AMENDMENT NO. 1

This Amendment modifies Contract No. 2211-06161, for Catch Basin and Inlet Cleaning Services by and between the County of Cook, Illinois, herein referred to as "County" and Sheridan Plumbing & Sewer 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 Board on October, 20, 2022, (hereinafter referred to as the "Contract"), wherein the Contractor is to provide Catch Basin and Inlet Cleaning Services (hereinafter referred to as the "Services") from November 1, 2022, through October, 31, 2025, in an amount not to exceed $2,755,000.00, with no renewal options; and

Whereas, the Contract will expire October, 31, 2025, and the agreed upon Services are still required; and

Whereas, pursuant to GC-07 of the Contract, , the County and Contractor desire to revise the scope of services , and to amend Exhibit XII Bid Page of the Contract.

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 decreased by $2,250,714.30 and the Total Contract Amount is revised to $504,285.70.

2. The Contract is hereby amended to delete Exhibit XII in its entirety and replace it with the attached Attachment A.

3. 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 B are incorporated and made a part of this Contract.

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

In witness whereof and pursuant to authority of the Chief Procurement Officer the County and Contractor have caused this Amendment No. 1 to be executed on the date and year last written below.

County of Cook, Illinois

By: Raffi Sarrafian Digitally signed by Raffi Sarrafian Date: 2025.09.25 12:19:16 -05'00'

Chief Procurement Officer

Date: _____

By: James Beligratis

State's Attorney (if applicable)

James Beligratis

Type or print name (if applicable)

Date: 9/2/2025

Sheridan Plumbing & Sewer Inc.

Signed

Beth Healy

Type or print name

President

Title

Date: July 29th 2025

ATTACHMENT A

CONTRACT CHANGE ORDER

COOK COUNTY DEPARTMENT OF TRANSPORTATION AND HIGHWAYS

Project: Catch Basin and Inlet Cleaning Services

Date: 4/17/2025
Chief Engr:
Section: 25-CBINC-00-GM
RE:
Contract: 2211-06161
SE: Aaron Lebowitz, P.E.
GC: Sheridan Plumbing & Sewer Inc.
OSE:

Number: 1 & Final

Contract Amount: $2,755,000.00

ITEM	DESCRIPTION	UNIT	UNIT PRICE	CONTRACT QUANTITIES	ADJUSTMENTS	AMOUNT OF THIS CHANGE	CHANGES TO DATE
1	CATCH BASINS TO BE CLEANED [MBE/WBE]	EACH	$475.00	5,500.00	(4,882.00)	($2,318,950.00)	($2,318,950.00)
2	CLEANING EXISTING INLETS [MBE/WBE]	EACH	$285.00	500.00	(453.00)	($129,105.00)	($129,105.00)
*3	ADDITIONAL HANDLING AND UNEXPECTED MATERIAL MARKUP	L.SUM	$197,340.70		1.00	$197,340.70	$197,340.70
					AMOUNT:	**($2,250,714.30)**	**($2,250,714.30)**
					ADJUSTED CONTRACT AMOUNT:		**$504,285.70**
					% CHANGE:		**-81.7%**

CONTRACT CHANGE ORDER

COOK COUNTY DEPARTMENT OF TRANSPORTATION AND HIGHWAYS
BUREAU OF CONSTRUCTION

Project:	Catch Basin and Inlet Cleaning Services	**Date:**	4/17/2025
		Chief Engr:	
Section:	25-CBINC-00-GM	**RE:**	
Contract:	2211-06161	**SE:**	Aaron Lebowitz, P.E.
GC:	Sheridan Plumbing & Sewer Inc.	**OSE:**	

Number: 1 & Final

Contract Amount: $2,755,000.00

To: Chief Procurement Officer
Please be advised of a proposed contract change order on the above captioned project, as follows:

LINE ITEM CHANGES

Items #1, #2:
The adjustment to **Catch Basins to Be Cleaned and Cleaning Existing Inlets** reflects actual storm sewer structures cleaned. No additional work will be done on this contract due to changes in the landfill industry's requirements for disposal of materials delivered by vactor truck. The changes occurred on 4/26/2023 after the contract was awarded and drastically increase the cost of transportation and disposal of the materials.

NEW ITEMS

Item *#3:
Additional Handling and Unexpected Material Markup was needed for addition compensation to dispose of materials caused by changes to the landfill industry requirements for disposal of materials delivered by vactor truck. The change in industry requirements occurred on 4/26/2023 after this contract was awarded. These materials were removed from catch basins before knowledge of the changes to disposal requirements.

CONTRACT CHANGE ORDER

COOK COUNTY DEPARTMENT OF TRANSPORTATION AND HIGHWAYS
BUREAU OF CONSTRUCTION

Project: Catch Basin and Inlet Cleaning Services
Section: 25-CBINC-00-GM
Contract: 2211-06161
GC: Sheridan Plumbing & Sewer Inc.

