CONTRACTOR UTILIZATION PLAN/REQUEST FOR WAIVER



CITY OF FOUNTAINS

Project Number				
Project Title				

·\\\\	Project Title	
ANSAS ISSO	CITY U R I	
	(Department Project) Department	
	(Bidder/Proposer)	
STAT	E OF)) ss VTY OF)	
COUN	VTY OF)	
0.11	I,, of lawful age and upon my oath state as	
follow	S:	
2.	MBE/WBE submittal requirements on the above project and the MBE/WBE Program is given on behalf of the Bidder/Proposer listed below. It sets out the Bidder/Proposer plan to utilize MBE and/or WBE contractors on the project. The project target goals are	
3.	Bidder/Proposer assures that it will utilize a minimum of the following percentag MBE/WBE participation in the above project:	es of
	BIDDER/PROPOSER PARTICIPATION:% MBE% WBE	6
	POST-BID/POST-RFP ESTIMATED BUDGET: \$	
4.	The following are the M/WBE subcontractors whose utilization Bidder/Proposer warr 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/ser described in the applicable Letter(s) of Intent to Subcontract, copies of which collectively be deemed incorporated herein). (All firms must currently be certified Kansas City, Missouri)	poser vices shall
	Name of M/WBE Firm Lovelace & Associates, LLC.	
	Address 929 SE 3rd St Lees Summit MO 64063	
	Telephone No. 816-347 9997	
	IRS No. 43-1853091	

l	Name of M/W	/BE Firm	Environment	al Advi	sors and Eng	ineers, Inc	
			th Terrace Sh	awnee	KS 66218		
	Telephone No	o. 913-59	9 4326				
	I.R.S. No.	43-1806	626				
1	Name of M/W	/BE Firm					
	Address						
	Telephone No)					
	I.R.S. No						
l	Name of M/W	/BE Firm					
	I.R.S. No.						
ı	Name of M/W	/BE Firm					
	Address						
	Telephone No).					
	I.R.S. No.						
1	Name of M/W	BE Firm					
	Address						
	Telephone No)					
	I.R.S. No						
(List additio	onal M/WBEs, if o	any, on ad	lditional page	and att	ach to this for	m)	
	owing is a break Proposer agrees t		1		otal contract a	mount that	
		MBE/W	BE BREAKD	OWN	SHEET		
MBE FIRM	л с .						
WIDE FIRE	<u> </u>				Subcontract	Weighted	% of Total
Name of M	IBE Firm	Supplier	r/Broker/Contrac	tor	Amount*	Value**	Contract



TOTAL MBE \$ / TOTA	\$	\$		
WBE FIRMS: Name of WBE Firm	Supplier/Broker/Contractor	Subcontract Amount*	Weighted Value**	% of Total Contract
	_			
TOTAL WBE \$ / TOTA	AL WBE %:	\$		

*"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.

- **"Weighted Value" means the portion of the subcontract amount that will be credited towards meeting the Bidder/Proposer participation. See CREO KC Forms and Instructions for allowable credit and special instructions for suppliers.
- 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

- 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: Address:	
Phone Number:	
Facsimile number:	
E-mail Address:	
	By: Title: Vice President
	Date: February 19, 2024
	-
	(Attach corporate seal if applicable)
Subscribed and sworn to before me	
My Commission Expires: 02-13-2025	Joda M Calhour
Wiy Commission Expires.	Notary Public
	SANDRA M CALHOUN Notary Public, Notary Sea! State of Missouri St. Louis County Commission # 13448649 My Commission Expires 02-13-2025



KANSAS CITY

CITY OF FOUNTAINS

LETTER OF INTENT TO SUBCONTRACT

Project Name/Title

- 1 - 1 - 1 - 1 - 1	Check one:	
	Original LOI:	
	Updated LOI:	

	(III)							Updated LOI:	
	Ψ	Pro	oject Location/I	Number _				_	
M I S	SAS C	RI							
PAR	Т І:	Prime Contracto	r				agrees to enter into:	a contractual	
					agrees to enter into a contractualwho will provide the following				
•			·				arrative describing go	•	
_					_		ng of NAICS Codes in		
_		-	· ·	-	_		of Intent to Subcontrac		
for an	estima	ated amount of \$		(or	% (of the total	estimated contract val	ue.)	
M/WB	BE Vei	ndor type:	Subcontractor/	manufactur	er (counts	as 100% o	f contract value towar	ds goals)	
			Supplier (coun	ts as 60% o	f the total	dollar amo	ount paid or to be paid	by a prime	
			contractor for		-	_			
							nt paid or to be paid by	y a prime	
			contractor for s	supplies or g	goods tow	ards goals)			
agrees	to uti	lize M/W/DBE S above-referenced	Subcontractor in th	e capacities	indicated	herein, and	es indicated herein. Print M/W/DBE Subcontragent upon award of the	ractor agrees to	
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							ted above. Please attac		
			nnended sub-der C available under C		FUKTAN	VI: Faisiii	cation of this docume	int will result in	
				_					
Select	one:		/DBE Subcontracton vork(s). (Continue)		ove <u>IS NO</u>	$\underline{\mathbf{T}}$ subconti	racting any portions of	the above-stated	
		•			T C 1			1 1	
		of work(s)		or listed abo	ove <u>18</u> sub	contracting	g certain portions of th	e above stated scope	
(1)	Com	pany name:							
	Full	address:							
		Stre	et number and name			City, St	tate and Zip Code		
	Prim	ary contact: Name				Phone			
	a) T	his subcontractor		MBE	WBE	DBE	N/A		
			contractor is an M/st be attached to th			the City o	of Kansas City, Missou	ıri, a separate Letter	
							with the City of Kansa tent is not required.	s City, Missouri, the	
	b)	Scope of wor	rk to be performed	:					
	c)								

