# Hold Harmless See attached form Agreement. Insurance See attached form Agreement. Termination of Agreement See attached form Agreement. References: Service Providers shall furnish a minimum of four (4) references from projects similar in scope within the last two (2) years. Include phone number and email address. SERVICE PROVIDER REFERENCES

Service Provider Name: Thompson Elevator Inspection Service, Inc

	Name	Address	Contact Info
1.	Village of Arlington Heights	33 S Arlington Heights Rd Arlington Heights, IL 60005	Valerie Gerstein- 847-368-5562
2.	Village of Downers Grove	801 Burlington Ave Downers Grove, IL 60515	Alex Pellicano- 630-434-5514
3.	City of Elgin	150 Dexter Court Elgin, IL 60120	Raoul Johnston- 847-931-5947
4.	Village of Glenview	2500 E Lake Ave Glenview, IL 60026	Joe Footlik- 847-904-4321
State	e the number of years in this	business 42	
	e the number of current portion of the number of current portion of the number of current portion of the number of	ersonnel on staff trained in the staff trained in t	the provision of inspections

<sup>\*\*</sup>PLEASE SEE SECTION 5 FOR COMPLETE LIST OF REFERENCES

### SECTION IV PROPOSAL FORM (Pricing)

The undersigned Service Provider agrees to all terms and conditions of the preceding specifications in the attached Personal Services Agreement and will furnish all the insurance documents and security deposits as stipulated. Please provide unit prices listed below for 2018.

The undersigned contractor agrees to all terms and conditions of the preceding specifications in the attached Personal Services Agreement and will furnish all the insurance documents and security deposits as stipulated. The unit prices listed below is for 2019 and 2020 only. The contract, if renewed, would require estimates for 2020 and 2021.

### 2018-2020 Service

Annual Inspection Cost per inspection and one re-inspection	\$ 86.00	
Each additional re-inspection	\$ 43.00	

Note - The fee for the required annual inspection shall include that inspection and one reinspection required to assure compliance with that initial report. A re-inspection fee can only be charged to an additional re-inspection for the same non-compliance or a missed inspection that was not cancelled by the building owner or their representative a minimum of 24 hours in advance of the pre-arranged inspection time.

Existing Construction Inspection per inspection	\$100.00
Existing Construction Re-Inspection per inspection	\$100.00
Plan Reviews-New	\$200.00
Plan Reviews Renovated/Modernization	\$

Note -The fee for reviews shall include the initial review and one (1) re-review if necessary. A re- review fee can only be charged for the same non-compliance or a missed correction on the second review.

Consulting per hour

Routine Technical Questions- NO CHARGE & Projects Requiring Extensive Time- \$75.00/hour

SIGNATURE PAGE Proposal Signature: State of Illinois County of Cook Catherine Thompson (Type Name of Individual Signing) Catherine Thompson \_being first duly sworn on oath deposes and says that the Service Provider on the above proposal is organized as indicated below and that all statements herein made on behalf of such Service Provider and that their deponent is authorized to make them, and also deposes and says that deponent has examined and carefully prepared their proposal from the Agreement Specifications and has checked the same in detail before submitting this Proposal; that the statements contained herein are true and correct. Signature of Service Provider authorizes the Village of Oak Park to verify references of business and credit at its option. Signature of Service Provider shall also be acknowledged before a Notary Public or other person authorized by law to execute such acknowledgments. Thompson Elevator Inspection Service, Inc. Dated: 120 17 Organization Name (Seal - If Corporation) By: 1302 E Thayer St., Mt. Prospect, IL 60056 Authorized Signature Address 847-296-8211 Telephone Subscribed and sworn to before me this 2017. Commission Notary Public Expires on 10/8/18 OFFICIAL SEAL JUSTIN STANONIK Notary Public - State of Illinois

