

CREO KC Contractor Utilization Plan Approval

Ψ										
MISSOURI										
Date:	July 22, 2022									
To:	Itzel Vance, Civil Rights & Equal Opportunity Department									
From:	Derrick Smith, Procurement Services									
Subject:	Contract/Project No.: 60800054/9746									
	Project Title: Valve Straightening and Water Di	stribution Sy	stem Re	pairs						
Funding:	★ City (MBE/WBE/DBE)□ Federal (DBE)¹□ Other: TIF	☐ State (DBI	E) ¹ - Gra	ant						
Contract	★ Construction ☐ General Service	☐ Facili	ty Repa							
Category:	☐ Design Professional ☐ Professional Services			☐ Other:						
	al Closing Date: July 12, 2022	No. of Bid	ders/Pr	oposers: 5						
	ded Bid/Proposal ² : \$ 363,415.00									
	SheDigs It, LLC			Central, Blue Springs, MO 64014						
Contact: M		Phone: (8)								
	nail: Mike@SheDigsIt.com Information:	Fax: (816)	295-10	21						
	hiemann, Project Manager:									
	IGHTS & EQUAL OPPORTUNITY DEPARTMEN Contractor Utilization Plan is:	T USE ONLY		The Request for Best Faith Efforts Waiver is: □ Approved						
☐ Disapprove	ed			☐ Disapproved						
				☐ Not Applicable						
(lization Plan Participation:11% MBE & ₁₁	% WBE	or	% DBE						
Gabi	riel kuer		7,	/26/2022						
Civil Rights ²	PEGUAR Opportunity Department		Date							
FOR GRANTI Approved by:	NG AGENCY USE ONLY ³ □ N/A									

Date

 $^{^{\}rm 1}$ DBE Programs apply to specific federal or state grant requirements.

² The dollar figure here should match the approved Bid/Proposal recommendation or amendment preparation checklist on file with the requesting department.

³ Federal and state grant agreements may require granting agency approval of contract goals.

Inter-Departmental Communication

Date: July 26, 2022

To: Mayor Quinton Lucas Chair: Transportation, Infrastructure & Operations

Committee

From: Andrea Dorch Director Civil Rights & Equal Opportunity Department

Subject: Docket Memo # 60800054/9746

CONTRACTOR:

SheDigs It, LLC

Address:

600 SE Central,

Blue Springs, MO 64014

Contract #

60800054/9746 - Valve Straightening and Water

Distribution System Repairs

Contract Amount:

\$363,415.00

MBE Goal

11%

WBE Goal:

11%

Total MBE Achieved:

11%

Total WBE Achieved:

11%

MBE SUBCONTRACTORS:

Name:

Diggs Construction

Address:

2033 Vine St,, KCMO 64108

Scope of Work:

Watermain & Valve repairs

Dollar Amount:

\$39,975.65

Ownership: Structure:

WBE SUBCONTRACTORS:

Name:

SheDigs It, LLC

Address:

600 SE Central Drive,,

Blue Springs, MO 64014

Scope of Work:

Watermain repairs and prime contractor

Dollar Amount:

\$39,975.65

Ownership: Structure:

CONTRACTOR UTILIZATION PLAN/REQUEST FOR WAIVER

Project/Contract Number 60800054/9746

	Project Title Valve Straightening and Water Distribution System Repairs.
Vo	ALVE STRAIGHTSHING AND WATER WATER STRUCES Department Project) Department SHEDIES IT LLC (Bidder/Proposer)
CO	I, CHRYL GERSTAISE, of lawful age and upon my oath state as ows:
1.	This Affidavit is made for the purpose of complying with the provisions of the MBE/WBE submittal requirements on the above project and the MBE/WBE Program and is given on behalf of the Bidder/Proposer listed below. It sets out the Bidder/Proposer's plan to utilize MBE and/or WBE contractors on the project.
	The project goals are
	BIDDER/PROPOSER PARTICIPATION: // % MBE // * WBE
(The following are the M/WBE subcontractors whose utilization Bidder/Proposer warrants will meet or exceed the above-listed Bidder/Proposer Participation. Bidder/Proposer warrants that it will utilize the M/WBE subcontractors to provide the goods/services described in the applicable Letter(s) of Intent to Subcontract, copies of which shall collectively be deemed incorporated herein). (All firms must currently be certified by Kansas City, Missouri)
	a. Name of M/WBE Firm SHEDIBS IT LLC Address 600 SE CINTRIL DRIVE, BLUZ SARIBS Mo 64018 Telephone No. 816-295-1100 I.R.S. No. 45-5420688

