AMENDMENT NO. 2

This Amendment modifies Contract No. 2038-18393B, for Professional Services Agreement for Construction Management Services Various Various (Task Orders) by and between the County of Cook, Illinois, herein referred to as "County" and Michael Baker International, Inc., authorized to do business in the State of Illinois hereinafter referred to as "Contractor":

RECITALS

Whereas, the County and Contractor have entered into a Contract approved by the County on March 18, 2021, (hereinafter referred to as the "Contract"), wherein the Contractor is to provide Professional Services Agreement for Construction Management Services Various Various (Task Orders) (hereinafter referred to as the "Services") from April 1, 2021 through March 31, 2024, in an amount not to exceed $5,000,000.00, with two (2) one-year renewal options; and

Whereas, Amendment No. 1 was executed by the Chief Procurement Officer on March 23, 2022 to delete Exhibit 4 – Average and Maximum Hourly Rates by Classification Tables in its entirety and replaced with Amendment 1, Attachment A; and

Whereas, the Contract will expire March 31, 2024, and the agreed upon Services are still required; and

Whereas, pursuant to Article 4 of the Contract, the County and Contractor desire to renew the Contract for twelve (12) months beginning on April 1, 2024 through March 31, 2025.

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

1. The Contract is renewed through March 31, 2025.

2. The attached updated Identification of Sub-Contractors/Suppliers/Sub-Consultants Form, MBE/WBE Utilization Plan forms, certificate of insurance, and Economic Disclosures Statement under Attachment A are incorporated and made a part of this Contract.

3. All other terms and conditions remain as stated in the Contract.

In witness whereof and pursuant to the authority of the Chief Procurement Officer the County and Contractor have caused this Amendment No. 2 to be executed on the date and year last written below.

Signature page follows

Signature Page

County of Cook, Illinois

By: Raffi Sarrafian Digitally signed by Raffi Sarrafian Date: 2024.04.24 13:54:03 -05'00'
Chief Procurement Officer

Date: _____

By: _____
State's Attorney (if applicable)

_____
Type or print name (if applicable)

Date: _____

Michael Baker International, Inc.

Signed

Joseph Catalano
Type or print name

Vice President
Title

Date: 03/15/2024

ATTACHMENT A

OFFICE OF CONTRACT COMPLIANCE
Nicole Mandeville
DIRECTOR
161 N. Clark Street, Suite 2300 ● Chicago, Illinois 60601 ● (312) 603-5502

TONI PRECKWINKLE
PRESIDENT
Cook County Board of Commissioners

TARA STAMPS
1st District

DENNIS DEER
2nd District

BILL LOWRY
3rd District

STANLEY MOORE
4th District

MONICA GORDON
5th District

DONNA MILLER
6th District

ALMA E. ANAYA
7th District

ANTHONY J. QUEZADA
8th District

MAGGIE TREVOR
9th District

BRIDGET GAINER
10th District

JOHN P. DALEY
11th District

BRIDGET DEGNEN
12th District

JOSINA MORITA
13th District

SCOTT R. BRITTON
14th District

KEVIN B. MORRISON
15th District

FRANK J. AGUILAR
16th District

SEAN M. MORRISON
17th District

April 1, 2024

Mr. Raffi Sarrafian
Chief Procurement Officer
161 North Clark Street – Suite 2300
Chicago, IL 60601

Re: Contract No.: 2038-18393B Amendment 2
Construction Management Services (Task Order)
Department of Transportation and Highways (DOTH)

Dear Mr. Sarrafian:
The proposal for the above-referenced contract amendment has been reviewed for compliance with the Minority-and Women-owned Business Enterprises (MBE/WBE/DBE) Ordinance and has been found to be responsive to the ordinance. This is a task order-based contract.

Contractor: Michael Baker International
Original Contract Value: $5,000,000.00
Original Contract Term: 4/1/2021 – 3/31/2024
New Contract Term: 4/1/2021 – 3/31/25
Contract Goal: 35% DBE Direct Participation
RFP – Professional Services
Amendment 1 deletes Exhibit 4 - Average and Maximum Hourly Rates by Classification Tables in its entirety. There was no change to the Contract's value or duration.
Amendment 2 extends the contract for a year beginning on April 1, 2024 through March 31, 2025. It does not change the contract value.

DBE Utilization Original Contract ($5,000,000 Value)

DBE Firm	Status	Certifying Agency	Commitment (Direct)
DB Sterlin Consultants	DBE-HA-M	IDOT	15%
Sanchez & Associates	DBE-HA-M	IDOT	5%
Material Service Testing	DBE-AAPI-M	METRA	5%
APS Consulting, Inc.	DBE-AAPI-M	CTA	5%
Program Management & Control Services	DBE-C-F	CTA	15%
		Total	**45%**

DBE Utilization Through Amendment 2 ($5,000,000 Contract Value)

DBE Firm	Status	Certifying Agency	Commitment (Direct)
DB Sterlin Consultants	DBE-HA-M	IDOT	15%
Sanchez & Associates	DBE-HA-M	IDOT	5%
Material Service Testing	DBE-AAPI-M	METRA	5%
Primera Engineers	DBE-CA-F	City of Chicago	1%
APS Consulting, Inc.	DBE-AAPI-M	CTA	5%
Program Management & Control Services	DBE-C-F	CTA	15%
		Total	**46%**

Revised DBE forms were used in the determination of the responsiveness of this contract amendment. Despite a 35% DBE participation goal, Michael Baker International is comitting to 46% DBE participation on this contract. For Amendment 2 Michael Baker is adding an additional subconsultant, Primera Engineers, with a 1% DBE commitment.

Sincerely,

Jeanetta Cardine

Jeanetta Cardine
Contract Compliance Deputy Director

cc: Kimberlei Aaron, OCPO
Cho Ng, DOTH
Nathan Roseberry, DOTH

JC/db

DBE UTILIZATION PLAN – FORM 1

BIDDER/PROPOSER HEREBY STATES that all DBE firms included in this Plan are certified DBEs pursuant to the requirements of the Federal regulations 49 CFR Part 26.