My Commission Expires Oct 8, 2018

# PROPOSAL FORM continued

Compl	ete Applicat	ole Paragraph Below		
(a)	Corporation	<u>1</u>		
		e Provider is a corporation, which operates		
Thomp	son Elevator Inspec	ction Service, Inc. and is organized and existing un	der the laws of	the State of
	Illinois	The full names of its Officers are:		
	Drosidont	Catherine Thompson		
			-	
	Secretary	Catherine Thompson		
	Treasurer_	Catherine Thompson	27	
	executed b section of	ration does have a corporate seal. (In the by a person other than the President, attach h Corporate By-Laws or other authorization by to execute the offer for the corporation.)	ereto a certified	copy of that
(b)	Partnership			
,		gnatures, and Addresses of all Partners		
	************************	September of the September of the September of the September of S		-
	N/A		_	
	×		<b>2</b>	
	8.		-	
	The partne	ership does business under the legal name o	f	, which
	is registere	ed with the office of		in the
	county of	a war are office of		iii tiic
	£			
(a)	Colo Dropri	otor		
(c)	Sole Propri	<u>etor</u> e Provider is a Sole Proprietor whose full name	ı ie	
	N/A		the Service	Provider is
	operating (		0011100	11011401 10
	a trade na	me, said trade name is		
	which nam	e is registered with the office of		
	in the sour	atu of		

Signed:		
	Sole Proprietor	

In compliance with the above, the undersigned offers and agrees, if his/her proposal is accepted within ninety (90) calendar days from date of opening, to furnish any or all of the items upon which prices are quoted, at the price set opposite each item, delivered at the designated point within the time specified above.

# MUNICIPAL QUALIFICATION REFERENCE SHEET

MUNICIPALITY	Village of Arlington Heights
ADDRESS	33 S Arlington Heights Rd
	Arlington Heights, IL 60005
CONTACT	Valerie Gerstein
PHONE	847-368-5562
WORK PERFORMED	Plan Reviews, new construction inspections, modernization inspections semi-annual code inspections
MUNICIPALITY	Village of Downers Grove
ADDRESS	801 Burlington Ave
	Downers Grove, IL 60515
CONTACT	Alex Pellicano
PHONE	630-434-5514
WORK PERFORMED	Plan Reviews, new construction inspections, modernization inspections semi-annual code inspections
MUNICIPALITY	City of Elgin
ADDRESS	150 Dexter Court
	Elgin, IL 60120
CONTACT	Raoul Johnston
PHONE	847-931-5947
WORK PERFORMED	Plan Reviews, new construction inspections, modernization inspections semi-annual code inspections

<sup>\*\*</sup>PLEASE SEE SECTION 5 FOR COMPLETE LIST OF REFERENCES

### SECTION V CONTRACTOR CERTIFICATION

Thompson Elevator Inspection Service, Inc., as part of its proposal on agreement for 2018 Elevator Inspections and Plan Review for the Village of Oak Park Village Hall, hereby certifies that said contractor selected is not barred from proposing on the aforementioned agreement as a result of a violation to either Section 33E-3 or 33E-4 of Article 33E of Chapter 38 of the Illinois Revised Statutes or Section 2-6-12 of the Oak Park Village Code.

(Authorized Agent of contractor selected)

Subscribed and sworn to before me this 12th day of June

une , 2017

Notary Rublic's Signature

- Notary Public Seal -

OFFICIAL SEAL
JUSTIN STANONIK
Notary Public - State of Illinois
My Commission Expires Oct 8, 2018

# SECTION VI TAX COMPLIANCE AFFIDAVIT

Catherine Thompson	, being first duly sworn, deposes
and says:	
that he/she is President	of
(partner, officer, owner, e	etc.)
Thompson Elevator Inspection Service, Inc.	_
(Service Provider selected	d)
4	
The individual or entity making the foregoing proposa barred from entering into an agreement with the delinquency in the payment of any tax administered by individual or entity is contesting, in accordance will appropriate revenue act, liability for the tax or the ammaking the proposal or proposal understands that delinquency in taxes is a Class A Misdemeanor and allows the municipality to recover all amounts paid agreement in civil action.	Village of Oak Park because of any y the Department of Revenue unless the ith the procedures established by the nount of the tax. The individual or entity t making a false statement regarding I, in addition, voids the agreement and
Estheron Thompso	
By: Catherine Thompson	
lts: President	
Thompson Elevator Insp	pection Service, Inc.
an individual) (name of partner if th partnership)	er if the Service Provider is ne Service Provider is a ne Service Provider is a
The above statement must be subscribed and sworn t	o before a notary public.
Subscribed and sworn to before me this 12th of	lay of June , 2017
Notary Public's Signature - N	otary Public Seal -
27	OFFICIAL SEAL JUSTIN STANONIK Notary Public - State of Illinois My Commission Expires Oct 8, 2018

### Minority Business and Women Business Enterprises Requirements

The Village in an effort to reaffirm its policy of non-discrimination, encourages and applauds the efforts of Service Providers and subcontractors in taking affirmative action and providing Equal Employment Opportunity without regard to race, religion, creed, color, sex, national origin, age, handicap unrelated to ability to perform the job or protected veteran's status.