Date: 4/17/2025
Chief Engr:
RE:
SE: Aaron Lebowitz, P.E.
OSE:

Number: 1 & Final

Contract Amount: $2,755,000.00

Note:
The undersigned has determined that the circumstances that necessitate this change are germane to the original contract, were not reasonably foreseeable at the time the contract was signed and is in the best interest of the local agency.

Amount of this change order:	DECREASE	($2,250,714.30)
Total amount of change orders to date:	DECREASE	($2,250,714.30)

05/13/2025

Chief Engineer of Construction Date

Jennifer "Sis" Killen

05/13/2025

Jennifer "Sis" Killen, P.E., PTOE, Superintendent Date

Robert J. Stuart, Deputy Chief Procurement Officer – Design & Construction Date

Raffi Sarrafian, Chief Procurement Officer Date

Catch Basin and Inlet Cleaning Services
Section: 25-CBINC-00-GM
Contract No. 2211-06161

Contract Amount	$2,755,000.00
AMENDMENT No. 1 Final:	-$2,250,714.30
Change Order #1 Final -$2,250,714.30	
Adjusted Contract Total	**$504,285.70**

ATTACHMENT B

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

161 N. Clark
Suite 2300
Chicago, Illinois 60601

Date: August 7, 2025

TO: Raffi Sarrafian, Chief Procurement Officer
Office of the Chief Procurement Officer

FROM: JEANETTA CARDINE
Jeanetta Cardine, Deputy Director
Compliance Center of Excellence
Center of Business Enterprise Development

RE: Contract No. 2211-06161 Amendment 1
Catch Basin and Inlet Cleaning Services
Department of Transportation and Highways (DOTH)
Contractor: Sheridan Plumbing & Sewer Inc.
Original Contract Value: $2,755,000.00
Original Contract Term: 11/1/2022 – 10/31/2025
Amendment 1 decreases the contract value by $2,250,714.30 to a total contract value of $504,285.70 with no changes to the duration of the contract
Revised Contract Value: $504,285.70
Bid – Goods and Services
Contract Goal: 12.5% MBE, 10% WBE

The Center of Business Enterprise Development is in receipt of the above-referenced contract amendment and has reviewed this contract for compliance with the Minority and Women owned Business Enterprises (MBE/WBE) Ordinance. After careful review of our records as reported by the vendor, it has been determined the vendor is in compliance with the MBE/WBE Ordinance.

Original Contract Utilization Plan (Based on Contract Value $2,755.000.00)

MBE/WBE	Status	Certifying Agency	Commitment (direct)
Sheridan Plumbing & Sewer, Inc.	WBE-C-F	City of Chicago	87.3%
Comprehensive Construction Solutions, LLC	MBE-AA-F	Cook County	12.7%

Total: 100% MWBE

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

Amendment 1 Utilization Plan (Based on Contract Value $504,285.70)

MBE/WBE	Status	Certifying Agency	Commitment (direct)
Sheridan Plumbing & Sewer, Inc.	WBE-C-F	City of Chicago	100%

Total: 100% WBE

Amendment 1 decreases the contract value by $2,250,714.30 to a total contract value of $504,285.70 with no changes to the duration of the contract. A full 12.5% MBE waiver was granted during the processing of amendment 1 due to the reduction in the scope of services. Revised MBE/WBE forms were used in the determination of the responsiveness of this contract amendment.

JC/mk

CC: David Crawl, OCPO
Nathan Roseberry, DOTH

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 9/12/2022

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
HUB International Midwest Limited
1411 Opus Place, Suite 450
Downers Grove IL 60515

CONTACT NAME: CSUConstruction
PHONE (A/C, No, Ext): 630-468-5600 **FAX (A/C, No):**
E-MAIL ADDRESS: CSUConstruction@hubinternational.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : COUNTRY Mutual Insurance Company	
INSURER B : Colony Specialty Insurance Company	36927
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED SHERPLU-02
Sheridan Plumbing & Sewer, Inc.
6754 W 74th Street
Bedford Park IL 60638-6029

