PROPOSAL SUMMARY SHEET 21-023

Gasoline and Diesel Fuel

Business Name: Al Warren Oil Co Inc.
Street Address: 1646 Summer St.
City, State, Zip: Hammond, IN 46320
Contact Name: Arnie Berg
Title: Mng. of Business Development
Phone: 630-484-4368 Fax: 630-971-8301
E-Mail address: aberg Palwarrenoil. 6m
PRICE PROPOSAL
Please fill out Unit Price Sheet for price proposal.
AUTHORIZATION & SIGNATURE
Name of Authorized Signee: Jerry Piszczow
Signature of Authorized Signee:
Title: C Fo Date: 9/22/21
Addendun Received 10/5/2 (AB)



The undersigned Jerry Piszczor , as CFO (Enter Name of Person Making Certification) (Enter Title of Person Making Certification)
and on behalf of Al Warren Ol Lo. Inc. , certifies that:
1) BUSINESS ORGANIZATION:
The Proposer is authorized to do business in Illinois: Yes [X] No []
Federal Employer I.D.#: 36-3104190 (or Social Security # if a sole proprietor or individual)
The form of business organization of the Proposer is (check one):
Sole Proprietor Independent Contractor (Individual) Partnership LLC Corporation (State of Incorporation) Sole Proprietor Independent Contractor (Individual) Partnership (Date of Incorporation)

2) ELIGIBILITY TO ENTER INTO PUBLIC CONTRACTS: Yes [X No []

The Proposer is eligible to enter into public contracts, and is not barred from contracting with any unit of state or local government as a result of a violation of either Section 33E-3, or 33E-4 of the Illinois Criminal Code, or of any similar offense of "Bid-rigging" or "Bid-rotating" of any state or of the United States.

3) SEXUAL HARASSMENT POLICY: Yes [X] No []

Please be advised that Public Act 87-1257, effective July 1, 1993, 775 ILCS 5/2-105 (A) has been amended to provide that every party to a public contract must have a written sexual harassment policy in place in full compliance with 775 ILCS 5/2-105 (A) (4) and includes, at a minimum, the following information: (I) the illegality of sexual harassment; (II) the definition of sexual harassment under State law; (III) a description of sexual harassment, utilizing examples; (IV) the vendor's internal complaint process including penalties; (V) the legal recourse, investigative and complaint process available through the Department of Human Rights (the "Department") and the Human Rights Commission (the "Commission"); (VI) directions on how to contact the Department and Commission; and (VII) protection against retaliation as provided by Section 6-101 of the Act. (Illinois Human Rights Act). (emphasis added). Pursuant to 775 ILCS 5/1-103 (M) (2002), a "public contract" includes "...every contract to which the State, any of its political subdivisions or any municipal corporation is a party."

4) EQUAL EMPLOYMENT OPPORTUNITY COMPLIANCE: Yes [No []

During the performance of this Project, Proposer agrees to comply with the "Illinois Human Rights Act", 775 ILCS Title 5 and the Rules and Regulations of the Illinois Department of Human Rights published at 44 Illinois Administrative Code Section 750, et seq. The