I. BIDDER/PROPOSER DBE STATUS: (check the appropriate line)

☑ Bidder/Proposer is a certified DBE firm. (if so, attach copy of current Letter of Certification)

☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at (www.cookcountyil.gov/contractcompliance)

☐ Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with MBE/WBE partners, but will Utilize DBE firms either directly or indirectly in the performance of the Contract. (if so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. ☑ Direct Participation of DBE Firms ☐ Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

DBE Firm: APS Consulting

Address: 5519 N. Cumberland Avenue, Suite 1011, Chicago Illinois 60656

E-mail: sjoshi@apsae.com

Contact Person: Shakti Joshi Phone: 312-324-0336

Dollar Amount Participation: $250,000.00

Percent Amount of Participation: 5.0%

*Letter of Intent attached? Yes X No ____
*Current Letter of Certification attached? Yes X No ____

DBE Firm: DB Sterlin

Address: 123 N. Wacker Drive, Suite 2000

E-mail: rjeune@dbsterlin.com

Contact Person: Regine Jeune Phone: 312-857-1006

Dollar Amount Participation: $750,000.00

Percent Amount of Participation 15%%

*Letter of Intent attached? Yes X No ____
*Current Letter of Certification attached? Yes x No ____

***Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid**

DBE UTILIZATION PLAN – FORM 1

BIDDER/PROPOSER HEREBY STATES that all DBE firms included in this Plan are certified DBEs pursuant to the requirements of the Federal regulations 49 CFR Part 26.

I. BIDDER/PROPOSER DBE STATUS: (check the appropriate line)

☑ Bidder/Proposer is a certified DBE firm. (if so, attach copy of current Letter of Certification)

☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at (www.cookcountyil.gov/contractcompliance)

☐ Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with MBE/WBE partners, but will Utilize DBE firms either directly or indirectly in the performance of the Contract. (if so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. ☑ Direct Participation of DBE Firms ☐ Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

DBE Firm: Material Service Testing

Address: 1327 W. Washington, Suite 105

E-mail: mhayes@mstli.com

Contact Person: Michael Hayes Phone: 815-846-6246

Dollar Amount Participation: $250,000.00

Percent Amount of Participation: 5.0%

*Letter of Intent attached? Yes X No ____
*Current Letter of Certification attached? Yes X No ____

DBE Firm: PMCS

Address: 45 Waiola Avenue

E-mail: tom@pmcsconsulting.com

Contact Person: Tom Nutter Phone: 773-908-6946

Dollar Amount Participation: $750,000.00

Percent Amount of Participation 15.0%%

*Letter of Intent attached? Yes X No ____
*Current Letter of Certification attached? Yes X No ____

***Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid**

DBE UTILIZATION PLAN – FORM 1

BIDDER/PROPOSER HEREBY STATES that all DBE firms included in this Plan are certified DBEs pursuant to the requirements of the Federal regulations 49 CFR Part 26.

I. BIDDER/PROPOSER DBE STATUS: (check the appropriate line)

☑ Bidder/Proposer is a certified DBE firm. (if so, attach copy of current Letter of Certification)

☐ Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified DBEs (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the DBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at (www.cookcountyil.gov/contractcompliance)

☐ Bidder/Proposer is not a certified DBE firm, nor a Joint Venture with MBE/WBE partners, but will Utilize DBE firms either directly or indirectly in the performance of the Contract. (if so, complete Sections II below and the Letter(s) of Intent – Form 2).

II. ☑ Direct Participation of DBE Firms ☐ Indirect Participation of DBE Firms

NOTE: Where goals have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to achieve Direct Participation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to achieve Direct Participation have been exhausted. Only after written documentation of Good Faith Efforts is received will indirect Participation be considered.

DBEs that will perform as subcontractors/suppliers/consultants include the following:

DBE Firm: Primera Engineers

Address: 550 W. Jackson Boulevard, Suite 600

E-mail: rdeming@primeraeng.com

Contact Person: Robert Deming Phone: 312-606-0910

Dollar Amount Participation: $37,578.00

Percent Amount of Participation: 1.0%

*Letter of Intent attached? Yes X No ____
*Current Letter of Certification attached? Yes X No ____

DBE Firm: Sanchez and Associates

Address: 8604 W. Catalpa Avenue, Suite 912

E-mail: pfsanchez@sanchezsurveying.com

Contact Person: Gerardo Sanchez Phone: 773-444-0144

Dollar Amount Participation: $250,000.00

Percent Amount of Participation 5.0%%

*Letter of Intent attached? Yes X No ____
*Current Letter of Certification attached? Yes X No ____

***Letter(s) of Intent and current Letters of Certification must be submitted at the time of bid**

Attach additional sheets as needed.

DBE LETTER OF INTENT - FORM 2

DBE Firm: APS Consulting, Inc.

Certifying Agency: Chicago Transit Authority

Contact Person: Shakti S. Joshi

Certification Expiration Date: 10/31/2024

Address: 5519 N. Cumberland Avenue, Suite 1011

Ethnicity: Asian

City/State: Chicago, Illinois Zip: 60656

Bid/Proposal/Contract #: 2038-18393B

Phone: 312-324-0336 Fax: 312-324-0337

FEIN #: 20-4223984

Email: sjoshi@apsae.com

Participation: ☑ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☑ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): None

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Construction Management Support Services

Indicate the **Dollar Amount**, **Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

Dollar Amount: $250,000.00 Percentage: 5.0% Terms of Payment: As per IDOT sub-prime agreement

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (*DBE*)

Shakti S. Joshi

Print Name

APS Consulting, Inc.

Firm Name

03/08/2024

Date

Subscribed and sworn before me

this ____ day of _____, 20____.

Notary Public _____

SEAL

Signature (*Prime Bidder/Proposer*)

Joseph Catalano

Print Name

Michael Baker International

Firm Name

03/15/2024

Date

Subscribed and sworn before me

this 15 day of MARCH, 2024.

Notary Public L. Rodriguez

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Attach additional sheets as needed.