COVERAGES **CERTIFICATE NUMBER:** 2098177506 **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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY	Y	Y	AB9262708	6/1/2022	6/1/2023	EACH OCCURRENCE	$ 1,000,000
	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 500,000
	X X, C, U Included						MED EXP (Any one person)	$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	$ 1,000,000
	POLICY X PRO-JECT LOC						GENERAL AGGREGATE	$ 2,000,000
	OTHER:						PRODUCTS - COMP/OP AGG	$ 2,000,000
								$
A	AUTOMOBILE LIABILITY	Y	Y	AV9262707	6/1/2022	6/1/2023	COMBINED SINGLE LIMIT (Ea accident)	$ 1,000,000
	ANY AUTO						BODILY INJURY (Per person)	$
	X OWNED AUTOS ONLY X SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	$
								$
A	X UMBRELLA LIAB X OCCUR			AU9262724	6/1/2022	6/1/2023	EACH OCCURRENCE	$ 5,000,000
	EXCESS LIAB CLAIMS-MADE						AGGREGATE	$ 5,000,000
	DED X RETENTION $ 10,000							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N		Y	AW9262709	6/1/2022	6/1/2023	X PER STATUTE OTH-ER	
	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y	N/A					E.L. EACH ACCIDENT	$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
B	Leased/Rented Equipment			IM255891	6/1/2022	6/1/2023	Leased/Rented limit Leased/Rented ded.	200,000 1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Cook County, its officials, employees, and agents are included as additional insureds under General Liability & Auto Liability, on a primary and non-contributory basis, when agreed in a written contract, subject to policy terms, conditions and exclusions. Waiver of Subrogation in favor of the additional insured applies under General Liability, Auto Liability & Workers Compensation when agreed in a written contract, subject to policy terms, conditions and exclusions. Umbrella follows form. 30 Day Notice of Cancellation applies in accordance to policy terms and conditions.

CERTIFICATE HOLDER

Cook county
69 W. Washington Street, Floor 30
Chicago IL 60602

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
Neil R. Hughes

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POLICY NUMBER: AV9262707

COMMERCIAL AUTO
CA 04 49 11 16

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

A. The following is added to the **Other Insurance** Condition in the Business Auto Coverage Form and the **Other Insurance – Primary And Excess Insurance Provisions** in the Motor Carrier Coverage Form and supersedes any provision to the contrary:

This Coverage Form's Covered Autos Liability Coverage is primary to and will not seek contribution from any other insurance available to an "insured" under your policy provided that:

1. Such "insured" is a Named Insured under such other insurance; and
2. You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to such "insured".

B. The following is added to the **Other Insurance** Condition in the Auto Dealers Coverage Form and supersedes any provision to the contrary:

This Coverage Form's Covered Autos Liability Coverage and General Liability Coverages are primary to and will not seek contribution from any other insurance available to an "insured" under your policy provided that:

1. Such "insured" is a Named Insured under such other insurance; and
2. You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to such

"insured".

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED INSURED FOR COVERED AUTOS LIABILITY COVERAGE

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by this endorsement.

This endorsement identifies person(s) or organization(s) who are "insureds" for Covered Autos Liability Coverage under the Who Is An Insured provision of the Coverage Form. This endorsement does not alter coverage provided in the Coverage Form.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Sheridan Plumbing & Sewer, Inc.
Endorsement Effective Date:

SCHEDULE

Name Of Person(s) Or Organization(s):
When required
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Each person or organization shown in the Schedule is an "insured" for Covered Autos Liability Coverage, but only to the extent that person or organization qualifies as an "insured" under the Who Is An Insured provision contained in Paragraph **A.1.** of Section **II** – Covered Autos Liability Coverage in the Business Auto and Motor Carrier Coverage Forms and Paragraph **D.2.** of Section **I** – Covered Autos Coverages of the Auto Dealers Coverage Form.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM
BUSINESS AUTO COVERAGE FORM
MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured: Sheridan Plumbing & Sewer, Inc.
Endorsement Effective Date:

SCHEDULE

Name(s) Of Person(s) Or Organization(s):
As Required
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The **Transfer Of Rights Of Recovery Against Others To Us** condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

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Policy #AB9262708

COMMERCIAL GENERAL LIABILITY
CG 20 10 04 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
An entity listed as an additional insured on a certificate of insurance issued and approved by us during this policy period.	Your operations or premises owned, leased, or rented by you.
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

1. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

C. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

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1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Per Certificates of Insurance on File	Per Certificates of Insurance on File
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	

A. **Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

PRIMARY AND NONCONTRIBUTORY – OTHER INSURANCE CONDITION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name of Person or Organization:

As Required

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

The TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US Condition (Section **IV** – COMMERCIAL GENERAL LIABILITY CONDITIONS) is amended by the addition of the following:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.

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COUNTRY Mutual Insurance Company

POLICY NUMBER: AWC 10 03 06 06

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY

BLANKET WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS

This endorsement modifies insurance provided under the following:

WORKERS COMPENSATION INSURANCE POLICY

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right to take direct action against the person or organization named in the Schedule below. This agreement applies only to the extent that you perform work for others who require you to obtain this agreement.

This agreement shall not operate to directly or indirectly benefit anyone not named in the Schedule. We maintain our right to assert a lien on any action taken by any person(s) against the person or organizations named in the Schedule.

SCHEDULE

Persons or organizations to whom a certificate of insurance has been issued and approved by us, and that certificate waives our rights of subrogation against the certificate holder under this policy and is in effect at the time of the occurrence.

This endorsement changes the policy to which it is attached and is effective on the date issued unless otherwise stated.
(The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Endorsement Effective Policy No. AW 9262709 Endorsement No.

Insured SHERIDAN PLUMBING AND SEWER Premium $ Incl.

