting services

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Business & Contact Information

BUSINESS NAME **Hugh Lighting Design, LLC**
OWNER **Mr. Peter Hugh**
ADDRESS **212 South Marion St.
Ste. 1
Oak Park, IL 60302 [\[map\]](#)**
PHONE **708-445-0995**
EMAIL **peter@hughlightingdesign.com**
WEBSITE **<http://www.hughlightingdesign.com>**
ETHNICITY **Asian-Pacific American**

Certification Information

CERTIFYING AGENCY **Cook County**
CERTIFICATION TYPE **MBE - Minority Business Enterprise**
CERTIFICATION DATE **4/11/2024**
RENEWAL DATE **4/1/2025**
EXPIRATION DATE **4/1/2029**
CERTIFIED BUSINESS DESCRIPTION **Construction: Lighting Design Services (Interior/Exterior)**

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Business & Contact Information

BUSINESS NAME
GSG Consultants, Inc.

OWNER
Mr. Guillermo Garcia

ADDRESS
**735 Remington Road
Schaumburg, IL 60173 [\[map\]](#)**

PHONE
630-994-2600

FAX
630-994-2680

EMAIL
ggarcia@gsg-consultants.com

WEBSITE
<http://www.gsg-consultants.com>

ETHNICITY
Hispanic/Latino

Certification Information

CERTIFYING AGENCY
City of Chicago

CERTIFICATION TYPE
MBE - Minority Business Enterprise

CERTIFICATION DATE
5/20/2024

RENEWAL DATE
6/1/2025

EXPIRATION DATE
6/1/2026

CERTIFIED BUSINESS DESCRIPTION
**NAICS Code(s):
236220 - Construction Management, Commercial and Institutional Building
237310 - Construction Management, Highway, Road, Street, Bridge
238910 - Soil Testing Drilling
541330 - Civil Engineering Services**

- 541380 - Geotechnical Testing Laboratories of Services
- 541620 - Environmental Consulting Services
- 541690 - Safety Consulting Services
- 541360 Geophysical Surveying and Mapping Services
- 541370 Surveying and Mapping (except Geophysical) Services

Commodity Codes

Code	Description
NAICS 236220	Construction management, commercial and institutional building
NAICS 237310	Construction management, highway, road, street and bridge
NAICS 238910	Soil test drilling
NAICS 541330	Civil engineering services
NAICS 541360	Geophysical Surveying and Mapping Services
NAICS 541370	Surveying and Mapping (except Geophysical) Services
NAICS 541380	Geotechnical testing laboratories or services
NAICS 541620	Environmental consulting services
NAICS 541620	Sanitation consulting services
NAICS 541690	Safety consulting services

Additional Information

WARD

N/A

COMMUNITY AREA

N/A

QUALIFIED INVESTMENT AREA

N/A

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Business & Contact Information

David Mason & Associates of Illinois, Ltd., DBA David Mason & Associates of Illinois, Ltd.

BUSINESS NAME

OWNER

ADDRESS

PHONE

FAX

EMAIL

WEBSITE

ETHNICITY

Mr. David W. Mason

333 S. Desplaines
Ste. 200

Chicago, IL 60661-5523 [[map](#)]

312-884-5100 Ext. 3128

312-884-5101

rkafantzis@davidmason.com

<http://www.davidmason.com>

African American

Certification Information

CERTIFYING AGENCY

CERTIFICATION TYPE

CERTIFICATION DATE

RENEWAL DATE

EXPIRATION DATE

CERTIFIED BUSINESS DESCRIPTION

City of Chicago

MBE - Minority Business Enterprise

5/1/2024

4/30/2025

4/30/2025

NAICS 541310 Architectural Services
NAICS 541330 Engineering services

NAICS 541350 Building inspection services

Commodity Codes

Code	Description
NAICS 541310	Architectural Services
NAICS 541330	Engineering services
NAICS 541350	Building inspection services

Additional Information

WARD	34
COMMUNITY AREA	24 West Town
QUALIFIED INVESTMENT AREA	No

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Business & Contact Information

BUSINESS NAME
Delta Engineering Group, LLC

OWNER
Mr. Syed Shujaiddin Kazi

ADDRESS
111 W JACKSON BLVD., STE. 910
CHICAGO, IL 60604 [\[map\]](#)

PHONE
312-377-7700 Ext. 6582

FAX
312-427-6145

EMAIL
rkhan@deg-america.com

WEBSITE
<http://www.deg-america.com>

ETHNICITY
Asian American

Certification Information

CERTIFYING AGENCY
City of Chicago

CERTIFICATION TYPE
MBE - Minority Business Enterprise

CERTIFICATION DATE
3/7/2024

RENEWAL DATE
5/15/2025

EXPIRATION DATE
5/15/2025

CERTIFIED BUSINESS DESCRIPTION
NAICS 541330 Engineering services
NAICS 541340 Drafting services

Commodity Codes


Code	Description
NAICS 541330	Engineering services
NAICS 541340	Drafting services

Additional Information

WARD **34**
COMMUNITY AREA **32 Loop**
QUALIFIED INVESTMENT AREA **No**

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Business & Contact Information

BUSINESS NAME
Brook Architecture Inc.

OWNER
Ms. Ramona Westbrook

ADDRESS
2301 S. Michigan Ave
Chicago, IL 60616 [\[map\]](#)

PHONE
312-528-0890

FAX
312-356-1041

EMAIL
INFO@BROOKARCHITECTURE.COM

WEBSITE
<http://www.brookarchitecture.com>

ETHNICITY
African American

Certification Information

CERTIFYING AGENCY
City of Chicago

CERTIFICATION TYPE
MBE - Minority Business Enterprise

CERTIFICATION DATE
1/18/2024

RENEWAL DATE
3/1/2025

EXPIRATION DATE
3/1/2029