b.	Name of M/WBE Firm DIGGS CONSTRUCTION! Address 2033 VINE ST. KCMO 64 108
	Address 2033 Val6 ST. KCMO 64 108 Telephone No. 816 - 944 - 6450 I.R.S. No. 48 - 1210627
c.	Name of M/WBE Firm
	I.R.S. NO.
d.	Name of M/WBE FirmAddressTelephone NoI.R.S. No
e.	Name of M/WBE FirmAddressTelephone NoI.R.S. No
f.	Name of M/WBE FirmAddressTelephone NoI.R.S. No.
4. The follo	al M/WBEs, if any, on additional page and attach to this form) owing is a breakdown of the percentage of the total contract amount that oposer agrees to pay to each listed M/WBE:
	MBE/WBE BREAKDOWN SHEET
MBE FIRMS Name of MB	Subcontract Weighted % of Total

TOTAL MBE \$ / TOTAL	MBE %:	\$ 40,000		%
WBE FIRMS: Name of WBE Firm	Supplier/Broker/Contractor	Subcontract Amount*	Weighted Value**	% of Total Contract
SHE DIGS IT	CONTENCTOR	40,000 +	40,000 T	
				1
TOTAL WBE \$ / TOTAL	WBE %:	\$ 40,000 +	<u> </u>	<u></u>

5. Bidder/Proposer acknowledges that the monetary amount to be paid each listed M/WBE for their work, and which is approved herein, is an amount corresponding to the percentage of the total contract amount allocable to each listed M/WBE as calculated in the MBE/WBE Breakdown Sheet. Bidder/Proposer further acknowledges that this amount may be higher than the subcontract amount listed therein as change orders and/or amendments changing the total contract amount may correspondingly increase the amount of compensation due an M/WBE for purposes of meeting or exceeding the Bidder/Proposer participation

^{*&}quot;Subcontract Amount" refers to the dollar amount that Bidder/Proposer has agreed to pay each M/WBE subcontractor as of the date of contracting and is indicated here solely for the purpose of calculating the percentage that this sum represents in proportion to the total contract amount. Any contract amendments and/or change orders changing the total contract amount may alter the amount due an M/WBE under their subcontract for purposes of meeting or exceeding the Bidder/Proposer participation.

^{**&}quot;Weighted Value" means the portion of the subcontract amount that will be credited towards meeting the Bidder/Proposer participation. See HRD Forms and Instructions for allowable credit and special instructions for suppliers.

- 6. Bidder/Proposer acknowledges that it is responsible for considering the effect that any change orders and/or amendments changing the total contract amount may have on its ability to meet or exceed the Bidder/Proposer participation. Bidder/Proposer further acknowledges that it is responsible for submitting a Request for Modification or Substitution if it will be unable to meet or exceed the Bidder/Proposer participation set forth herein.
- 7. If Bidder/Proposer has not achieved both the M/WBE goal(s) set for this Project, Bidder/Proposer hereby requests a waiver of the MBE and/or WBE goal(s) that Bidder/Proposer has failed to achieve
- 8. Bidder/Proposer will present documentation of its good faith efforts, a narrative summary detailing its efforts and the reasons its efforts were unsuccessful when requested by the City.
- 9. I hereby certify that I am authorized to make this Affidavit on behalf of the Bidder/Proposer named below and who shall abide by the terms set forth herein:

Bidder/Proposer primary contact: SHEDI6S IT LL C
Address: 600 SE CANTRAL DR
BLUE SPRINGS MO 64014
Phone Number: 816 - 295 - 1100
Facsimile number: 816 - 295 - 1627
E-mail Address: C63RSTALK DSHEDIGSIT. Com
By: Title: Opposite Manager Date: 9/14/2022 (Attach corporate seal if applicable)
Subscribed and sworn to before me this 14th day of Quly, 2022.
My Commission Expires: 3/29/26 Notary Public
MICHELE R BLÈDSOE Notary Public, Notary Seal State of Missouri Jackson County Commission # 14956576 My Commission Expires 03-29-2026

LETTER OF INTENT TO SUBCONTRACT

VALVE STRAIGHTSNING AND
Project Name/Title W ATER DISTRIBUTION SYSTEM REPAIRS

Updated LOI	0140

Check one:

Project Location/Number 6080054/9746

PAF	RT I: P	rime Contractor	HEDIGS S	IT LC	C	agre	es to enter int	to a contractual	
agree goods	ment with some states with the services	th M/W/DBE/Sections in connection with ad Categorizations (n 3 Subcontracto the above-refere	r. <u>Ø1665</u> nce contract:	Cods : [Insert	a brief narrativ	ho will provide describing	de the following goods/services to	be
Subco	ontractor	is certified are insuf	ficient and may	result in deni	ial of thi	s Letter of Inte	ent to Subcont	tract.]	
							2F = 0		
for an	estimate	ed amount of \$ 40,	000	(or //	_% of t	he total estima	ted contract v	alue.)	
M/WI	BE Vend		abcontractor/mar applier (counts as antractor for supproker (counts as antractor for supp	s 60% of the blies or goods 10% of the to	total do s toward otal dolla	llar amount pa Is goals) ar amount paid	id or to be pai	id by a prime	
Kansa utilize	s City's l M/W/D	ction 3 Subcontracto Human Relations De BE Subcontractor in ed contract in the ca	partment to perfe the capacities in	orm in the ca dicated here	pacities in, and N	indicated here M/W/DBE Sub	in. Prime Cor	ntractor agrees to rees to work on t	he
as need	ded for n	nis section is to be conore than one intend er remedies availal	ed sub-tier contra	act. IMPOR	ubcontra TANT:	actor listed abo	ve. Please atta of this docum	ach additional sh	eets n
Select	one:	The M/W/DBE scope of work(s)	Subcontractor lis Continue to Pa	ted above <u>IS</u> art 3.)	S NOT s	ubcontracting	any portions o	of the above-state	ed
		The M/W/DBE of work(s) to:	Subcontractor lis	ted above <u>IS</u>	subcon	tracting certain	n portions of t	he above stated s	scope
1)	Compar	ny name:							
	Full add	lress:							
		Street number contact:	er and name			City, State and Z	ip Code		
		Name				Phone			
	a) This	subcontractor is (cir	The second secon		DBE	N/A			
		i: If this subcontract of Intent must be at	tor is an M/W/D tached to this do	BE certified cument.	with the	City of Kansa	s City, Misso	uri, a separate Le	etter
		ii. If this subcontractirm must still be lis	etor is NOT a cer sted for reporting	tified M/W/I purposes bu	DBE cer it a Lette	tified with the er of Intent is n	City of Kansa ot required.	as City, Missouri	, the
	b)	Scope of work to be	performed:				<u> </u>		
	c)	The dollar value of	this agreement is	:					

PART 3:

NOTE: SIGNATURES AND NOTARIZATIONS REQUIRED FOR NEW LETTERS OF INTENT (LOI); SIGNATURES ONLY FOR UPDATED LOI (ADDING VALUE TO EXISTING CONTRACT).

PRIME CON	TRACTOR BUSINESS NAME: SHI	E0165 =	IT LLC	
Signature: Prin	ne Contractor	CHARLY Print Name	(GHESTNER	
OPSCAT	THE MANAGER	7/12/ Date	2022	
State of	mo)			
County of I, and b		at the above and	d foregoing is based on my best knowledge	
	Subscribed and sworn to before me, a neday of July , 2022		this /2TL	
STAMP:	My Commission Expires: 3/29/3	26	Notar Public MICHELE R BLEDSOE Notary Public, Notary Seal State of Missouri Jackson County Commission # 14956576 My Commission Expires 03-29-2026	
Dals Signature: Prim		Dale G Print Name		
Preside Title	ent	7/13/202 Date		
State of Ka	nsas City, MO 64108			
County of I,and be	Sedgwick) Porelia Diggs , state that state that	nt the above and	foregoing is based on my best knowledge	
	Subscribed and sworn to before me, a no day of July , 2022	tary public, on t	this 13th	
STAMP:		v 15, 2024	Corslia Diggs Notary Public	
00450.01 HRD Le	etter of Intent to Subcontract 08162020		Page 2 of	2

LETTER OF INTENT TO SUBCONTRACT
VALVE STRAIGHTSMING AND
Project Name/Title W ATSR DISTRIBUTION SYSTEM REPAIRS

Project Location/Number 60800054 / 9746

Ch	eck one:
Ori	ginal LOI:
Up	dated LOI:

	lba .				W3T/			
PAF	RT I:	Prime Contractor_	SHEDI6S	IT L	cc		_ agrees to enter into a o	contractual
agree	ment wi	th M/W/DBE/Sec	ction 3 Subcontrac	tor SHED	165 I	TL	who will provide the	ne following
							arrative describing good	
							ng of NAICS Codes in v	
							of Intent to Subcontract	.]
	ATU	email i	RAPAIRS	AND	PRI	HE	CONTEACTER	
for an	estimat	ed amount of \$_	k an	(or //	'	he total e	estimated contract value	e.)
M/WI	BE Vend	dor type:	Subcontractor/m	anufacturer (counts as	100% of	f contract value towards	goals)
							unt paid or to be paid by	(
			contractor for su	pplies or goo	ds toward	s goals)		•
		. 🗆	Broker (counts a	is 10% of the	total dolla	ar amour	nt paid or to be paid by a	a prime
		,	contractor for su	pplies or goo	ds towards	s goals)		
Kansa utilize	s City's M/W/I	Human Relations OBE Subcontracto	s Department to pe or in the capacities	erform in the indicated he	capacities rein, and N	indicate M/W/DB	lge, currently certified vertified vertified vertified by the defendent of the Contractor agrees and of the contract to President of	ctor agrees to to work on the
PAR	Т 2: т	This section is to b	ne completed by th	e M/W/DRE	subcontra	ector list	ed above. Please attach	additional shoots
as nee	ded for	more than one int	ended sub-tier cor	ntract IMPO	RTANT.	Falsific	ation of this document	will result in
			ailable under City		K171111.	1 aisiic	ation of this document	will result in
Select			•		IC NOT	1		1 1
SCICCI	one.	scope of wor	rk(s). (Continue to	Part 3.)	<u>15 NOT</u> s	ubcontra	acting any portions of the	ie above-stated
					-~ .	20 NW		
	ļ	of work(s) to		listed above	IS subcon	tracting	certain portions of the a	above stated scope
		The desired of the control of the co	<i>5</i> .					
(1)	Compa	any name:						
	D-11 - 3	1.1						
	Full ad	p=1.0x012x0x0000001001	number and name			City Sta	te and Zip Code	
	Primar		and that is			City, Sta	te and Zip Code	
		Name				Phone		
	a) Thi	s subcontractor is	(circle one):	MBE WBE	DBE	N/A		
		i: If this subcor of Intent must b	ntractor is an M/W oe attached to this	/DBE certific document.	ed with the	e City of	Kansas City, Missouri,	a separate Letter
							ith the City of Kansas Cent is not required.	City, Missouri, the
	b)	Scope of work	to be performed: _					
	c)							
								and the second s

PART 3:

NOTE: SIGNATURES AND NOTARIZATIONS REQUIRED FOR NEW LETTERS OF INTENT (LOI); <u>SIGNATURES ONLY</u> FOR UPDATED LOI (ADDING VALUE TO EXISTING CONTRACT).

PRIME CONT	TRACTOR BUSINESS NAME: SHO	EDIGS I	TLLC
		CHARVI	COZZ
Signature: Prim	4.4	Print Name	
OFZRATIN	6 MANAGER	7/14/2	2027_
Title		Date	
State of	MO)		
County of	MO GICKSON CHIRL GICSTNIC, state the		
ī. <i>(</i>	Hall (Superise state to	hat the above an	d foregoing is based on my best knowledge
and be	plief.	nat the above and	d foregoing is based on my best knowledge
	Subscribed and sworn to before me, a r day of , 20,22	notary public, on	this 14th
	My Commission Expires: 3/29/2	4	Mudden
STAMP:	MICHELE R BLEDSON Notary Public, Notary S State of Missouri Jackson County Commission # 149565	76	Notary Public
16.5	Commission # 149503. My Commission Expires 03-2	29-2026	
MWDBE SUB	CONTRACTOR BUSINESS NAME:	SHE DIGS	IT LLC
		CHERIL	GLESTNSR
Signature: Subco	4	Print Name	
OPERATIN	NO MANAGER	7/14/2	022
OPKA TIM Title		Date	
State of	$m \omega$		
County of	gockson)		
	sky (subsined , state th	nat the above and	I foregoing is based on my best knowledge
	Subscribed and sworn to before me, a n day of July , 2022	otary public, on	
	My Commission Expires: 3/29/2		more
STAMP:	MICHELE R E Notary Public, I State of M Jackson C Commission # My Commission Exp	BLEDSOE Notary Seal Issouri ounty 14956576	Notary Public