Insurance Company COUNTRY Mutual Insurance Company

Countersigned By K J. Sch

AWC 10 03 06 06

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Waiver Meeting Analysis Form

Reviewing Officer: Michael Krug

Date: 8/5/2025

Bidder/Proposer Name: Sheridan Plumbing & Sewer Inc.

Contract No.: 2211-06161 Amendment No. 1

Commodity: Catch Basin and Inlet Cleaning Services

Dollar Amount: Amendment No. 1 decreases contract from $2,755,000.00 by $2,250,714.30 to a total contract value of $504,285.70

MBE/WBE/DBE Goal: 12.5% MBE, 10% WBE

	Check the appropriate box:		
BIDDER/PROPOSER REQUEST	**FULL WAIVER**	**PARTIAL WAVIER**	**% OF WAVIER REQUESTED**
MBE WAIVER	✓		12.5%
WBE WAIVER			
M/WBE WAIVER			
DBE WAIVER			

Check each item applicable to Bidder/Proposer reason(s) for a waiver request

REASON FOR REQUEST	**YES**	**NO**	**EXPLAINED YES/NO**
Lack of sufficient qualified MBEs and/or WBEs capable of providing the goods or services required by the contract.			
The specifications and necessary requirements for performing the contract make it impossible or economically infeasible to divide the contract to enable the contractor to utilize MBEs and/or WBEs in accordance with the applicable participation.			
Price(s) quoted by potential MBEs and/or WBEs are above competitive levels and increase cost of doing business would make acceptance of such MBE and/or WBE bid economically impracticable, taking into consideration the percentage of total contract price represented by such MBE and/or WBE bid.			
There are other relevant factors making it impossible or economically infeasible to utilize MBE and/or WBE firms.	✓		Yes

Waiver Meeting Analysis Form

Check each item applicable to Bidder/Proposer good faith efforts to obtain MBE/WBE participation.

GOOD FAITH EFFORTS	YES	NO
Reviewed list of PCEs maintained by the County to identify qualified PCEs for contract participation.		
Divided Procurement elements into discrete tasks, quantities or economically feasible units consistent with the availability of PCEs, to facilitate PCE participation.		
Adjusted or offered to adjust relevant insurance requirements or otherwise assisted or offered to assist PCEs in obtaining relevant insurance, where economically feasible, to encourage participation by PCEs.		
Made timely attempts to contact PCEs capable of providing relevant goods or services and provide them with a convenient and timely opportunity to obtain, review and respond to all relevant information concerning the Procurement.		
Followed up initial contacts of PCEs to determine if they are interested in participating in the Procurement.		
Negotiated in good faith and on a timely basis with PCEs to enable them to participate in the Procurement. Evidence of such negotiation shall include full contact information for the relevant PCEs; a description of the information provided regarding relevant plans and specifications for the work; and an explanation as to why an agreement in principle could not be reached.		
Made efforts to assist relevant PCEs in obtaining equipment, supplies, materials, or related assistance or services, where appropriate, provided, however, that the PCE remains responsible for actually paying for such items and is in a position to fulfill a commercially useful function.		
Established delivery schedules which will encourage participation by PCEs, where the requirements of the Procurement permit.		
Used the services and assistance of the CCD's staff.		
Timely notified appropriate community and minority and women's business organizations; identified by the OCC as assist agencies, of the opportunity for participation in the Procurement.		
Has established a mentor/Protégé agreement with a PCE to help improve or develop the PCEs business, operations, capacity, financial management, reputation or skills, which sets forth the actual or projected effects of such agreement.		
Demonstrated to the CCD that no PCE exist with which a mentor/protégé relationship could be established.		

Check item applicable

Additional Factors	Yes	No
The levels of participation by PCEs set forth in Utilization Plans submitted by other Persons for the same Procurement.		
Whether and to what degree the requesting party will endeavor to maximize indirect participation.		
Whether the requesting party's has, without sound and demonstrable reasons, rejected PCEs as being unqualified.		
Whether the requesting party's conclusion that PCEs were not available for participation in the procurement is based solely on additional costs associated with such participation		

Waiver Meeting Analysis Form

Check item applicable, initial and date.

Reviewing Officer	Grant	Deny	Initial	Date
Recommendation	✓		MGK	8/5/2025

Reason for recommendation:

Sheridan Plumbing & Sewer Inc. has requested a full MBE waiver for amendment no. 1 due to other relevant factors making it impossible or economically infeasible to utilize MBE and/or WBE firms.

The original contract for this project was for $2,755,000.00 and started on November 1, 2022, going through October 31, 2025. Amendment 1 decreases the contract value by $2,250,714.30 to a total contract value of $504,285.70.

The scope of this project was for clean out catch basins and existing inlets on storm sewers for the Department of Transportation and Highways. However, on April 26th of 2023, changes in the landfill industry's requirements for disposal of materials delivered by a Vactor Truck were made. This new requirement drastically increased the cost of transportation and disposal of the materials.

