### CONTRACTOR UTILIZATION PLAN/REQUEST FOR WAIVER

Project/Contract No. <u>80002334/9658</u>	
Project Title <u>WMR E. Truman Rd. to E. 24<sup>th</sup> St. Troo</u>	ost Ave. to Wabash Ave.
_2022 Water Main Replacement	Water Services Department
(Department Project)	Department
McClure Engineering Co. Design Professional	
(Bidder/Proposer)	
STATE OF <u>Missouri</u> )	
OUNTY OF <u>Clay</u> ) ss	
I, <u>Mark Griffin</u> , of follows:	of lawful age and upon my oath state as
1. This Affidavit is made for the purpose of comply submittal requirements on the above project and behalf of the Bidder/Proposer listed below. It se MBE and/or WBE contractors on the project.	the MBE/WBE Program and is given on
<ol> <li>The project goals are 11 % MBE and 7 % W utilize a minimum of the following percentages project:</li> </ol>	
BIDDER/PROPOSER PARTICIPATION:	<u>11_% MBE</u> <u>7_% WBE</u>
3. The following are the M/WBE subcontractors we will meet or exceed the above-listed Bidder/warrants that it will utilize the M/WBE subcontractors we will meet or exceed the above-listed Bidder/warrants that it will utilize the M/WBE subcontractors in the applicable Letter(s) of Interest collectively be deemed incorporated herein). (Kansas City, Missouri)	Proposer Participation. Bidder/Proposer contractors to provide the goods/services to Subcontract, copies of which shall
a. Name of M/WBE Firm <u>EAE - Enviror</u> Address <u>19211 West 64<sup>th</sup> Terrace - S</u> Telephone No. <u>913-599-4326</u> I.R.S. No. <u>43-1806626</u>	

b.	Name of M/WBE Firm Hg Consultants			
	Address 7733 North Wallace Ave., Ka	nsas City, Misso	uri 64158	
	Telephone No. <u>816-895-9133</u>		-	
	I.R.S. No. <u>27-1675196</u>			
c.	Name of M/WBE Firm			
<b>.</b>	Address			<del></del>
	Address Telephone No	- · · · · · · · · · · · · · · · · · · ·		
	I.R.S. No.			
đ.	Name of M/WBE Firm			
	Address		1. 8.164	
	Telephone No.			
	I.R.S. No.			
e.	Name of M/WBE Firm			
	Address	***************************************	****	
	relephone No.			
	I.R.S. No.			
f.	Name of M/WBE Firm			
	Addiess			
	I.R.S. No.			
(List additio	nal M/WBEs, if any, on additional page and a	attach to this for	m)	
4 The foll	owing is a breakdown of the percentag	e of the total	contract a	mount that
	roposer agrees to pay to each listed M/WBE:		contract a	mount mat
	MBE/WBE BREAKDOW	N SHRET		
		T DILL		
MBE FIRM	<u>[S</u> :			
27 62 6		Subcontract	Weighted	% of Total
Name of MI Hg Consulta	T. T	Amount*	Value**	Contract
ng Consulta	nus	\$43,000		11

TOTAL MBE \$ / TOTAL	L MBE %:	\$ <u>43,000.00</u>	11_	
WBE FIRMS: Name of WBE Firm	Supplier/Broker/Contractor	Subcontract Amount*	Weighted Value**	% of Total Contract
EAE		\$28,077		7.0
TOTAL WBE \$ / TOTAL	. WBE %:	\$ <u>28,077</u>	_7.0	%

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

<sup>\*&</sup>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.

<sup>\*\*&</sup>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.