TIMETABLE FOR MBE/WBE UTILIZATION

(This form shoul	ld be submitted to the City aj	fter contract award.)						
0 10		1	1					
I, CASCA CHARI GORSTNA (Name) of SHRDIBS IT L	, acting in my	capacity as SALATING // I	ANAB					
(Name)		(Position with Firm)						
of SARDIBS IT L	. <u>L</u> , with the sul	bmittal of this Timetable, certify	that					
(Name of Firm)	IDE III I I I O	1711						
the following timetable for MBE/W	BE utilization in the ful	If Illment of this contract is correc	t and					
true to the best of my knowledge.								
ALLOTTED TIME FOR THE COMPLETION OF THIS CONTRACT								
ALLOTTED TIME FO	(Check one only)	NOT THIS CONTRACT						
	(Check one only)							
15 days	75 days	135 days						
30 days	90 days	150 days						
45 days	105 days	165 days						
60 days	120 days	180 days						
Other 365DMY 5	(Specify)							
Throughout	Reginning	1/3						
Middle 1/3	Final 1/3							
Throughout Middle 1/3% Beginning 1/3%	Middle 1/3 2 =	% Final 1/3						
beginning 1/3	Wilddic 1/3	_/0 I I II I I / 3						
PLEASE NOTE: Any changes	in this timetable requir	re approval of the Human Rela	tions					
Department in advance of the chang	ge.	•						
If you have any questions regarding	a the completion of this	form places contact the Depart						
If you have any questions regarding of Human Relations at: (816) 513	g the completion of this	from, please contact the Departi	nent					
of Frankii Relations at. (610) 515	-1010.							
	\wedge	,						
	1	(Signature)						
		11						
	OPERA	TING MANAGAR						
	975-27 %	(Position with Firm)						
	2/	1						
		/ 2027						
	/ /	(Date)						

City of Kansas City, Missouri **Human Relations Department**

Construction Contractor Employee Identification Report

Company Name:	Shedigs It, LLC	Prime's Name: Shedigs It, LLC					
Company Address Company City, Sta	The state of the s	KCMO Project Name: Valve Straightening and Water Distribution Repairs KCMO Project Number: 60800054 / 9746					
Name of Person Co Phone Number:	mpleting Report: Michele Bledsoe 816-295-1100	Today's Date: 7/6/2022					
Email:	michele@shedigsit.com	City Department: Water Services Department					

Instructions:

- Each applicable Prime Contractors must complete this form for its company within 48 hours of bid opening
- The Human Relations Department strongly recommends usage of the electronic version of this form. This form may be obtained by visiting www.kcmo.gov website. The website is enabled with a "search" function on the Home page in the center titled "What are you looking for?". Type in the "What are you looking for?" field Contract Central. Click on the link to Standard City Contract Forms. Scroll down to Construction Contractor Employee Identification Report and click the link to open this document. Complete the fields in the Employee section; the Official Use Only section will automatically populate. NOTE: This form can be printed and attached to other required Bid documents.
- All subcontractors shall be required to complete this form and submit to the Prime Contractor. For each subcontractor, the Prime must submit this form to City at least at least (10) days prior to the date the subcontractor shall commence work under a city construction contract.
- Complete this form if you are the Prime contractor on a City construction project estimated over \$300,000 & over 800 man hours. 4)
- Complete this form with data from your current construction workforce (no office personnel). 5)
- Prime contractor is responsible to ensure subcontractor completes this form as required in #3 above.

Females		MO sklent	Males		KCMO Resident						***************************************
African American	U	0	African American	,		-	Journeyman	Apprentice		Journeyman	Apprentice
Astem Pacific Islander American	0	0	Asian Pacific Islander American		,	Foreman Supervisor	1	-	Operating Engineer	21	0
Caucasian American	- 3	0	Caucasian American	0	U	Asbestos Worker	0	0	Painter	0	0
Hispanic Latino American	0	0		38	3	Boilermaker	0	0	Pipe Fitter Plumber	7	2
Vative American	0	0	Hispanic Latino American	7	2	Bricklayer	0	Ð	Plasterer	a	O
Other	0	U	Native American	0	0	Carpenter	0	0	Roofer	0	0
uner			Other	0	0	Cement Mason	1	0	Sheet Metal	0	0
	3	0		47	6	Electrician	0	0	Sprinkler Fitter	a	0
						Elevator Constructor	o	0	Truck Driver	a	a
			Number of KCMO Resident			Glazier	0	0	Welder	a	0
			Number of Journeyman			Iron Worker	0	0	Other	;	•
			Number of Apprentice		_	Lahorer	1+	0		3/	,
							16	0		27.5	2. * 7