The vendor, Sheridan Plumbing & Sewer Inc., had originally committed 12.7% of the contract to Comprehensive Construction Solutions, who is a City of Chicago certified MBE. However, due to the drastically increased costs of the project, the Department of Transportation and Highways have chosen to reduce the scope of services on this contract. Sheridan Plumbing notes that the contract was "terminated at approximately 11.2% completion". Sheridan Plumbing was unable to use their subcontractor before this drastic reduction in the scope of work.

Good Faith Efforts:

Sheridan Plumbing & Sewer Inc. is a City of Chicago certified WBE and are self-performing 100% of the contract. The vendor had originally committed to using an MBE for 12.7% of the contract, however the scope of services was reduced drastically before they had the opportunity to use their subcontractor's services.

Recommendation is to grant the full 12.5% MBE waiver for this contract amendment no. 1.

Waiver Meeting Analysis Form

Check item applicable, initial and date.

Waiver Team Member	Agree	Disagree	Initial	Date
Maleya Edwards	✓		ME	8/5/2025
Venice Lewis	✓		VL	8/5/2025
Dave Bowman	✓		DB	8/5/2025
Andrea Williams	✓		AW	8/5/2025
Gary Gordon	✓		GG	8/5/2025
Michael Krug (Presenter)				
Marco Magana	✓		MM	8/5/2025
Ashle' Bland OOO				
Mohammad Abdrabo	✓		MA	8/5/2025
April Johnson	✓		AJ	8/5/2025

Must have at least two members to vote on a waiver

Comments:

Deputy Director: JEANETTA CARDINE

Approval Date: 8/5/2025

Director: _____

Approval Date: _____

Waiver Meeting Analysis Form

SHERIDAN PLUMBING & SEWER

6754 W. 74th Street
Bedford Park, IL 60638
(708) 475-7100 (708) 475-7138 fax
IL Plumbing License No. 055-027841
WBE Certified

March 21, 2025

Marcelino Hernandez
Cook County
Department of Transportation and Highways
Bureau of Construction
69 West Washington Street
Suite 2400
Chicago, IL 60602
marcelino.hernandez@cookcountyil.gov

Reference:
Catch Basin and Inlet Cleaning Services
Section: 25-CBINC-00-GM
Contract: 2211-06161

Marcelino,

Due to the early termination of the contract, Sheridan did not have any sub-contractor participation in Contract 2211-06161, Catch Basin and Inlet Services. The contract was terminated at approximately 11.2 percent completion.

This project was unique in the fact there was only one scope of work, which contributed having no sub-contractor participation.

Very sincerely yours,
SHERIDAN PLUMBING & SEWER INC.

By

Arthur Aimaro, Senior Project Manager

Subscribed and sworn before me this 21st day of March

Notary Public

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES. 8/18/2025

Waiver Meeting Analysis Form

CONTRACT CHANGE ORDER

COOK COUNTY DEPARTMENT OF TRANSPORTATION AND HIGHWAYS

Project: Catch Basin and Inlet Cleaning Services

Date: 4/17/2025
Chief Engr:
Section: 25-CBINC-00-GM
RE:
Contract: 2211-06161
SE: Aaron Lebowitz, P.E.
GC: Sheridan Plumbing & Sewer Inc.
OSE:

Number: 1 & Final

Contract Amount: $2,755,000.00

ITEM	DESCRIPTION	UNIT	UNIT PRICE	CONTRACT QUANTITIES	ADJUSTMENTS	AMOUNT OF THIS CHANGE	CHANGES TO DATE
1	CATCH BASINS TO BE CLEANED [MBE/WBE]	EACH	$475.00	5,500.00	(4,882.00)	($2,318,950.00)	($2,318,950.00)
2	CLEANING EXISTING INLETS [MBE/WBE]	EACH	$285.00	500.00	(453.00)	($129,105.00)	($129,105.00)
*3	ADDITIONAL HANDLING AND UNEXPECTED MATERIAL MARKUP	LSUM	$197,340.70		1.00	$197,340.70	$197,340.70
					AMOUNT:	**($2,250,714.30)**	**($2,250,714.30)**
					ADJUSTED CONTRACT AMOUNT:		**$504,285.70**
					% CHANGE:		**-81.7%**

CONTRACT CHANGE ORDER

COOK COUNTY DEPARTMENT OF TRANSPORTATION AND HIGHWAYS BUREAU OF CONSTRUCTION

Project: Catch Basin and Inlet Cleaning Services

Date: 4/17/2025
Chief Engr:
Section: 25-CBINC-00-GM
RE:
Contract: 2211-06161
SE: Aaron Lebowitz, P.E.
GC: Sheridan Plumbing & Sewer Inc.
OSE:

Number: 1 & Final

Contract Amount: $2,755,000.00

To: Chief Procurement Officer
Please be advised of a proposed contract change order on the above captioned project, as follows:

LINE ITEM CHANGES

Items #1, #2:
The adjustment to **Catch Basins to Be Cleaned and Cleaning Existing Inlets** reflects actual storm sewer structures cleaned. No additional work will be done on this contract due to changes in the landfill industry's requirements for disposal of materials delivered by vactor truck. The changes occurred on 4/26/2023 after the contract was awarded and drastically increase the cost of transportation and disposal of the materials.