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

- 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: Mark Griffin
Address: 1700 Swift Street, Ste. 100
North Kansas City MO 64116
Phone Number: 816-756-0444
Facsimile number: <u>816-756-1763</u>
E-mail Address: mgriffin@mcclurevision.com
By: Mark Griffin
Title: Senior Project Manager
Date: 6-17-22
(Attach corporate seal if applicable)
( Provide a special sp
Subscribed and sworn to before me this
My Commission Expires: 10-29-23
Notary Public
KIM TOMBS Notary Public, Notary Seal State of Missouri Platte County Commission # 19478832 My Commission # 19478832

# EANSAS CITY MISSOURI

## LETTER OF INTENT TO SUBCONTRACT

Project Name/Title WMR E. Truman Rd. to E. 24th St. Troost Ave. to Wabash Ave.

Check one:	
Original LOI:	X
Updated LOI:	

Project Location/Number 80002334/9658

PAF	RT I:	Prime Contracto	r_ McClure Engi	neering		parage to entar into a contractual
agree	ment w	ith M/W/DRE/S	Section 3 Subcontractor	Hq Consult	.Inc.	agrees to enter into a contractual  who will provide the following
goods	s/service	es in connection	with the above-referer	ice contract: [Incar	t a brief no	rrative describing goods/services to be
provid	ded Bro	oad Categorizati	ons (e.g. "electrical"	'nlumbing " etc.) c	r the listing	g of NAICS Codes in which M/W/DBE
Subco	ontracto	r is certified are	insufficient and may r	plumbing, etc.) c	or the fishing	f Intent to Subcontract.]
Prot	fecci	onal engin	neering gervice		ilis Letter o	Intent to Subcontract.
CAD	base	sheet dra	wings 30% Degi	on in Civil	icement	water main design, provid A/QC, for KC Water 2022
wate	er ma	in replace	ement subcontra	act under Mc	Clure I	Engineering
						stimated contract value.)
		dor type: X	Subcontractor/man Supplier (counts as contractor for supp	ufacturer (counts a 60% of the total d lies or goods towar 0% of the total do	is 100% of ollar amou rds goals) llar amount	contract value towards goals) nt paid or to be paid by a prime paid or to be paid by a prime
Kansa utilize	s City's M/W/I	Human Relation DBE Subcontrac	ns Department to perfo etor in the capacities ind	rm in the capacitie dicated herein, and	es indicated M/W/DBI	ge, currently certified with the City of herein. Prime Contractor agrees to E Subcontractor agrees to work on the rd of the contract to Prime Contractor.
as nee	ded for	more than one in	be completed by the Montended sub-tier contravailable under City C	ct. IMPORTANT	ractor lister: <b>Falsifica</b>	d above. Please attach additional sheets tion of this document will result in
Select	one:	X The M/W/I scope of we	DBE Subcontractor list ork(s). (Continue to Pa	rt 3.)	subcontrac	eting any portions of the above-stated
	10	The M/W/I of work(s)	DBE Subcontractor list to:	ed above IS subco	ontracting c	ertain portions of the above stated scope
1)	Compa	nny name:				
	Full ad	ldress:				
	i un uc		t number and name		City State	and Zip Code
	Primar	y contact:			City, State	and Zip Code
		Name			Phone	
	a) Thi	s subcontractor i	is (circle one): MB	E WBE DBE	N/A	
		i: If this subco of Intent must	ontractor is an M/W/DE be attached to this doc	BE certified with the sument.	ne City of I	Kansas City, Missouri, a separate Letter
		ii. If this subco	ontractor is NOT a cert be listed for reporting	ified M/W/DBE co purposes but a Let	ertified wit tter of Inter	h the City of Kansas City, Missouri, the nt is not required.
	b)	Scope of work	to be performed:			
	c)	The dollar value	ue of this agreement is:			