DBE LETTER OF INTENT - FORM 2

DBE Firm: DB Sterlin

Contact Person: Regine Jeune

Address: 123 N. Wacker Drive, Suite 2000

City/State: Chicago, IL Zip: 60606

Phone: 312-857-1006 Fax: 312-857-1056

Email: rjeune@dbsterlin.com

Certifying Agency: Illinois Department of Transportation

Certification Expiration Date: 06/03/2024

Ethnicity: African-American

Bid/Proposal/Contract #: 2038-18393B

FEIN #: 36-4149498

Participation: ☑ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☑ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Assistant Resident Engineer, Documentation and Construction Inspection

Indicate the **Dollar Amount**, **Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

$750,000.00, 15.0%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (*DBE*)

Regine Jeune

Print Name

DB Sterlin Consultants, Inc.

Firm Name

3/12/2024

Date

Subscribed and sworn before me

this 12th day of March, 2023.

Notary Public _____

OFFICIAL SEAL
SNEZANA SCEKIC
NOTARY PUBLIC, STATE OF ILLINOIS
My Commission Expires 7/7/26

SEAL

Signature (*Prime Bidder/Proposer*)

Joseph Catalano

Print Name

Michael Baker International

Firm Name

March 15, 2024

Date

Subscribed and sworn before me

this 15 day of MARCH, 2024.

Notary Public _____

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Attach additional sheets as needed.

DBE LETTER OF INTENT - FORM 2

DBE Firm: Material Service Testing

Certifying Agency: Metra

Contact Person: Jeffrey Krozel

Certification Expiration Date: _____

Address: 1327 W. Washington Boulevard, Suite 105

Ethnicity: _____

City/State: Chicago, IL Zip: 60607

Bid/Proposal/Contract #: 2038-18393B

Phone: 312-846-6246 Fax: 847-787-0321

FEIN #: 27-1261603

Email: jkrozel@mstli.com

Participation: ☑ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☑ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Materials Engineering and Inspection

Indicate the **Dollar Amount**, **Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

$250,000.00, 5.0%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (*DBE*)

John H. Martin

Print Name

Material Service Testing, Inc

Firm Name

3-12-2024

Date

Subscribed and sworn before me

this 12 day of March, 2024.

Notary Public Elisa Estrada

SEAL

OFFICIAL SEAL
ELISA ESTRADA
NOTARY PUBLIC, STATE OF ILLINOIS
LAKE COUNTY
MY COMMISSION EXPIRES 08/25/2026

Signature (*Prime Bidder/Proposer*)

Joseph Catalano

Print Name

Michael Baker International

Firm Name

March 15, 2024

Date

Subscribed and sworn before me

this 15 day of MARCH, 2024.

Notary Public L. Rodriguez

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Attach additional sheets as needed.

DBE LETTER OF INTENT - FORM 2

DBE Firm: Program Management & Control Services, LLC

Contact Person: Thomas Nutter

Address: 46 South Waiola Avenue

City/State: La Grange, IL Zip: 60525

Phone: 773-908-6946 Fax: N/A

Email: tom@pmcsconsulting.com

Certifying Agency: Chicago Transit Authority

Certification Expiration Date: 12/12/24

Ethnicity: Caucasian

Bid/Proposal/Contract #: 2038-18393B

FEIN #: 20-2840292

Participation: ☑ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☑ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Resident Engineer, Assistant Resident Engineer, Documentation Tecnician and Inspectors

Indicate the **Dollar Amount, Percentage,** and the **Terms of Payment** for the above-described Commodities/ Services:

$750,000.00, 15.0%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (*DBE*)

Thomas Nutter
Print Name

Program Management & Control Services
Firm Name

March 11, 2024
Date

Subscribed and sworn before me

this 11th day of March, 2024.

Notary Public Sally A. Orozco

SALLY A OROZCO
Official Seal
Notary Public - State of Illinois
My Commission Expires Oct 21, 2024

Signature (*Prime Bidder/Proposer*)

Joseph Catalano
Print Name

Michael Baker International
Firm Name

March 15, 2024
Date

Subscribed and sworn before me

this 15 day of MARCH, 2024.

Notary Public L. Rodriguez

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Attach additional sheets as needed.

DBE LETTER OF INTENT - FORM 2

DBE Firm: Primera Engineers

Contact Person: Robert Deming

Address: 550 W. Jackson Boulevard, Suite 600

City/State: Chicago, IL Zip: 60661

Phone: 312-575-3923 Fax: _____

Email: rdeming@primeraeng.com

Certifying Agency: City of Chicago

Certification Expiration Date: 4/1/2024

Ethnicity: White

Bid/Proposal/Contract #: 2038-18393B

FEIN #: 36-3520747

Participation: ☑ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☑ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Construction Support Services

Indicate the **Dollar Amount**, **Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

$37,578.00, 1.0%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Stacie Dovalovsky

Digitally signed by Stacie Dovalovsky
DN: cn=Stacie Dovalovsky, c=US, o=Primera Engineers, ou=Transportation Division - Executive, email=sdovalovsky@primeraeng.com
Date: 2024.03.14 09:37:19 -05'00'

Signature (*DBE*)

Stacie Dovalovsky

Print Name

Primera Engineers, Ltd

Firm Name

March 14, 2024

Date

Subscribed and sworn before me

this ____ day of _____, 20____.

Notary Public _____

SEAL

Joseph Catalano

Signature (*Prime Bidder/Proposer*)

Joseph Catalano

Print Name

Michael Baker International

Firm Name

March 15, 2024

Date

Subscribed and sworn before me

this 15 day of MARCH, 2024.

Notary Public L. Rodriguez

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Attach additional sheets as needed.

DBE LETTER OF INTENT - FORM 2

DBE Firm: Sanchez & Associates, P.C

Contact Person: Gerardo P. Sanchez

Address: 180 Crossen Avenue

City/State: Elk Grove Village, IL. Zip: 60656

Phone: 773-444-0144 Fax: 847-232-3104

Email: gpsanchez@sanchezsurveying.com

Certifying Agency: Illinois Department of Transportation

Certification Expiration Date: 08/24/2024

Ethnicity: Hispanic

Bid/Proposal/Contract #: 2038-18393B

FEIN #: 20-2703329

Participation: ☑ Direct ☐ Indirect

Will the DBE firm be subcontracting any of the goods or services of this contract to another firm?

