

SCHEDULE A

Statement of Prime Submitter Regarding Its MBE/WBE Utilization Plan

TO BE COMPLETED BY SUBMITTER ONLY

 Submitter: Moore Landscapes, LLC

 Project: District-Wide Floral Gardens:

Is the submitter a certified MBE/WBE?

 Design, Install & Maintain
 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
- LLC

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: A & B Sanchez, Inc.

 Address: 2814 E. Hintz Rd., Arlington Hts., IL 60004

 Contact Person: Barbarito Sanchez

 Phone: 847-392-5767

 E-mail: bobby@absanchezlandscapes.com

Fax: _____

 MBE/WBE Participation: Dollars \$ 683,109.25 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: Atrium Landscape

Address: 17113 Davey Rd., Lemont, IL 60439

Contact Person: Kathy Bruch Phone: 630-739-5100

E-mail: Kathy@atriumlandscape.com Fax: _____

MBE/WBE Participation: Dollars \$ 136,621.85 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 for 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.

A. MBE Proposal:

1. MBE Participation:

MBE Firm Name	Dollar Amount of Participation	Percent amount Participation	Direct Indirect (check √ one)
A&B Sanchez, Inc.	\$ 683,109.25	25 %	X
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
Total MBE Participation:	\$ 683,109.25	25 %	

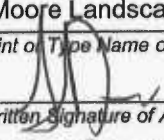
2. WBE Participation:

WBE Firm Name	Dollar Amount of Participation	Percent amount Participation	Direct Indirect (check √ one)
Atrium Landsdcape	\$ 136,621.85	5 %	X
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
	\$	%	
Total WBE Participation:	\$ 136,621.85	5 %	

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

Jim Pearson (847) 774-1699
(Name and Title) (Phone Number)
jpearson@moorelandscapes.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: Moore Landscapes, LLC
(Print or Type Name of Business)
Signature:  Date: 11/04/2019
(Written Signature of Authorized Officer/Representative)
Name/Title: Andrew Brennan - Executive Chairman
(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
DO NOT FILL OUT OR SIGN THIS FORM IF YOU ARE THE PRIME SUBMITTER

Project: District-Wide Floral Gardens: Design, Install & Maintain

From: A&B Sanchez, Inc.

(Name of MBE/WBE Firm)

MBE: ☒ Yes ☐ No

WBE: ☐ Yes ☒ No

To: Moore Landscapes, LLC

(Name of Prime Contractor-Submitter)

and the Chicago Park District:

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 _____

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:

Landscape Maintenance

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

25% of the Contract - payment is due when contractor is paid

\$ 683,109.25

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: 11-5-19

Name/Title: _____

Barbarito Sanchez - President

(Print or Type Name and Title)

Address: 2814 E. Hintz Rd., Arlington Hts., IL 60004

Telephone: 847-392-5767

Fax: 847-392-6552

Certification: View

[Certification List](#)[Submit Change Request](#)[Add Date Alert](#)

Vendor Information

Business Name	A & B Sanchez Landscaping, Inc.
VendorID	20070169
Primary Owner's Name	Atanacio Sanchez
Ethnic Group	Hispanic/Latino
Gender	Male

Certification Information

Certifying Agency	City of Chicago
Certification Type	MBE - Minority Business Enterprise
Effective Date	4/30/2019
Renewal Date	4/15/2020

Contact Information

Main Company Email	bobby@absanchezlandscapes.com
Main Phone	847-392-5767
Main Fax	847-392-6552
Main Company Website	www.abschanezlandscapes.com

Addresses

Physical Address	2814 East Hintz Road Arlington Heights, IL 60004-2265
Mailing Address	2814 East Hintz Road Arlington Heights, IL 60004-2265

Business Capabilities

Business certified for	NAICS 56173 Landscaping Services
Full Description of Capabilities/Products	NAICS 56173 Landscaping Services
Commodity Codes	NAICS 56173 Landscaping Services (More)

Owner Ethnicity and Gender

Ethnic Group	Hispanic/Latino
Gender	Male
DBE Ethnic Group	Hispanic American

Location

County	Cook (IL)
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Additional Information

Ward	
Community Area	

SCHEDULE B

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: District-Wide Floral Gardens: Design, Install & Maintain

From: Atrium Landscape
(Name of MBE/WBE Firm)

To: Moore Landscapes, LLC and the Chicago Park District:
(Name of Prime Contractor-Submitter)

MBE: ☐ Yes ☒ No
 WBE: ☒ Yes ☐ No

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 _____

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:

Landscape Maintenance

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

5% of the Contract - payment is due when contractor is paid

From: \$136,621.85

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: 11.7.19

Name/Title: Kathy Bruch - President
(Print or Type Name and Title)

Address: 17113 Davey Rd., Lemont, IL 60439

Telephone: 630-739-5100

Fax: _____



DEPARTMENT OF PROCUREMENT SERVICES

CITY OF CHICAGO

DEC 8 2016

Kathleen Marie Bruch
Atrium Inc.
17113 Davey Road
Lemont, IL 60439

Dear Kathleen Marie Bruch:

We are pleased to inform you that **Atrium Inc.** has been recertified as a **Women-Owned Business Enterprise ("WBE")** by the City of Chicago ("City"). This **WBE** certification is valid until **11/15/2021**; 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. As a consequence, 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 **11/15/2017, 11/15/2018, 11/15/2019, and 11/15/2020**. 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 **11/15/2021**. 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 **9/15/2021**.

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.

121 NORTH LASALLE STREET, ROOM 806, CHICAGO, ILLINOIS 60602

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):

561730 - Landscape care and maintenance services

Your firm's participation on City contracts will be credited only toward **Women-Owned Business Enterprise** 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 and Women-Owned Business Enterprise (MBE/WBE) Program.

Sincerely,



Rich Butler
First Deputy Procurement Officer
RB/mm