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 CONTI	ACTOR BUSINESS NAME: Jaco	bs Engineering Group
	I WATER	Michael McCarty
Signature: Prime	Contractor	Print Name
Vice Preside		February 19, 2024
Title		Date
State of Misso	ouri)	
County of St. I	Louis)	
I, San and bel		hat the above and foregoing is based on my best knowledge
	Subscribed and sworn to before me, a day of February 2024	
	My Commission Expires: 02-13-202	25 Joda M Calhour
STAMP:	SANDRA M CALHOUN Notary Public, Notary Seel State of Missouri St. Louis County Commission # 13448649 y Commission Expires 02-13-2025	Notary Public
MWDBE SUB Signature Subco	CONTRACTOR BUSINESS NAME: Ontractor Ses, Lent	Envivonmental Advisors and Engineers Till R. Biesma Print Name 2/19/2024 Date
State of County of Cl. and be	J.II R. Biesma, state	that the above and foregoing is based on my best knowledge
STAMP:	Subscribed and sworn to before me, a day of February 20 24 My Commission Expires: Novemb SAMANTHA FLOYD NOTARY PUBLIC - NOTARY SEAL STATE OF MISSOURI MY COMMISSION EXPIRES NOVEMBER 17, 2024 CLAY COUNTY COMMISSION #12331055	AT A

TIMETABLE FOR MBE/WBE UTILIZATION

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

I,		, acting i	in my capacity as					
(Nan	ne)	, 2	(Position with Firm)					
of	; 			of this Time	table, certif	fy that		
(Name of Fir	m)							
_		E/WBE utilization in	the fulfillmen	t of this cont	ract is corre	ect and		
true to the best of m	y knowledge	2.						
ALLOTT	ED TIME	FOR THE COMPL	ETION OF T	THIS CONT	RACT			
1122011		(Check one o			10101			
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		(Specify)						
Throughout		Begi	nning 1/3					
		Fina						
		Middle 1/3						
PLEASE NOTE: Opportunity Departr		s in this timetable rennee of the change.	equire approva	al of the Civ	il Rights &	Equal		
		ding the completion at: (816) 513-1836		please contac	t the Civil	Rights		
				ignature)				
			/ice President					
			(Position	on with Firm)			
		F	ebruary 19, 20)24				
				(Date)				



KANSAS CITY

CITY OF FOUNTAINS

LETTER OF INTENT TO SUBCONTRACT

Project Name/Title

- 1 - 1 - 1 - 1 - 1	Check one:	
	Original LOI:	
	Updated LOI:	

	(III)							Updated LOI:	
	Ψ	Pro	oject Location/I	Number _				_	
M I S	SAS C	RI							
PAR	Т І:	Prime Contracto	r				agrees to enter into:	a contractual	
					agrees to enter into a contractualwho will provide the following				
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for an	estima	ated amount of \$		(or	% (of the total	estimated contract val	ue.)	
M/WB	BE Vei	ndor type:	Subcontractor/	manufactur	er (counts	as 100% o	f contract value towar	ds goals)	
			Supplier (coun	ts as 60% o	f the total	dollar amo	ount paid or to be paid	by a prime	
			contractor for		-	_			
							nt paid or to be paid by	y a prime	
			contractor for s	supplies or g	goods tow	ards goals)			
agrees	to uti	lize M/W/DBE S above-referenced	Subcontractor in th	e capacities	indicated	herein, and	es indicated herein. Print M/W/DBE Subcontragent upon award of the	ractor agrees to	
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							ted above. Please attac		
			nnended sub-der C available under C		FUKTAN	VI: Faisiii	cation of this docume	int will result in	
				_					
Select	one:		/DBE Subcontracton vork(s). (Continue)		ove <u>IS NO</u>	$\underline{\mathbf{T}}$ subconti	racting any portions of	the above-stated	
		•			T C 1			1 1	
		of work(s)		or listed abo	ove <u>18</u> sub	contracting	g certain portions of th	e above stated scope	
(1)	Com	pany name:							
	Full	address:							
		Stre	et number and name			City, St	tate and Zip Code		
	Prim	ary contact: Name				Phone			
	a) T	his subcontractor		MBE	WBE	DBE	N/A		
			contractor is an M/st be attached to th			the City o	of Kansas City, Missou	ıri, a separate Letter	
							with the City of Kansa tent is not required.	s City, Missouri, the	
	b)	Scope of wor	rk to be performed	:					
	c)								



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: J	acobs Engineering Group
(WW	Michael McCarty
Signature: Prime Contractor	Print Name
Vice President	February 19, 2024
Title	Date
State of Missouri)	
County of St. Louis	
I, Sandra M Calhoun , and belief.	state that the above and foregoing is based on my best knowledge
Subscribed and sworn to before r day of February 20 24	me, a notary public, on this 19th
My Commission Expires: $02-13$	3-2025 Samalhour
STAMP: SANDRA M CALHOUN Notary Public, Notary Seal State of Missouri St. Louis County Commission # 13448849 My Commission Expires 02-13-2025	Notary Public
MWDBE SUBCONTRACTOR BUSINESS NAM Signature: Subcontractor	ME: AARON THOMAS Print Name 7/20/24
Title	Date
State of $Massove($) County of $Speksov($)	
-	state that the above and foregoing is based on my best knowledge
Subscribed and sworn to before reday of 30 4, 20	ne, a notary public, on this
My Commission Expires:	Notary Public
STAMP: DEBRA S. CONF Notary Public-Notar STATE OF MISSO Jackson Count My Commission Expire Commission # 228	RAD ry Seal DURI rty es 7/4/2026