☑ No ☐ Yes – Please attach explanation. Proposed Subcontractor(s): _____

The undersigned DBE is prepared to provide the following Commodities/Services for the above named Project/ Contract: *(If more space is needed to fully describe DBE Firm's proposed scope of work and/or payment schedule, attach additional sheets)*

Land Surveying Services

Indicate the **Dollar Amount, Percentage**, and the **Terms of Payment** for the above-described Commodities/ Services:

$250,000.00, 5.0%

THE UNDERSIGNED PARTIES AGREE that this Letter of Intent will become a binding Subcontract Agreement for the above work, conditioned upon (1) the Bidder/Proposer's receipt of a signed contract from the County of Cook; (2) Undersigned Subcontractor remaining compliant with all relevant credentials, codes, ordinances and statutes required by Contractor, Cook County, and the State to participate as a DBE firm for the above work. The Undersigned Parties do also certify that they did not affix their signatures to this document until all areas under Description of Service/ Supply and Fee/Cost were completed.

Signature (*DBE*)

Gerardo P. Sanchez

Print Name

Sanchez & Associates, P.C.

Firm Name

March 14, 2024

Date

Subscribed and sworn before me

this 14th day of March, 2024.

Notary Public _____

C. CASTRO FERRER
OFFICIAL SEAL
Notary Public, State of Illinois
My Commission Expires
April 19, 2026

Signature (*Prime Bidder/Proposer*)

Joseph Catalano

Print Name

Michael Baker International

Firm Name

March 15, 2024

Date

Subscribed and sworn before me

this 15 day of MARCH, 2024.

Notary Public _____

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Contract #: 2038-18393B

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract**. In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 2038-18393B	Date: 03/08/2024
Total Bid or Proposal Amount: $250,000.00	Contract Title: Construction Management Various/Various
Contractor: Michael Baker International	Subcontractor/Supplier/ Subconsultant to be added or substitute: APS Consulting
Authorized Contact for Contractor: Joseph Catalano	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Shakti Joshi
Email Address (Contractor): joseph.catalano@mbakerintl.com	Email Address (Subcontractor): sjoshi@apsae.com
Company Address (Contractor): 200 W. Adams Street, Suite 1800	Company Address (Subcontractor): 5519 N. Cumberland Ave., Suite 1011
City, State and Zip (Contractor): Chicago, IL 60606	City, State and Zip (Subcontractor): Chicago, IL 60656
Telephone and Fax (Contractor): 312-575-3923	Telephone and Fax (Subcontractor): 312-324-0336
Estimated Start and Completion Dates (Contractor): 04/01/2021 - 03/31/2025	Estimated Start and Completion Dates (Subcontractor): 04/01/2021 - 03/31/2025

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
Construction Inspection	5%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Michael Baker International
Contractor

Joseph Catalano
Name

Office Executive / Vice President
Title

Joseph Catalano
Prime Contractor Signature

03/15/2024
Date

Contract #: 2038-18393B

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract**. In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 2038-18393B	Date: 03/08/2024
Total Bid or Proposal Amount: $750,000.00	Contract Title: Construction Management Various
Contractor: Michael Baker International	Subcontractor/Supplier/ Subconsultant to be added or substitute: DB Sterlin
Authorized Contact for Contractor: Joseph Catalano	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Regine Jeune
Email Address (Contractor): joseph.catalano@mbakerintl.com	Email Address (Subcontractor): rjeune@dbsterlin.com
Company Address (Contractor): 200 W. Adams Street, Suite 1800	Company Address (Subcontractor): 123 N. Wacker Drive, Suite 2000
City, State and Zip (Contractor): Chicago, Illinois 60606	City, State and Zip (Subcontractor): Chicago, Illinois 60606
Telephone and Fax (Contractor): 312-576-3923	Telephone and Fax (Subcontractor): 312-857-1006
Estimated Start and Completion Dates (Contractor): 04/01/2021 - 03/31/2025	Estimated Start and Completion Dates (Subcontractor): 04/01/2021 - 03/31/2025

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Construction Inspection, Assistant Resident Engineer, Documentation	15%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Michael Baker International
Contractor

Joseph Catalano
Name

Office Executive / Vice President
Title

Joseph Catalano
Prime Contractor Signature

03/15/2024
Date

Contract #: 2038-18393B

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

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Bid/RFP/RFQ No.: 2038-18393B	Date: March 8, 2024
Total Bid or Proposal Amount: $250,000.00	Contract Title: Construction Management Various
Contractor: Michael Baker International	Subcontractor/Supplier/ Subconsultant to be added or substitute: Material Service Testing
Authorized Contact for Contractor: Joseph Catalano	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Jeffrey Krozel
Email Address (Contractor): Joseph.catalano@mbakerintl.com	Email Address (Subcontractor): jkrozel@mstli.com
Company Address (Contractor): 200 W. Adams Street, Suite 1800	Company Address (Subcontractor): 1327 W. Washington, Suite 105
City, State and Zip (Contractor): Chicago, Illinois 60606	City, State and Zip (Subcontractor): Chicago, Illinois 60607
Telephone and Fax (Contractor): 312-575-3923	Telephone and Fax (Subcontractor): 812-846-6246
Estimated Start and Completion Dates (Contractor): 04/01/2021 - 03/31/2025	Estimated Start and Completion Dates (Subcontractor): 04/01/2021 - 03/31/2025

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Material Testing	5%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Michael Baker International
Contractor

Joseph Catalano
Name

Office Executive / Vice President
Title

Joseph Catalano
Prime Contractor Signature

03/15/2024
Date

Contract #: 2038-18393B

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract**. In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 2038-18393B	Date: 03/08/2024
Total Bid or Proposal Amount: $750,000.00	Contract Title: Construction Management Various
Contractor: Michael Baker International	Subcontractor/Supplier/ Subconsultant to be added or substitute: PMCS
Authorized Contact for Contractor: Joseph Catalano	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Tom Nutter
Email Address (Contractor): joseph.catalano@mbakerintl.com	Email Address (Subcontractor): tom@pmcsconsulting.com
Company Address (Contractor): 200 W. Adams Street, Suite 1800	Company Address (Subcontractor): 45 Waiola Avenue
City, State and Zip (Contractor): Chicago, Illinois 60606	City, State and Zip (Subcontractor): LaGrange, Illinois 60525
Telephone and Fax (Contractor): 312-575-3923	Telephone and Fax (Subcontractor): 773-908-6946
Estimated Start and Completion Dates (Contractor): 04/01/2021 - 03/31/2025	Estimated Start and Completion Dates (Subcontractor): 04/01/2021 - 03/31/2025