### Reporting Requirements

The following forms must be completed in their entirety, notarized and included as part of the proposal document. Failure to respond truthfully to any question on the list or failure to cooperate fully with further inquiry by the Village will result in disqualification of your proposal.

# SECTION VII ORGANIZATION OF FIRM

Please fill out the applicable section:

A. Corporation:  The Service Provider is a corporation, legally named Thompson Elevator Inspection Service, Inc.					
and is organized and existing in good standing under the laws of the State of Illinois  The full names of its Officers are:					
President_Catherine Thompson					
Secretary_ Catherine Thompson					
Treasurer_ Catherine Thompson					
Registered Agent Name and Address: Catherine Thompson- 1302 E. Thayer St., Mt. Prospect, IL 60056					
The corporation has a corporate seal. (In the event that this Proposal is executed by a person other than the President, attach hereto a certified copy of that section of Corporate By-Laws or other authorization by the Corporation that permits the person to execute the offer for the corporation.)					
B. Sole Proprietor: The Service Provider is a Sole Proprietor. If the Service Provider does business under an Assumed Name, the					
Assumed Name is N/A, which is registered with the Cook County Clerk. The Service Provider is otherwise in compliance with the Assumed Business Name Act, 805 ILCS 405/0.01, et. seq.					
C. Partnership: The Service Provider is a Partnership which operates under the nameN/A					
The following are the names, addresses and signatures of all partners:					
Signature Signature					
(Attach additional sheets if necessary.) If so, check here					
If the nartnership does husiness under an assumed name, the assumed name must be					

registered with the Cook County Clerk and the partnership is otherwise in compliance with

the Assumed Business Name Act, 805 ILCS 405/0.01, et. seq.

D. Affiliates: The name and a	ddress of any affiliated entity of the business, including a
description of the affiliation:	N/A
Signature of Owner	

# SECTION VIII COMPLIANCE AFFIDAVIT

Catherine Thompson

and state:		, (	, (Print Name) being first duly sworn on oath deposes			
and 3	tate.					
1.	I am the (title) _ am authorized firm;	17A 114 SANSA	tatements	contained in	of the Proposing n this affidavit on be	

- 2. I have examined and carefully prepared this Proposal based on the request and has verified the facts contained in the Proposal in detail before submitting it;
- 3. The Proposing Firm is organized as indicated above on the form entitled "Organization of Proposing Firm."
- I authorize the Village of Oak Park to verify the Firm's business references and credit at its option;
- Neither the Proposing Firm nor its affiliates¹ are barred from proposing on this project as a result of a violation of 720 ILCS 5/33E-3 or 33E-4 relating to Bid rigging and Bid rotating, or Section 2-6-12 of the Oak Park Village Code relating to "Proposing Requirements".
- 6. The Proposing Firm has the M/W/DBE status indicated below on the form entitled "EEO Report."
- Neither the Proposing Firm nor its affiliates is barred from agreeing with the Village of Oak Park because of any delinquency in the payment of any debt or tax owed to the Village except for those taxes which the Proposing Firm is contesting, in accordance with the procedures established by the appropriate revenue act, liability for the tax or the amount of the tax. I understand that making a false statement regarding delinquency in taxes is a Class A Misdemeanor and, in addition, voids the agreement and allows the Village of Oak Park to recover all amounts paid to the Proposing Firm under the agreement in civil action.
- 8. I am familiar with Section 13-3-2 through 13-3-4 of the Oak Park Village Code relating to Fair Employment Practices and understand the contents thereof; and state that the Proposing Firm is an "Equal Opportunity Employer" as defined by Section 2000(E) of Chapter 21, Title 42 of the United States Code Annotated and Federal Executive Orders #11246 and #11375 which are incorporated herein by reference. Also complete the attached EEO Report or Submit an EEO-1.
- 9. I certify that the Service Provider is in compliance with the Drug Free Workplace Act, 41 U.S.C.A, 702

<sup>&</sup>lt;sup>1</sup> Affiliates means: (i) any subsidiary or parent of the agreeing business entity, (ii) any member of the same unitary business group; (iii) any person with any ownership interest or distributive share of the agreeing business entity in excess of 7.5%; (iv) any entity owned or controlled by an executive employee, his or her spouse or minor children of the agreeing business entity.