### 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 CONTRACTOR BUSINESS NAME: McC	Clure Engineering
Mark Profin	Mark Griffin
Signature: Prime Contractor	Print Name
Sen. Project Manager	June 17, 2022
Title	Date
A Cenus	
State of Missouri	
County of Clay	
I, Kim Tombs, state and belief.	that the above and foregoing is based on my best knowledge
Subscribed and sworn to before me, a	notary public, on this
day of 1000 , 20 22	11. 11. 50
My Commission Expires: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Notary Public
KIM TOMBS Notary Public, Notary Seal State of Missouri Platte County Commission # 19478832 My Commission Expires 10-29-2023	
MWDBE SUBCONTRACTOR BUSINESS NAME:	Hg Consult, Inc.
ESA B	Earl Harrison Jr.
Signature: Prime Contractor	Print Name
President	6/16/2022
Title	Date
State of Missouri ) County of Jeckson	
County of Jackson	
I, Kenneth Blair Cray, state to	hat the above and foregoing is based on my best knowledge
Subscribed and sworn to before me, and day of 16 + , 20 27	notary public, on this
My Commission Expires: 3(5/2	Notary Public
STAMP:	rotal y 1 done
KENNETH BLAIR CRAGG  Notary Public - Notary Seal  Jackson County - State of Missouri  Commission Number 20543581  My Commission Projess Aug 5 2024	

# CITY OF FOUNTAINS HEART OF THE NATION KANSAS CITY

### LETTER OF INTENT TO SUBCONTRACT

Project Name/Title WMR E. Truman Rd. to E. 24th St. Troost Ave. to Wabash Ave.

Check one:	
Original LOI:	X
Undated LOI	

Project Location/Number \_\_80002334/9658

PAR'	T I: Pri	me Contractor McClure	Engineering	agrees to enter in	to a contractual
		M/W/DBE/Section 3 Subcor			de the following
_		in connection with the above-			the control of the co
		d Categorizations (e.g., "electron			
		s certified are insufficient and			
		engineering servi			-
		e Envision, Utility markings subconti			obtain as-builts,
			lact under McClur	е.	
for an	estimate	d amount of \$28,077	(or <u>7</u> % of t	he total estimated contract	value.)
M/WB	E Vendo	r type: X Subcontracte	or/manufacturer (counts as	100% of contract value tow	vards goals)
		Supplier (co	unts as 60% of the total do	llar amount paid or to be pa	id by a prime
		contractor for	or supplies or goods toward	ls goals)	
				ar amount paid or to be paid	l by a prime
			r supplies or goods toward		a s) a prime
			- supprise of Boods to Ward	o Bouis)	
		tion 3 Subcontractor is, to the			
		uman Relations Department			
		BE Subcontractor in the capac			
above-	reference	ed contract in the capacities in	dicated herein, contingent	upon award of the contract	to Prime Contractor.
DAD'	T 2. TI		1 M/W/DDE 1		
PAR	1 2: In	is section is to be completed b	by the M/W/DBE subcontr	actor listed above. Please at	tach additional sheets
		ore than one intended sub-tie		Falsification of this docu	ment will result in
denial	and oth	er remedies available under	City Code.		
Select	one: 17	The M/W/DBE Subcontra	ctor listed above IS NOT	subcontracting any portions	of the above-stated
	one: X	scope of work(s). (Continu	ie to Part 3.)	successfully portions	of the above stated
	_				
			ctor listed above <b>IS</b> subcor	ntracting certain portions of	the above stated scope
		of work(s) to:			
(1)	Compar	y name:			
(1)	Compar	у пате.			
	Full add				
		Street number and name		City, State and Zip Code	
	Primary	contact:			
		Name		Phone	
	a) This	subcontractor is (circle one):	MBE WBE DBE	N/A	
		i: If this subcontractor is an No of Intent must be attached to		e City of Kansas City, Miss	souri, a separate Letter
		ii tealia a t	T	arm a lata or or-	OV 15
		ii. If this subcontractor is NC firm must still be listed for re			
	b)	Scope of work to be perform	ed:		
	c)	The dollar value of this agree			