paras.	Company Name:	Shedigs It, LLC	F	CCMO Project Nam	e: Valve Straighte	ning and Water	с к	CMO Projec	t Number	60800054 / 9746
	Name Last First			T	T		T	7	T TVUITOCI.	0000003479740
			Job Title (use drop down menu)	Address	City	State	Zip Code	KCMO Resident	Gender	Ethnicity
1	Rodriguez	Richard	Foreman/Supervisor	3331 Kessler Drive #3	340 Lee's Summit	мо	64081	No	Male	Hispanic/Latino_Ame
2	Westerhold	Carter	Laborer_(Journeyman)	413 E Chestnut	Odessa	мо	64076	No	Male	Caucasian American
3	Wright	Anthony	Laborer_(Journeyman)	5030 Longview Road	Kansas City	мо	64137	Yes	Male	African American
4	Chrisman	Floyd	Operating_Engineer_(Journeyman)	13360 Saline Hwy 127	Sweet Springs	мо	65351	No	Male	Caucasian_American
5	Dowell	Tylere	Operating_Engineer_(Journeyman)	111 Sunset Drive	Slater	мо			Tetropetro	Caucasian American
6	Ferry	Glen	Operating_Engineer_(Journeyman)	417 Miller Ave	Liberty					
7	Groceman	Darren	Operating_Engineer_(Journeyman)	1629 Woodland Rd	Bates City					Caucasian_American
8	Huff	Rebecca	Operating_Engineer_(Jour neyman)	23444 Ashwood Ave.	Coffey					Caucasian American Caucasian
9	Meadows	Matthew	Operating_Engineer_(Jour neyman)	PO Box 152	Cameron					_American Caucasian
0	Miller	Travis	Operating_Engineer_(Jour neyman)	3710 N Bales Ave	Kansas City					_American Caucasian
1	PIttman	William	Operating_Engineer_(Jour neyman)	5549 NW Moonlight Me						_American Caucasian
2	White	Clark	Operating_Engineer_(Journeyman	1706 NW 1000	Bates City				Male	American
1	VanHorn	Dustin	Operating_Engineer_(Journeyman	606 Elm St	Lathrop				T	Caucasian_American
1	Williams	Alexa nder	Pipe_Fitter/Plumber_(Jour	202 Sandpiper St.	Raymore				C	Caucasian American Caucasian
ŀ	Hurley	Dougl as	Pipe_Fitter/Plumber_(Jour neyman)		Olathe				C	American Caucasian
F	Rimel	Jay	Pipe_Fitter/Plumber_(Jour neyman)	3412 Bryn Mawr Dr	Independence				C	American Caucasian American