NEW ITEMS

Item *#3:
Additional Handling and Unexpected Material Markup was needed for addition compensation to dispose of materials caused by changes to the landfill industry requirements for disposal of materials delivered by vactor truck. The change in industry requirements occurred on 4/26/2023 after this contract was awarded. These materials were removed from catch basins before knowledge of the changes to disposal requirements.

Contract #: 2211-06161

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.: 2211-06161	Date: July 29, 2025
Total Bid or Proposal Amount: $$2,755,000.00	Contract Title: Catch Basin and Inlet Cleaning Services
Contractor: Sheridan Plumbing & Sewer, Inc.	Subcontractor/Supplier/ Subconsultant to be added or substitute: N/A
Authorized Contact for Contractor: Beth Healy	Authorized Contact for Subcontractor/Supplier/ Subconsultant: N/A
Email Address (Contractor): bhealy@spands.com	Email Address (Subcontractor): N/A
Company Address (Contractor): 6754 W. 74th Street	Company Address (Subcontractor): N/A
City, State and Zip (Contractor): Bedford Park, IL 60638	City, State and Zip (Subcontractor): N/A
Telephone and Fax (Contractor): (708) 475-7100 (708)475-7138	Telephone and Fax (Subcontractor): N/A
Estimated Start and Completion Dates (Contractor): April 2023 June 2024	Estimated Start and Completion Dates (Subcontractor): N/A

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
Clean Catch Basins and Inlets	$0.00

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.**

Sheridan Plumbing & Sewer, Inc.
Contractor

Beth Healy
Name

President
Title

Prime Contractor Signature

July 29th 2025
Date

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

MBE/WBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions – Section 19.

I. **BIDDER/PROPOSER MBE/WBE STATUS:** (check the appropriate line)

[X] Bidder/Proposer is a certified MBE or WBE 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 MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit.

[ ] Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE 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. [X] **Direct Participation of MBE/WBE Firms** [ ] **Indirect Participation of MBE/WBE 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.

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

MBE/WBE Firm: Sheridan Plumbing & Sewer, Inc.

Address: 6754 W. 74th Street, Bedford Park, IL. 60638

E-mail: bhealy@spands.com

Contact Person: Beth Healy Phone: (708) 475-7100

Dollar Amount Participation: $ $504,285.70

Percent Amount of Participation: 100 %

*Letter of Intent attached? Yes [X] No [ ]
*Current Letter of Certification attached? Yes [X] No [ ]

MBE/WBE Firm: _____

Address: _____

E-mail: _____

Contact Person: _____ Phone: _____

Dollar Amount Participation: $ _____

Percent Amount of Participation: _____ %

*Letter of Intent attached? Yes [ ] No [ ]
*Current Letter of Certification attached? Yes [ ] No [ ]

Attach additional sheets as needed.

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

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

MBE/WBE LETTER OF INTENT - FORM 2

M/WBE Firm: Sheridan Plumbing & Sewer, Inc.

Certifying Agency: City of Chicago

Contact Person: Beth Healy

Certification Expiration Date: 10/15/2026

Address: 6754 W 74th Street

Ethnicity: caucasian

City/State: Bedford Park, Illinois Zip: _____

Bid/Proposal/Contract #: 2211-06161 Cleaning Catch Basin and Inlet Services Estimate 4SF

Phone: (708) 475 -7100 Fax: (7089) 475-7138

FEIN #: 04-3794598

Email: bhealy@spands.com

Participation: [X] Direct [ ] Indirect

Will the M/WBE firm be subcontracting any of the goods or services of this contract to another firm?

[X] No [ ] Yes – Please attach explanation. Proposed Subcontractor(s): N/A

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

Clean Storm Sewer Catch Basins and Inlets

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

$504,285.70, 100%

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 MBE/WBE 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 (*M/WBE*)

Beth Healy
Print Name

Sheridan Plumbing & Sewer, Inc.
Firm Name

July 29, 2025
Date

Subscribed and sworn before me

this 29th day of July, 2025.

Notary Public

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

Signature (*Prime Bidder/Proposer*)

Beth Healy
Print Name

Sheridan Plumbing & Sewer, Inc.
Firm Name

July 29, 2025
Date

Subscribed and sworn before me

this 29th day of July, 2025.