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	**Total Price of Subcontract for Services or Supplies**
Construction Inspection, Assistant Resident Engineer, Documentation	15%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Michael Baker International
Contractor

Michael Baker International
Name

Joseph Catalano
Title

Joseph Catalano
Prime Contractor Signature

03/15/2024
Date

Contract #: 2038-18393B

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

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Bid/RFP/RFQ No.: 2038-18393B	Date: 03/08/2024
Total Bid or Proposal Amount: $37,578.00	Contract Title: Construction Management Various
Contractor: Michael Baker International	Subcontractor/Supplier/ Subconsultant to be added or substitute: Primera Engineers
Authorized Contact for Contractor: Joseph Catalano	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Robert Deming
Email Address (Contractor): joseph.catalano@mbakerintl.com	Email Address (Subcontractor): rdeming@primeraeng.com
Company Address (Contractor): 200 W. Adams Street, Suite 1800	Company Address (Subcontractor): 550 W. Jackson Boulevard, Suite 600
City, State and Zip (Contractor): Chicago, Illinois 60606	City, State and Zip (Subcontractor): Chicago, Illinois 60661
Telephone and Fax (Contractor): 312-575-3923	Telephone and Fax (Subcontractor): 312-606-0910
Estimated Start and Completion Dates (Contractor): 04/01/2021 - 03/31/2025	Estimated Start and Completion Dates (Subcontractor): 10/30/2023 - 03/31/2024

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
Construction Support Services	1%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Michael Baker International
Contractor

Joseph Catalano
Name

Office Executive/Vice President
Title

Prime Contractor Signature

03/15/2024
Date

Contract #: 2038-18393B

OCPO ONLY:
☐ Disqualification
☐ Check Complete

Cook County
Office of the Chief Procurement Officer
Identification of Subcontractor/Supplier/Subconsultant Form

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. **The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract**. In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 2038-18393B	Date: 03/08/2024
Total Bid or Proposal Amount: $250,000.00	Contract Title: Construction Management Various
Contractor: Michael Baker International	Subcontractor/Supplier/ Subconsultant to be added or substitute: Sanchez and Associates
Authorized Contact for Contractor: Joseph Catalano	Authorized Contact for Subcontractor/Supplier/ Subconsultant: Gerardo Sanchez
Email Address (Contractor): joseph.catalano@mbakerintl.com	Email Address (Subcontractor): pfsanchez@sanchezsurveying.com
Company Address (Contractor): 200 W. Adams Street, Suite 1800	Company Address (Subcontractor): 8604 W. Catalpa Ave., Suite 912
City, State and Zip (Contractor): Chicago, Illinois 60606	City, State and Zip (Subcontractor): Chicago, Illinois 60656
Telephone and Fax (Contractor): 312-575-3923	Telephone and Fax (Subcontractor): 773-444-0144
Estimated Start and Completion Dates (Contractor): 04/01/2021 - 03/31/2025	Estimated Start and Completion Dates (Subcontractor): 04/01/2024 - 03/31/2025

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
Surveying	5%

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. **This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.**

Michael Baker International
Contractor

Joseph Catalano
Name

Office Executive / Vice President
Title

Joseph Catalano
Prime Contractor Signature

03/15/2024
Date

Cook County
Office of the Chief Procurement Officer

Economic Disclosure Statement Recertification Affidavit

Applicant/Holder Name: Michael Baker International | Contract #: 2038-18393B

Address: 200 W. Adams Street, Suite 1800 | City: Chicago

County: Cook | State: Illinois | Zip: 60606

Phone: 312-575-3923 | Email: joseph.catalano@mbakerintl.com

Instructions

If the Applicant is a corporation, the President must execute this affidavit. If executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization, satisfactory to the County that permits the person to execute this affidavit for the corporation.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute this affidavit, unless one partner or joint venturer has been authorized to sign.

If the Applicant is a member-managed LLC all members must execute this affidavit, unless otherwise provided in the operating agreement, resolution or other corporate documents.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute this affidavit.

This recertification is being submitted in connection with

Contract Name: Construction Management Services Various Various (Task Orders)

Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this Economic Disclosure Statement ("EDS") recertification on behalf of the Applicant/Holder, (2) warrants that all certifications and statements contained in the Applicant/Holder's last submitted EDS dated October 21, 2020 are true, accurate and complete as of the date furnished to the County and continue to be true, accurate and complete as of the date of this recertification, and (3) reaffirms its acknowledgments.

Recertification of:

☑ Certifications (SECTION 2), if applicable, as updated on:

☑ Economic and Other Disclosures (SECTION 3), if applicable, as updated on:

☑ Cook County Child Support Affidavit (Please submit any additional Child Support Obligations as an attachment to this form), if applicable, as updated on:

☑ Cook County Disclosure of Ownership Interest Statement, if applicable, as updated on:

☑ Cook County Board of Ethics Familial Relationship Disclosure Form, if applicable, as updated on:

☑ Cook County Affidavit for Wage Theft Ordinance (SECTION 4), if applicable, as updated on:

If your recertification of any of the above is related to information contained in an updated form submitted after the last submitted full EDS, please indicate the date such information was updated.

IMPORTANT: If you are unable to re-certify any section(s) of your previous EDS, please submit a truthful, fully updated version of that section(s) of the EDS including separate signatures where required.