Proposer shall: (I) not discriminate against any employee or applicant for employment because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (II) examine all job classifications to determine if minority persons or women are underutilized and will take appropriate affirmative action to rectify any such underutilization; (III) ensure all solicitations or advertisements for employees placed by it or on its behalf, it will state that all applicants will be afforded equal opportunity without discrimination because of race, color, religion, sex, marital status, national origin or ancestry, age, or physical or mental handicap unrelated to ability, or an unfavorable discharge from military service; (IV) send to each labor organization or representative of workers with which it has or is bound by a collective bargaining or other agreement or understanding, a notice advising such labor organization or representative of the Vendor's obligations under the Illinois Human Rights Act and Department's Rules and Regulations for Public Contract; (V) submit reports as required by the Department's Rules and Regulations for Public Contracts, furnish all relevant information as may from time to time be requested by the Department or the contracting agency, and in all respects comply with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; (VI) permit access to all relevant books, records, accounts and work sites by personnel of the contracting agency and Department for purposes of investigation to ascertain compliance with the Illinois Human Rights Act and Department's Rules and Regulations for Public Contracts; and (VII) include verbatim or by reference the provisions of this Equal Employment Opportunity Clause in every subcontract it awards under which any portion of this Agreement obligations are undertaken or assumed, so that such provisions will be binding upon such subcontractor. In the same manner as the other provisions of this Agreement, the Proposer will be liable for compliance with applicable provisions of this clause by such subcontractors; and further it will promptly notify the contracting agency and the Department in the event any subcontractor fails or refuses to comply therewith. In addition, the Proposer will not utilize any subcontractor declared by the Illinois Human Rights Department to be ineligible for contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations. Subcontract" means any agreement, arrangement or understanding, written or otherwise, between the Proposer and any person under which any portion of the Proposer's obligations under one or more public contracts is performed, undertaken or assumed; the term "subcontract", however, shall not include any agreement, arrangement or understanding in which the parties stand in the relationship of an employer and an employee, or between a Proposer or other organization and its customers. In the event of the Proposer's noncompliance with any provision of this Equal Employment Opportunity Clause, the Illinois Human Right Act, or the Rules and Regulations for Public Contracts of the Department of Human Rights the Proposer may be declared non-responsible and therefore ineligible for future contracts or subcontracts with the State of Illinois or any of its political subdivisions or municipal corporations, and this agreement may be canceled or avoided in whole or in part, and such other sanctions or penalties may be imposed or remedies involved as provided by statute or regulation.

5) TAX CERTIFICATION: Yes [No []

Contractor is current in the payment of any tax administered by the Illinois Department of Revenue, or if it is: (a) it is contesting its liability for the tax or the amount of tax in accordance

21-023

with procedures established by the appropriate Revenue Act; or (b) it has entered into an agreement with the Department of Revenue for payment of all taxes due and is currently in compliance with that agreement.

6) AUTHORIZATION & SIGNATURE:

I certify that I am authorized to execute this Certificate of Compliance on behalf of the Contractor set forth on the Proposal, that I have personal knowledge of all the information set forth herein and that all statements, representations, that the Proposal is genuine and not collusive, and information provided in or with this Certificate are true and accurate. The undersigned, having become familiar with the Project specified, proposes to provide and furnish all of the labor, materials, necessary tools, expendable equipment and all utility and transportation services necessary to perform and complete in a workmanlike manner all of the work required for the Project.

ACKNOWLEDGED AND AGREED TO:

Signature of Authorized Officer

Name of Authorized Officer

CFO

Title

9/22/21 Date

REFERENCES

Provide three (3) references for which your organization has performed similar work.

Bidder	r's Name:	Warren 01 Co Inc. (Enter Name of Business Organization)
	,	(Enter Name of Business Organization)
1.	ORGANIZATION	Village of Addison
	ADDRESS	1491 Jeffrey DR. Addison, IL
	PHONE NUMBER	331-254-0423
	CONTACT PERSON	Dominic Macki
	YEAR OF PROJECT	2018 - Current
2.	ORGANIZATION	Village of New Lenox
	ADDRESS	2401 EIlis Rd New Lenor, IL
	PHONE NUMBER	708-578-9609
	CONTACT PERSON	Jeff Price
	YEAR OF PROJECT	2016 - Current
3.	ORGANIZATION	City of Lake Forest
	ADDRESS	800 North Field DR. Lake Forest, IL
	PHONE NUMBER	847-810-3577
	CONTACT PERSON	Tom Minarik
	YEAR OF PROJECT	2018-Current

Proposal Submission

Al Warren Oil Co. Inc has been serving the Chicagoland, NW Indiana and Southern WI areas since 1948 providing fuel and most recently lubricants and waste services. We have a Corporate Office in Hammond, IN and warehouses in Chicago and Bensenville.

Al Warren Oil Co. Inc. has had multiple bids with various Municipalities over the years. We currently are in the 2nd of a possible 4 years with the Northwest Municipal Conference who bid out the Suburban Purchasing Cooperative contract. This bid encompasses 22 Municipalities participating this year.