Notary Public

SEAL
OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

CITY OF CHICAGO

DEPARTMENT OF PROCUREMENT SERVICES

NOV - 2 2021

Beth Healy
Sheridan Plumbing & Sewer, Inc.
6754 W. 74th Street
Bedford Park, IL 60638

Dear Ms. Healy:

We are pleased to inform you that **Sheridan Plumbing & Sewer, Inc.,** has been recertified as a **Women-Owned Business Enterprise ("WBE")** by the City of Chicago ("City"). This **WBE** certification is valid until **10/15/2026**; however, your firm's certification must be revalidated annually. In the past the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. Therefore, we require you to be even more diligent in filing your **annual No-Change Affidavit 60 days** before your annual anniversary date.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification during the five year period stated above, you must file an **annual No-Change Affidavit**. Your firm's annual No-Change Affidavit is due by **10/15/2022, 10/15/2023, 10/15/2024 and 10/15/2025**. 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 **10/15/2026**. 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 **8/15/2026.**

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

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

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

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

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

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

NAICS Code(s):
237110 – Water and Sewer Line and Related Structures Construction
237120 – Distribution Line, Gas and Oil, Construction; Pipeline Rehabilitation
238110 – Poured Concrete Foundation and Structure Contractors
238190 – Other Foundation, Structure, and Building Exterior Contractors
238220 – Plumbing Contractors
238910 – Hydrodemolition (i.e., demolition with pressurized water) Contractors
562998 – Sewer Cleaning and Rodding Services; Storm Basin; Tank Cleaning and Disposal

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

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

Sincerely,

Aileen Velazquez
Chief Procurement Officer

AV/cm

COOK COUNTY
OFFICE OF THE
Chief Procurement
Officer

PETITION FOR PARTIAL OR FULL WAIVER – FORM 3

Bidder/Proposer: Sheridan Plumbing & Sewer, Inc

Contract No./Title: 2211-06161 Cleaning Catch Basin and Inlet Services Estimate 4SF

A. BIDDER/PROPOSER HEREBY REQUESTS:

X FULL MBE WAIVER	_____ PARTIAL MBE WAIVER
_____ FULL WBE WAIVER	_____ PARTIAL WBE WAIVER
_____ FULL DBE WAIVER	_____ PARTIAL DBE WAIVER

B. REASON FOR PARTIAL/FULL WAIVER REQUEST:

Bidder/Proposer shall check each item applicable to its overall reason for a waiver request. Additionally, supporting documentation shall be submitted with this request.

_____ (1) Lack of sufficient qualified MBEs and/or WBEs capable of providing the goods or services required by the contract.

_____(2) The specifications and necessary requirements for performing the contract make it impossible or economically infeasible to divide the contract to enable the contractor to utilize MBEs and/or WBEs in accordance with the applicable participation.

_____(3) Price(s) quoted by potential MBEs and/or WBEs are above competitive levels and increase cost of doing business and would make acceptance of such MBE and/or WBE bid economically impracticable, taking into consideration the percentage of total contract price represented by such MBE and/or WBE bid.

*X (4) There are other relevant factors making it impossible or economically infeasible to utilize MBE and/or WBE firms.

*PLEASE SEE ATTACHED LETTER OF CLARIFICATION

SHERIDAN PLUMBING & SEWER

6754 W. 74th Street
Bedford Park, IL 60638
(708) 475-7100 (708) 475-7138 fax
IL Plumbing License No. 055-027841
WBE Certified

March 21, 2025

Marcelino Hernandez
Cook County
Department of Transportation and Highways
Bureau of Construction
69 West Washington Street
Suite 2400
Chicago, IL 60602
marcelino.hernandez@cookcountyil.gov

Reference:
Catch Basin and Inlet Cleaning Services
Section: 25-CBINC-00-GM
Contract: 2211-06161

Marcelino,

Due to the early termination of the contract, Sheridan did not have any sub-contractor participation in Contract 2211-06161, Catch Basin and Inlet Services. The contract was terminated at approximately 11.2 percent completion.

This project was unique in the fact there was only one scope of work, which contributed having no sub-contractor participation.

Very sincerely yours,
SHERIDAN PLUMBING & SEWER INC.

By

Arthur Aimaro, Senior Project Manager

Subscribed and sworn before me this 21st day of March

Notary Public

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

GOOD FAITH EFFORT TRANSPARENCY REPORT

C. GOOD FAITH EFFORTS TO OBTAIN PARTICIPATION (attach sheets as necessary as Schedule 1)
Bidder/Proposer shall explain and detail the following Good Faith Efforts undertook to meet Cook County's contract specific goals.

1. Please attach to this form a detailed list of any and all PCEs, stating the PCE certification (MBE and/or WBE as defined by the Cook County Municipal Code) and with whom from the contacted PCEs the Bidder/Proposer engaged, contacted, and/or communicated with in the County's Market Place;
   Timelines:

   a. When the Bidder/Proposer knew of the bid;
   b. When the Bidder/Proposer contacted the PCE(s);
   c. When the Bidder/Proposer formulated its bid and utilization plan; and
   d. When was the bid request due date.