By: Joseph Catalano Date: 03/15/2024

(Print or type legal name of Applicant/Holder)

President or authorized signatory (Signature)

Print or type name of President or authorized signatory:

Title of signatory:

Subscribed and sworn to before me on this 15 day of March, 2024

Notary Public Signature: L. Rodriguez Seal:

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

COOK COUNTY
ECONOMIC DISCLOSURE STATEMENT
AND EXECUTION DOCUMENT
INDEX

Section	Description	Pages
1	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1– 2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13-14
5	Contract and EDS Execution Page	EDS 15
6	Cook County Signature Page	EDS 16

SECTION 1
INSTRUCTIONS FOR COMPLETION OF
ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

Definitions. Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

Affiliate means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

Applicant means a person who executes this EDS.

Bidder means any person who submits a Bid.

Code means the Code of Ordinances, Cook County, Illinois available on municode.com.

Contract shall include any written document to make Procurements by or on behalf of Cook County.

Contractor or *Contracting Party* means a person that enters into a Contract with the County.

Control means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

EDS means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

Joint Venture means an association of two or more Persons proposing to perform a for-profit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

Lobby or lobbying means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

Lobbyist means any person who lobbies.

Person or *Persons* means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

Prohibited Acts means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Proposal means a response to an RFP.

Proposer means a person submitting a Proposal.

Response means response to an RFQ.

Respondent means a person responding to an RFQ.

RFP means a Request for Proposals issued pursuant to this Procurement Code.

RFQ means a Request for Qualifications issued to obtain the qualifications of interested parties.

INSTRUCTIONS FOR COMPLETION OF ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

Section 1: Instructions. Section 1 sets forth the instructions for completing and executing this EDS.

Section 2: Certifications. Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 3: Economic and Other Disclosures Statement. Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

Required Updates. The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at cookcountyil.gov/ethics-board-of.

Authorized Signers of Contract and EDS Execution Page. If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

Effective October 1, 2016 all foreign corporations and LLCs must be registered with the Illinois Secretary of State's Office unless a statutory exemption applies to the applicant. Applicants who are exempt from registering must provide a written statement explaining why they are exempt from registering as a foreign entity with the Illinois Secretary of State's Office.

SECTION 2

CERTIFICATIONS

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;

2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.;*

3) Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;

4) Has been convicted of an act committed, within the State**,** of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, *et seq.;*

5) Has been convicted of price-fixing or attempting to fix prices under the laws the State;

6) Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;

7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to; or

8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in sub-paragraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

***THE APPLICANT HEREBY CERTIFIES THAT*:** The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE APPLICANT HEREBY CERTIFIES THAT: *In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.*

C. DRUG FREE WORKPLACE ACT

***THE APPLICANT HEREBY CERTIFIES THAT*:** The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT*: The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.*

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 *et seq.*).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: *It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.*

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for -profit law);

2) Community Development Block Grants;

3) Cook County Works Department;

4) Sheriff's Work Alternative Program; and

5) Department of Correction inmates.

SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name Address

N/A

2. LOCAL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)

Local business means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide establishment located within the County at which it is transacting business on the date when a Bid is submitted to the County, and which employs the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local Business if one or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, even if the Joint Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.

a) Is Applicant a "Local Business" as defined above?

Yes: ☑ No: ☐

b) If yes, list business addresses within Cook County:

200 West Adams Street, Suite 1800, Chicago IL, 60606

c) Does Applicant employ the majority of its regular full-time workforce within Cook County?

Yes: ☑ No: ☐

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

4. REAL ESTATE OWNERSHIP DISCLOSURES.

The Applicant must indicate by checking the appropriate provision below and providing all required information that either:

a) The following is a complete list of all real estate owned by the Applicant in Cook County:

PERMANENT INDEX NUMBER(S): _____

_____

_____

(ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)

OR:

b) ☑ The Applicant owns no real estate in Cook County.

5. EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.

If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed that the Applicant certified to all Certifications and other statements contained in this EDS.

CONTRACT #: 2038-18393B

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing. **County reserves the right to request additional information to verify veracity of information contained in this statement.**

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"*Applicant*" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or *"Legal Entity"* means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

1. An Applicant for County Action and

2. A Person that holds stock or a beneficial interest in the Applicant and is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being made by the [✓] Applicant or [ ] Stock/Beneficial Interest Holder

This Statement is an: [ ] Original Statement or [ ] Amended Statement

Identifying Information:

Name Michael Baker International, Inc.

D/B/A: Michael Baker International, Inc. FEIN # Only: 25 1228638

Street Address: 200 West Adams Street, Suite 1800

City: Chicago State: IL Zip Code: 60606

Phone No.: 312-707-8770 Fax Number: 312-707-8804 Email: joseph.catalano@mbakerintl.com

Cook County Business Registration Number: _____
(Sole Proprietor, Joint Venture Partnership)

Corporate File Number (if applicable): _____

Form of Legal Entity:

[ ] Sole Proprietor [ ] Partnership [✓] Corporation [ ] Trustee of Land Trust

[ ] Business Trust [ ] Estate [ ] Association [ ] Joint Venture

[ ] Other (describe) _____

Ownership Interest Declaration:

1. List the name(s), address, and percent ownership of each Person having a legal or beneficial interest (including ownership) of more than five percent (5%) in the Applicant/Holder.

Name	Address	Percentage Interest in Applicant/Holder
Michael Baker International Holdco Corporation	500 Grant Street, Suite 5400, Pittsburgh, PA 15219	100%

2. If the interest of any Person listed in (1) above is held as an agent or agents, or a nominee or nominees, list the name and address of the principal on whose behalf the interest is held.

Name of Agent/Nominee	Name of Principal	Principal's Address
N/A		

3. Is the Applicant constructively controlled by another person or Legal Entity? [☐] Yes [☑] No

If yes, state the name, address and percentage of beneficial interest of such person, and the relationship under which such control is being or may be exercised.

Name	Address	Percentage of Beneficial Interest	Relationship
N/A			

Corporate Officers, Members and Partners Information:

For all corporations, list the names, addresses, and terms for all corporate officers. For all limited liability companies, list the names, addresses for all members. For all partnerships and joint ventures, list the names, addresses, for each partner or joint venture.

Name	Address	Title (specify title of Office, or whether manager or partner/joint venture)	Term of Office

Declaration (check the applicable box):

☑ I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other County Agency action.