### PART 3:

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

PRIME CONTRACTOR BUSINESS NAME:MC	Clure Engineering
Male Profin	Mark Griffin
Signature: Prime Contractor	Print Name
Sen. Project Manager Title	June 17, 2022 Date
State of Missouri	
County of Clay	
I, Kim Tombo state	e that the above and foregoing is based on my best knowledge
Subscribed and sworn to before me, day of June, 20 27	a notary public, on this 17th
My Commission Expires: \\0-2	Notary Public
STAMP: KIM TOMBS	rotary rabile
State of Missouri	
Commission # 19478832 My Commission Expires 10-29-2023	
MWDBE SUBCONTRACTOR BUSINESS NAME:	
Signature: Prime Contractor	Jill R. Biesma
President	6/15/2022
Title	Date
State of Kansas )	
County of Johnson )	
I, Linda Lozano-Dickerson state and belief.	e that the above and foregoing is based on my best knowledge
Subscribed and sworn to before me, a day of 15th , 2022	a notary public, on this
My Commission Expires: 11-30	-2025 Linda Lozano - Dickersen Notary Public
STAMP:	roday i dolo
LINDA LOZANO-DICKERSON Notary Public, State of Kansas My Appointment Expires	

### **TIMETABLE FOR MBE/WBE UTILIZATION**

(This form should be submitted to the City after contract award.)

I, Mike Alexander, P.E.	, acting in m	y capacity as A	ssociate Vice P	resident	
(Name)			(Position		
Of Hg Consult, Inc. (Name of Firm)	, with the	submittal of	this Timetab	ole, certi	fy that
the following timetable for MBE	WBE utilization	in the fulfillme	ent of this contr	act is con	rect and
true to the best of my knowledge				uct 15 con	root and
3					
ALLOTTED TIME	FOR THE COM	PLETION OF	THIS CONTI	RACT	
	(Check on	e only)			
15 days	75 days		135 days		
30 days	90 days	<del></del>	150 days		
45 days	105 days		165 days		
60 days	120 days		180 days		
Other270	(Specify	y)	Ž		
Throughout <u>\$43,000</u>	B	eginning 1/3			
Middle 1/3	F:	inal 1/3			
Beginning 1/3 <u>20</u> %	Middle 1/3	<u>70</u> %	Final 1/3 _	<u>10</u>	_%
PLEASE NOTE: Any change Department in advance of the change		ole require app	proval of the H	Iuman R	elations
If you have any questions regard of Human Relations at: (816) 5		on of this form	, please contac	t the Dep	artment
	(	Da M	aly	1	
			(Signature)		
		Associat	te Vice Presid	ent	
		(Posit	tion with Firm)		
		`	6/17/22		
			(Date)		

# TIMETABLE FOR MBE/WBE UTILIZATION

(This form should be submitted to the City after contract award.)

I, Jill R. Biesma, P.E.	, acting in my c	apacity as President
(Name)		(Position with Firm)
of EAE	, with the submittal	l of this Timetable, certify that
(Name of Firm)		
the following timetable for MBI	3/WBE utilization in the fulf	illment of this contract is correct and
true to the best of my knowledge	₽.	
ALLOTTED TIME	FOR THE COMPLETION (Check one only)	N OF THIS CONTRACT
15 days	75 days	135 days
30 days	The second secon	150 days
45 days	105 days	165 days
60 days	90 days 105 days 120 days	150 days 165 days 180 days
Other 270 days	S(Specify)	
	(Specify)	
Throughout\$28,077	Beginning 1/:	3
Middle 1/3	Final 1/3	
Middle 1/3	Middle 1/3 <u>40</u> %	Final 1/3 <u>20</u> %
	es in this timetable require	e approval of the Human Relations
If you have any questions regard of Human Relations at: (816) 5	ding the completion of this to 13-1818.	form, please contact the Department
	fill	(Signature)
		(Signature)
	fre	sident.
	()	Position with Firm)
	6	/16/2022 (Date)
	-	(Date)