Shedigs It, LLC KCMO Project Name: Valve Straightening and Water E

KCMO Project Number: 60800054 / 9746

	Γ	Name		Job Title			ame: valve Straight		Zin	Transaction of	-	r: 60800054 / 9746
	L	Last	First	Job Title (use drop dos		Address	City	Sta	te Code		(and	er Ethnicity
	17	Tracy	Shaw	Pipe_Fitter/Plumber_(Jo neyman)	ur	1207 NW 72nd Ter	Kansas City	мо	64118	Yes	Male	Caucasian American
	18	Brown	Brian	Other		805 Bobwhite Drive	e Peculiar	МО	64078	No	Male	Caucasian American
	19	Roy	Josep h	Other		11250 Glenwood S	t Overland Park	KS	66211	No	Male	Caucasian American
	20	Johnson	Linda	Other		825 SW 33rd Stree	t Lee's Summit	мо	64082	No	Female	Caucasian
	21	Gerstner	Cody	Laborer_(Journeyman)		4412 SW Tanzanite		мо	64082	No		_American Caucasian
	22	Rabourn	Jakob	Laborer (Journeyman)		1105 SW Persels R		мо			Male	_American Caucasian
	23	Shippy	Drew	Laborer_(Journeyman)		981 Venita Dr.	Odessa		64081	No	Male	_American Caucasian
:	24	Peck	Brand on	Laborer_(Journeyman)		213 NW Shagbark S		MO	64076	No	Male	_American Caucasian
2	25	Clancy	Steph en	Operating_Engineer_(Journeyman)	r		No. 10	MO	64064	No	Male	_American Caucasian
2	26 0	Contreras	Bryan	Laborer (Journeyman)		6142 M Hwy	Odessa	mo	64076	No	Male	_American atino_Ame
		Contreras Olmedo	Jose			101 NW Walnut	Lee's Summit	mo	64063	No	Male	rican atino_Ame
		contreras		Laborer_(Journeyman)		1434 Colorado Ave	Kansas City	MO	64127	Yes	Male	rican atino_Ame
	1		Juan Josep	Laborer_(Journeyman) Operating_Engineer_(Jour		205 NE Eastridge St	Lee's Summit	MO	64063	No	Male	rican Caucasian
		Criscione	h Arma	neyman) Cement_Mason_(Journeym	1	4025 N Jackson Terr	Kansas City	MO	64117	Yes	Male	_American
		Cruz Leon	ndo	an) Operating_Engineer_(Journ	neyman	3210 N McCoy	Independence	МО	64050	No		atino_Ame rican
	T	Deweese	Kyle	Operating_Engineer_(Journ		23105 S Clevelar	nd Peculiar	МО	64078	No	Male	Caucasian_American
32	2 D	Oowell	Tylere)		111 Sunset Drive	Slater	МО	65349	No	Male	Caucasian_American
33	3 E	asley	Tylere	Pipe_Fitter/Plumber_(Appro Operating_Engineer_(Journ	entice)	13790 Moonlight	ROlathe	KS	66061	No	Male	African_American
34	D	eweese	Kyle) Operating Engineer (Journ		23105 S Clevelan	d Peculiar	МО	64078	No	Male	Caucasian_American
35	D	owell	Tylere	Operating_Engineer_(Journ		111 Sunset Drive	Slater	МО	65349	No 1	Male (Caucasian_American
36	W	ratt	Trevor)		44074 E 112th	Richmond	МО	64085	No 1	Male (Caucasian American
37	Fr	ump	Donald	Laborer_(Journeyman)		224 NW 1781 Rd	Kingsville	МО	64061	No N	Male (Caucasian_American
38	Sa	nders	Grant	Pipe_Fitter/Plumber_(Journal)	eyman	4001 E 185th	Belton	мо	64012	No N		Caucasian_American
39	Ma	athes	Scott	Operating_Engineer_(Jour neyman)		36910 E 355	Garden City	mo	64747	No N	C	Caucasian American
40	Clı	ubine	Paul	Operating_Engineer_(Jour neyman)		4615 NE 42nd St	Kansas City	МО	64117	es N	a	tino_Ame
41	Сп	uz Leon	Javier	Laborer_(Journeyman)	3	3210 N McCoy St	Independence	МО	64050 N		H	lispanic/Latino_Amer
42	Но	llister	Christopher	Laborer_(Journeyman)	9	905 SW 19th St Ap	Blue Springs	МО	64015 N			aucasian American
43	Pal	mer j	Mark	Pipe_Fitter/Plumber_(Jour neyman)	2	1606 Raffurty Rd	Pleasant Hill	МО			C	aucasian American
44	Rer	nynolds I	Russell	Operating_Engineer_(Jour neyman)	4	02 N Main	Cameron				C	aucasian American
15 5	San	iders I	Brandon	Pipe_Fitter/Plumber_(Jour neyman)	8.	358 Carter St	Overland Park				C	aucasian
16 5	Smi	ith 1	Tylere	Operating_Engineer_(Journey)	/man		Lee's Summit		64086 N			American
	Γwi	itty	Rachel	Pipe_Fitter/Plumber_(Appren			Gladstone					aucasian_American
8 1	Wei	isenborn J		Laborer_(Journeyman)		09 NE Bristol Dr			64118 N			aucasian_American
9 P	ort	tell K	Ceith	Laborer (Journeyman)			Wellington		54086 N			ucasian_American
0 S	Smi			Operating_Engineer_(Journey)	man H	owar			54097 N			ucasian_American
1					d	Ku	Lee's Summit	MO (54086 N) Ma	ale Ca	ucasian_American
		629										



AFFIDAVIT OF TRAINING PROGRAM

This form must be submitted with 48 hours of Bid Opening

Bidder ____

4)	
KANSAS CITY	Project/Contract Number 60800054/9746
MISSOURI	Project Title Valve Straightening and Water Distribution System Repairs.
	suitable by the management of the suitable by
STATE OF MISSOURI	Y.
STATE OF WIISSOUM)) ss:
COUNTY OF Jackson	
After being duly sworn the per	son whose name and signature appears below hereby states under penalty of perjury that:
 I am the duly authorize Bidder. 	ed officer of the business indicated above ("Bidder") and I make this affidavit on behalf of
Diago.	presently participates in a training program that facilitates entry into the construction
industry and which	n may include an on-the-job or in-house training program, further described as follows:
• • •	the state of the house training program, further described as follows:
- Of the	entoes Local 101
LAB	orres local 663
Plux	MB-RS local &
22	1000
- Mas	ions local 518
	(attach additional 'C
	(attach additional pages, if necessary)
3. If requested by the City	Bidder agrees to provide City further documentation of, or other information about, this
automatically render	at failure to submit this form to the City within 48 hours of the Bid Opening will rits bid non-responsive.
I am authorized to make this Aff	idavit on behalf of the Bidder named below as:
ODSPARALL MALL	
OPERATURIC MANAS	4 of SARDIGS IT LLC
(11110)	(Name of Bidder)
-//	Ω .
Dated: 7/12/20	27 By: (1)
/ /	(Affiant)

Subscribed and sworn to before me this 10^{11} day of 20^{11} , 20^{11} , 20^{11} Notary

AFFIRMATIVE ACTION PROGRAM AFFIDAVIT

(required for any contractor with 50 or more employees and a contract with the City of Kansas City, Missouri, in excess of \$300,000.00)