☐ I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT SIGNATURE PAGE

Joseph Catalano
Name of Authorized Applicant/Holder Representative (please print or type)

Vice President
Title

Signature

03/15/2024
Date

Joseph.catalano@mbakerintl.com
E-mail address

312-707-8770
Phone Number

Subscribed to and sworn before me
this 15 day of March, 2024.

My commission expires:

X
Notary Public Signature

Notary Seal

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

COOK COUNTY BOARD OF ETHICS
69 W. WASHINGTON STREET, SUITE 3040
CHICAGO, ILLINOIS 60602
312/603-4304 Office 312/603-9988 Fax

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION

Nepotism Disclosure Requirement:

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than $25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of $100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- its officers,
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

Additional Definitions:

"*Familial relationship*" means a person who is a spouse, domestic partner or civil union partner of a County employee or State, County or municipal official, or any person who is related to such an employee or official, whether by blood, marriage or adoption, as a:

- ☐ Parent
- ☐ Child
- ☐ Brother
- ☐ Sister
- ☐ Aunt
- ☐ Uncle
- ☐ Niece
- ☐ Nephew
- ☐ Grandparent
- ☐ Grandchild
- ☐ Father-in-law
- ☐ Mother-in-law
- ☐ Son-in-law
- ☐ Daughter-in-law
- ☐ Brother-in-law
- ☐ Sister-in-law
- ☐ Stepfather
- ☐ Stepmother
- ☐ Stepson
- ☐ Stepdaughter
- ☐ Stepbrother
- ☐ Stepsister
- ☐ Half-brother
- ☐ Half-sister

COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM

A. PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY

Name of Person Doing Business with the County: Michael Baker International, Inc.

Address of Person Doing Business with the County: 200 West Adams Street, Sutite 1800

Phone number of Person Doing Business with the County: Joseph Catalano, VP - (312)-707-8770

Email address of Person Doing Business with the County: joseph.catalano@mbakerintl.com

If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:

Joseph Catalano, Vice President, Michael Baker International, Inc., 312.707.8770, joseph.catalano@mbakerintl.com

B. DESCRIPTION OF BUSINESS WITH THE COUNTY

Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:

The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County: 2038-18393B

The aggregate dollar value of the business you are doing or seeking to do with the County: $ 5,000,000.00

The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County: Cho Ng / Administrative Analyst / cho.ng@cookcountyil.gov

William Kelly / Contract Negotiator / william.kelly3@cookcountyil.gov

The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County: Bureau Chief of Construction

C. DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS

Check the box that applies and provide related information where needed

☐ The Person Doing Business with the County **is an individual** and there is **no familial relationship** between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

☒ The Person Doing Business with the County **is a business entity** and there is **no familial relationship** between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

COOK COUNTY BOARD OF ETHICS
FAMILIAL RELATIONSHIP DISCLOSURE FORM

☐ The Person Doing Business with the County **is an individual** and **there is a familial relationship** between this individual and at least one Cook County employee and/or a person or persons holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County. **The familial relationships are as follows:**

Name of Individual Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*

If more space is needed, attach an additional sheet following the above format.

☐ The Person Doing Business with the County **is a business entity** and **there is a familial relationship** between at least one member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity and/or employees directly engaged in contractual work with the County on behalf of the business entity, on the one hand, and at least one Cook County employee and/or a person holding elective office in the State of Illinois, Cook County, and/or any municipality within Cook County, on the other. **The familial relationships are as follows**:

Name of Member of Board of Director for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*

Name of Officer for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*

Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*

Name of Employee of Business Entity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*

If more space is needed, attach an additional sheet following the above format.

VERIFICATION: To the best of my knowledge, the information I have provided on this disclosure form is accurate and complete. I acknowledge that an inaccurate or incomplete disclosure is punishable by law, including but not limited to fines and debarment.

Joseph Catalano

Signature of Recipient

04/12/2024

Date

SUBMIT COMPLETED FORM TO: Cook County Board of Ethics
69 West Washington Street, Suite 3040, Chicago, Illinois 60602
Office (312) 603-4304 – Fax (312) 603-9988
CookCounty.Ethics@cookcountyil.gov

* Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (*i.e.* in laws and step relations) or adoption.

SECTION 4

COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE

Effective May 1, 2015, every Person, ***including Substantial Owners***, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"*Contract*" means any written document to make Procurements by or on behalf of Cook County.

"*Person*" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"*Procurement*" means obtaining supplies, equipment, goods, or services of any kind.

"*Substantial Owner*" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information. **County reserves the right to request additional information to verify veracity of information contained in this Affidavit.**

I. Contract Information:

Contract Number: RFQ #2038-18393B

County Using Agency (requesting Procurement): Department of Transportation and Highways

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): Michael Baker International, Inc.

Substantial Owner Complete Name: _____

FEIN# 25 1228636

[redacted] E-mail address: joseph.catalano@mbakerintl.com

Street Address: 200 West Adams Street, Suite 1800

City: Chicago State: IL Zip: 60606

[redacted]

III. Compliance with Wage Laws:

Within the past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, entered a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful violation of any of the following laws:

No	*Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq.,* ***YES or NO***
No	*Illinois Minimum Wage Act, 820 ILCS 105/1 et seq.,* ***YES or NO***
No	*Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq.,* ***YES or NO***
No	*Employee Classification Act, 820 ILCS 185/1 et seq.,* **YES or NO**
No	*Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq.,* ***YES or NO***
No	*Any comparable state statute or regulation of any state, which governs the payment of wages* ***YES or NO***

If the Person/Substantial Owner answered **"Yes"** to any of the questions above, it is ineligible to enter into a Contract with Cook County, but can request a reduction or waiver under **Section IV.**

IV. Request for Waiver or Reduction

If Person/Substantial Owner answered **"Yes"** to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

No There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner. YES or NO

No Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation. YES or NO

No Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default. YES or NO

No Other factors that the Person or Substantial Owner believe are relevant. YES or NO

The Person/Substantial Owner must submit documentation to support the basis of its request for a reduction or waiver. The Chief Procurement Officer reserves the right to make additional inquiries and request additional documentation.