Signature:(	seterai Tho	moon	
Name and ad	Idress of Business: The	ompson Elevator Inspection Service, Inc 1302 E. Thayer St., Mt. Prospect, IL 6005	56
Telephone	847-296-8211	E-Mail patty@thompsonelevator.com	
Subscriped to	Carou	e this 12th day of June, 2017.  - Notary Public Seal -	

OFFICIAL SEAL JUSTIN STANONIK Notary Public - State of Illinois My Commission Expires Oct 8, 2018

# SECTION IX M/W/DBE STATUS AND EEO REPORT

Failure to respond truthfully to any questions on this form, failure to complete the form or failure to cooperate fully with further inquiry by the Village of Oak Park will result in disqualification of this Proposal. For assistance in completing this form, contact the Department of Development Customer Services at 708-358-5420.

1.	Service	e Provider Name: Thompson Elevator Inspection Service, Inc.	
2. Check here if your firm is:			
		Minority Business Enterprise (MBE) (A firm that is at least 51% owned, managed and controlled by a Minority.)	
		Women's Business Enterprise (WBE) (A firm that is at least 51% owned, managed and controlled by a Woman.)  Owned by a person with a disability (DBE) (A firm that is at least 51% owned	
		by a person with a disability) None of the above	
	[Subm	it copies of any W/W/DBE certifications]	
3.	What i	s the size of the firm's current stable work force?	
	19	Number of full-time employees	
	11	Number of part-time employees	
4.	agreer the no	r information will be <u>requested of all sub-Service Providers working on this</u> <u>ment</u> . Forms will be furnished to the lowest responsible Service Provider with tice of agreement award, and these forms must be completed and submitted Village before the execution of the agreement by the Village.	
Signat	ure: <u>2</u>	actioni Thompson	
Date:	11	2 /2017	

						EEO REP	OPT															
						s form, or failure to coo t the Purchasing Depart	perate fully with fur		the Village of 0	Oak Park will result in o	lisqualification of th	nis Bid. An										
An EEO-1 Report may be submitted in lieu of this report																						
Automotive automotive to the involved and		on Elevato	or Inspectio	n Service,	, Inc.																	
Total Employee	ployees																					
Job Categories	Total Employees	Total Males	Total Females	Black	Hispanic	American Indian & Alaskan Native	Asian & Pacific Islander	Black	Hispanic	American Indian & Alaskan Native	Asian & Pacific Islander	Total Minorities										
Officials & Managers	2		2																			
Professionals		24114AQ365.74																				
Technicians	17	17			1																	
Sales Workers																						
Office & Clerical	11	2	9																			
Semi-Skilled																						
Laborers																						
Service Workers																						
TOTAL	30	19	11		1																	
Management Trainees																						
Apprentices			1888																			
This completed	d and notarized	report must a	ccompany your f	Bid. It should i	be attached to	your Affidavit of Compl	liance. Failure to inc	lude it with yo	our Bid will be d	lisqualify you from con	sideration.											
Catherine	e Thompson	1	, being first dul	y sworn, depo	ses and says th	nat he/she is theP	resident															
	erson Making Af in Elevator					curate and is submitte	(Title or Offi		-0													
VI	n Service, Inc.	and that the a	above EEU Repo	つゲ4	1 is true and ac	curate and is submitted	a with the intent tha	1	-X1	OFFICIA	SFAI	7-										
be relied upon.	. Subscribed and	sworn to bef	ore me this 12	day of	June	, 201	7. (10)	Yawa		JUSTIN S'	TANONIK											
Notary Public - State of Illinois  My Commission Expires Oct 8, 2018												-										
( Sig	gnature )			(Date)					<u>-</u>	*****	(Signature) (Date)											

### SECTION X NO PROPOSAL EXPLANATION

If your firm does not wish to propose on the attached specifications, the Village of Oak Park would be interested in any explanation or comment you may have as to what prevented your firm from submitting a Proposal.