STATE OF)	
COUNTY OF <u>Jackson</u>) ss	
On this 12TH day of Joly	, 20 <mark>22</mark> , before me appeared
CHURY (GARSTHER	, personally known by me or otherwise
proven to be the person whose name is subscribed of	on this affidavit and who, being duly sworn.
stated as follows:	, , , , , , , , , , , , , , , , , , , ,

I am of sound mind, capable of making this affidavit, and personally swear or affirm that the statements made herein are truthful to the best of my knowledge. I am the CHANGE (title) of SHEP165 J. LCC (business entity) and I am duly authorized, directed or empowered to act with full authority on behalf of the business entity in making this affidavit.

I hereby swear or affirm that [enter business entity name] has an affirmative action program (the "Program") in place and will maintain the Program for the duration of its contract with the City of Kansas City, Missouri ("City") as required by Chapter 3 of the City's Code of Ordinances.

I hereby additionally swear or affirm that attached hereto is a true copy of the Program.

I hereby additionally swear or affirm that the business entity shall not discriminate against any employee or applicant for employment because of race, color, sex, religion, national origin or ancestry, disability, sexual orientation, gender identity or age in a manner prohibited by Chapter 3 of the City's Code of Ordinances.

I acknowledge that I am signing this affidavit as the free act and deed of the business entity and that I am not doing so under duress.

Affiant's signature

Subscribed and sworn to before me this ________

, 20-2

Notary Public

My Commission expires: 3/21/26

MICHELE R BLÈDSOE Notary Public, Notary Seal State of Missouri Jackson County Commission # 14956576 My Commission Expires 03-29-2026



Pre Contract Bidder's Certification

Project/Contract Number 60800054/9746

Project Title Valve Straightening and Water Distribution System Repairs.

STATE OF MO
STATE OF (170)
STATE OF)) SS COUNTY OF Gickson)
Before me, the undersigned authority, personally appeared, who, being by me duly sworn deposed as follows:
I am authorized to make this affidavit on behalf of the named Bidder. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:
A. Bidder is current on payment of its Federal and State Income tax withholding and unemployment insurance payments, either in Missouri for companies doing business in Missouri, or in the state in which Bidder has its principal office; and
B. Bidder declares one of the following, regarding all work performed two (2) years immediately preceding the date of the Bid (check one):
☐ Contract by contract listing of all of Bidder's written notices of violations of any Federal or State prevailing wage statute in which prevailing wage penalties were assessed against the Bidder or paid by the Bidder (Complete and attach additional sheets if necessary):
1
2
3.
There have been no written notices of violations of any Federal or State prevailing wage statute in which prevailing wage penalties were assessed against the Bidder or paid by the Bidder.
C. Bidder is currently in good standing with the Missouri Secretary of State or Bidder has filed a Registration of Fictitious Name with the Missouri Secretary of State.
S460.65 IT LLC (Date) 7/14/22
Signature of Person Making This Affidavit
In witness whereof, I have hereunto subscribed my name and affixed my official seal this day

00490 Pre-Contract Bidder's Certification 100101

, 2022-

of 2 MICHELE R BLÈDSOE
Notary Public, Notary Seal
State of Missouri
Jackson County
Commission # 14956576
My Commission Expires 03-29-2026

Contract Central

I hereby swear or affirm that the business entity does not knowingly employ any person in connection with the contracted services who does not have the legal right or authorization under federal law to work in the United States as defined in 8 U.S.C. § 1324a(h)(3).

I hereby additionally swear or affirm that the business entity is enrolled in an electronic verification of work program operated by the United States Department of Homeland Security (E-Verify) or an equivalent federal work authorization program operated by the United States Department of Homeland Security to verify information of newly hired employees, under the Immigration Reform and Control Act of 1986, and that the business entity will participate in said program with respect to any person hired by the business entity to perform any work in connection with the contracted services. I have attached hereto documentation sufficient to establish the business entity's enrollment and participation in the required electronic verification of work program.

I am aware and recognize that unless certain contractual requirements are satisfied and affidavits obtained as provided in Section 285.530, RSMo, the business entity may face liability for violations committed by its subcontractors, notwithstanding the fact that the business entity may itself be compliant.

I acknowledge that I am signing this affidavit as the free act and deed of the business entity and that I am not doing so under duress.

Subscribed and sworn to before me this 12th day of 2019, 2022.

My Commission expires: 3/21/24

MICHELE R BLEDSOE
Notary Public, Notary Seal
State of Missouri
Jackson County
Commission # 14956576
My Commission Expires 03-29-2026