V. Affirmation

The Person/Substantial Owner affirms that all statements contained in the Affidavit are true, accurate and complete.

Signature: Joseph Catalano Date: 03/15/2024

Name of Person signing (Print): Joseph Catalano Title: Vice President

Subscribed and sworn to before me this 15 day of March, 2024

X L. Rodriguez

Notary Public Signature **Notary Seal**

Note: The above information is subject to verification prior to the award of the Contract.

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

CONTRACT #: 2038-18393B

SECTION 5

CONTRACT AND EDS EXECUTION PAGE

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

Execution by Corporation

Michael Baker International
Corporation's Name

Joseph Catalano
President's Printed Name and Signature

312-707-8770
Telephone

Joseph.Catalano@mbakerintl.com
Email

Secretary Signature

03/15/2024
Date

Execution by LLC

LLC Name

*Member/Manager Printed Name and Signature

Date

Telephone and Email

Execution by Partnership/Joint Venture

Partnership/Joint Venture Name

*Partner/Joint Venturer Printed Name and Signature

Date

Telephone and Email

Execution by Sole Proprietorship

Printed Name Signature

Assumed Name (if applicable)

Date

Telephone and Email

Subscribed and sworn to before me this
15 day of March, 2024.

My commission expires:

L. RODRIGUEZ
OFFICIAL SEAL
Notary Public - State of Illinois
My Commission Expires Sep 18, 2024

Notary Public Signature

Notary Seal

*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.

SECTION 6
COOK COUNTY SIGNATURE PAGE

ON BEHALF OF THE COUNTY OF COOK, A BODY POLITIC AND CORPORATE OF THE STATE OF ILLINOIS, THIS CONTRACT IS HEREBY EXECUTED BY:

Cook County Chief Procurement Officer

Date

APPROVED AS TO FORM:

Assistant State's Attorney
(Required on contracts over $1,000,000

Date

CONTRACT TERM & AMOUNT

Contract #

Original Contract Term

Renewal Options (If Applicable)

Contract Amount

Cook County Board Approval Date (If Applicable)

CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
08/18/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Aon Risk Services Central, Inc.
Pittsburgh PA Office
EQT Plaza ~ Suite 2700
625 Liberty Avenue
Pittsburgh PA 15222-3110 USA

CONTACT NAME:
PHONE (A/C. No. Ext): (866) 283-7122 **FAX (A/C. No.):** (800) 363-0105
E-MAIL ADDRESS:

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	Allied World Surplus Lines Insurance Co	24319
INSURER B:	American Guarantee & Liability Ins Co	26247
INSURER C:	Zurich American Ins Co	16535
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Michael Baker International, Inc
200 West Adams Street, Suite 2800
Chicago IL 60606 USA

COVERAGES **CERTIFICATE NUMBER:** 570101187544 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
C	X **COMMERCIAL GENERAL LIABILITY** CLAIMS-MADE X OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY X PRO-JECT X LOC OTHER:			GL0419728102	08/30/2023	08/30/2024	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$1,000,000 $1,000,000 $10,000 $1,000,000 $2,000,000 $4,000,000
C	**AUTOMOBILE LIABILITY** X ANY AUTO OWNED AUTOS ONLY X HIRED AUTOS ONLY SCHEDULED AUTOS X NON-OWNED AUTOS ONLY			BAP-4197284-02	08/30/2023	08/30/2024	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$1,000,000
B	X **UMBRELLA LIAB** X OCCUR **EXCESS LIAB** CLAIMS-MADE DED X RETENTION $10,000			AUC053258205	08/30/2023	08/30/2024	EACH OCCURRENCE AGGREGATE	$10,000,000 $10,000,000
C C	**WORKERS COMPENSATION AND EMPLOYERS' LIABILITY** Y/N ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? N **(Mandatory in NH)** If yes, describe under DESCRIPTION OF OPERATIONS below	N / A		WC419728202 AOS WC419728502 WI	08/30/2023 08/30/2023	08/30/2024 08/30/2024	X PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE-EA EMPLOYEE E.L. DISEASE-POLICY LIMIT	 $1,000,000 $1,000,000 $1,000,000
A	E&O - Professional Liability - Primary			03124806 Claims Made SIR applies per policy terms & conditions	08/30/2023	08/30/2024	Per Claim Aggregate	$1,000,000 $1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Contractual Liability coverage is included on the General Liability policy. Coverage to include claims for Products/Completed Operations. The Umbrella Liability policy follows the terms/conditions of the underlying General Liability policy. RE: MB Project Name: Cook County Various RFQ No. 2038-18393, MB Project No. TBD. Cook County, its officials, employees and agents are included as Additional Insured in accordance with the policy provisions of the General Liability, Automobile Liability and Umbrella Liability policies. General Liability policy evidenced herein is Primary and Non-Contributory to other insurance available to Additional Insured, but only in accordance with the policy's provisions. A Waiver of Subrogation is granted in favor of Certificate Holder in accordance with the policy provisions of the General Liability, Automobile Liability, Umbrella

CERTIFICATE HOLDER

Cook County
118 North Clark Street
Chicago IL 60602 USA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon Risk Services Central, Inc.

Holder Identifier :

Certificate No : 570101187544

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AGENCY CUSTOMER ID: 570000027699

LOC #:

ADDITIONAL REMARKS SCHEDULE

AGENCY	NAMED INSURED
Aon Risk Services Central, Inc.	Michael Baker International, Inc
POLICY NUMBER: See Certificate Number: 570101187544	
CARRIER: See Certificate Number: 570101187544 / NAIC CODE	EFFECTIVE DATE:

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,

FORM NUMBER: ACORD 25 **FORM TITLE:** Certificate of Liability Insurance

Additional Description of Operations / Locations / Vehicles:

Liability, Professional Liability and Workers' Compensation policies. Should General Liability, Automobile Liability and Workers' Compensation policies be cancelled before the expiration date thereof, the policy provisions of each policy will govern how notice of cancellation may be delivered to certificate holders in accordance with the policy provisions of each policy. Retroactive Date: May 1, 1940 for Professional services - June 30th, 2002 for Contracting Services.

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