2. The number of timely attempts to contact PCEs providing the type of supplies, equipment, goods, and/or services required for the Procurement, including but not limited to;

   a. Dates of each contact attempt for each contacted PCE;
   b. Whom, if anyone, the Bidder/Proposer communicated and/or corresponded (including written, virtual, digital, electronic, and other feasible methods of communication);
   c. The number of unsuccessful attempts to communicate or correspond with PCEs; and
   d. Attach copies of all solicitations to contacted PCEs.

3. How the Bidder/Proposer proposed to divide the procurement requirements into small tasks and/or quantities into economically feasible units to promote PCE participation.

4. Whether and to what degree the requesting party will endeavor to maximize indirect participation.

5. Detailed explanation of use, if any, of the Center of Business Enterprise Development Compliance services and staff.

6. Detailed explanation of timely notification and usage of services and assistance provided by community, minority, and/or women business organizations.

7. Attach any other documentation relative to Good Faith Efforts in complying with MBE and WBE participation.

GOOD FAITH EFFORT TRANSPARENCY REPORT

By signing below, I affirm under penalty of perjury the information provided in the Petition for Full or Partial Waiver/Good Faith Effort Transparency Report is truthful, accurate, and complete, to the best of my knowledge and capacity. I agree any finding of false, fraudulent, and/or otherwise misleading information will automatically disqualify the request for a waiver and County's Center of Business Enterprise Development reserves the right to pursue additional actions and/or remedies against the requesting Bidder/Proposer.

	President	July 29, 2025
Signature and Title of Bidder/Proposer	Title	Date

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
NONE	

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:

6754 W 74th Street, Bedford Park IL 60638

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): 19-30-200-020-0000

(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:

NA

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 #: 2211-06161

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 Sheridan Plumbing & Sewer, Inc

D/B/A: ^SAME^ FEIN # Only: 04-3794598

Street Address: 6754 W 74th Street

City: Bedford Park State: IL Zip Code: 60638

Phone No.: (708)475-7100 Fax Number: Email: bhealy@spands.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
Beth Healy,	5201 Woodland Avenue, Western Springs, IL 60558,	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

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
Beth Healy	5201 Woodland Ave, Western Springs, IL 60558	President, Treasurer, Secretary	2004-present
Anthony Johansen	1126 Hyannis Circle, Carol Stream, IL 60188,	Vice President,	2021-Present
Tracy Moreno	28608 107th Street, Trevor, WI 53179	Vice President	2020 - Present

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

Beth Healy
Name of Authorized Applicant/Holder Representative (please print or type)

President
Title

Signature

August 5th, 2025
Date

bhealy@spands.com
E-mail address

(708)475-7100
Phone Number

Subscribed to and sworn before me
this 5th day of Aug, 2025

My commission expires:

x Tracy J Crosse
Notary Public Signature

08/18/2025
Notary Seal

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

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

CONTRACT #: 2211-06161

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: Sheridan Plumbing & Sewer \ Beth Healy

Address of Person Doing Business with the County: 6754 W. 74th Street, Bedford Park, IL. 60638

Phone number of Person Doing Business with the County: (708) 475-7100

Email address of Person Doing Business with the County: BHealy@spands.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:

Beth Healy, President, 6754 W. 74th Street, Bedford Park, IL. 60638

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: 2211-06161

The aggregate dollar value of the business you are doing or seeking to do with the County: $ 504,285.70

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: DAVID CRAWL, Contract Negotiator, Construction/Architecture & Engineering, OCPO (312) 603-0831

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: AARON LEBOWITZ, P.E., Deputy Bureau Chief of Construction, Department of Transportation (312) 405-1968

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.

Signature of Recipient

August 5th, 2025
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: 2211-06161

County Using Agency (requesting Procurement): Cook

II. Person/Substantial Owner Information:

Person (Corporate Entity Name): Sheridan Pluming & Sewer,Inc, Beth Healy

Substantial Owner Complete Name: Beth Healy

FEIN# 04-3794598

[redacted] E-mail address: bhealy@spands.com

Street Address: 5201 Woodland Avenue

City: Western Springs State: IL Zip: 60558

[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: _____ Date: August 5th, 2025

Name of Person signing (Print): Beth Healy Title: President

Subscribed and sworn to before me this 5th day of August, 20 25

X _____
Notary Public Signature

Notary Seal

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

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

CONTRACT #: 2211-06161

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

Sheridan Plumbing & Sewer, Inc
Corporation's Name

Beth Healy, Beth Healy
President's Printed Name and Signature

(708)475-7100
Telephone

bhealy@spands.com
Email

Beth Healy
Secretary Signature

August 5, 2025
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
5th day of Aug, 2025

Tracy J Crosse
Notary Public Signature

My commission expires:
08/18/2025
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.

OFFICIAL SEAL
TRACY J CROSSE
NOTARY PUBLIC, STATE OF ILLINOIS
MY COMMISSION EXPIRES: 8/18/2025

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)