Al Warren Oil Co. Inc. has 48 Tank-Wagon vehicles and 10 Transport 18-wheelers to handle most of our business. If needed, Altom Transport serves as a back-up with over 300 Transports available. We have 126 employees working for Al Warren Oil Co. We did \$180,000,000 in sales in 2019 and \$150,000,000 in 2020. Direct involved employees for this bid will be CFO-Jerry Piszczor with 30 years of experience, Amando Sepolio, Billing/Credit Manager with 18 years of experience. The Sales Manager, Ryan O'Reilly has 15 years of experience with Al Warren Oil Co. and Arnie Berg, who will be in direct contact with the Village has 36 years of experience in the fuel business.

For further information on our offerings at Al Warren Oil Co. Inc. feel free to visit our website at www.alwarrenoil.com.

INSURANCE REQUIREMENTS

Please submit a policy Specimen Certificate of Insurance showing current coverage's

WORKERS' COMPENSATION & EMPLOYER LIABILITY

Full Statutory Limits - Employers Liability \$500,000 - Each Accident \$500,000 - Each Employee \$500,000 - Policy Limit Waiver of Subrogation in favor of the Village of Orland Park

AUTOMOBILE LIABILITY (ISO Form CA 0001)

\$1,000,000 – Combined Single Limit Per Occurrence Bodily Injury & Property Damage

GENERAL LIABILITY (Occurrence basis) (ISO Form CG 0001)

\$1,000,000 – Combined Single Limit Per Occurrence
Bodily Injury & Property Damage
\$2,000,000 – General Aggregate Limit
\$1,000,000 – Personal & Advertising Injury
\$2,000,000 – Products/Completed Operations Aggregate
Additional Insured Endorsements: ISO CG 20 10 or CG 20 26 and
CG 20 01 Primary & Non-Contributory
Waiver of Subrogation in favor of the Village of Orland Park

\$1,000,000 Limit - Claims Made Form, Indicate Retroactive Date Deductible not-to-exceed \$50,000 without prior written approval
UMBRELLA LIABILITY (Follow Form Policy) \$2,000,000 – Each Occurrence \$2,000,000 – Aggregate EXCESS MUST COVER: General Liability, Automobile Liability, Employers' Liability
UMBRELLA/EXCESS PROFESSIONAL LIABILITY \$1,000,000 Limit – Claims Made Form, Indicate Retroactive Date Deductible not-to-exceed \$50,000 without prior written approval
BUILDERS RISK Completed Property Full Replacement Cost Limits - Structures under construction
ENVIRONMENTAL IMPAIRMENT/POLLUTION LIABILITY \$1,000,000 Limit for bodily injury, property damage and remediation costs resulting from a pollution incident at, on or mitigating beyond the job site
\$1,000,000 Limit per Data Breach for liability, notification, response, credit monitoring service costs, and software/property damage

Any insurance policies providing the coverages required of the Consultant, excluding Professional Liability, shall be specifically endorsed to identify "The Village of Orland Park, and their respective officers, trustees, directors, officials, employees, volunteers and agents as Additional Insureds on a primary/non-contributory basis with respect to all claims arising out of operations by or on behalf of the named insured." The required Additional Insured coverage shall be provided on the Insurance Service Office (ISO) CG 20 10 or CG 20 26 endorsements or an endorsement at least as broad as the above noted endorsements as determined by the

Village of Orland Park. Any Village of Orland Park insurance coverage shall be deemed to be on an excess or contingent basis as confirmed by the required (ISO) CG 20 01 Additional Insured Primary & Non-Contributory Endorsement. The policies shall also contain a Waiver of Subrogation in favor of the Additional Insureds in regard to General Liability and Workers' Compensation coverage. The certificate of insurance shall also state this information on its face. Any insurance company providing coverage must hold an A-, VII rating according to Best's Key Rating Guide. Each insurance policy required shall have the Village of Orland Park expressly endorsed onto the policy as a Cancellation Notice Recipient. Should any of the policies be cancelled before the expiration date thereof, notice will be delivered in accordance with the policy provisions. Permitting the contractor, or any subcontractor, to proceed with any work prior to our receipt of the foregoing certificate and endorsements shall not be a waiver of the contractor's obligation to provide all the above insurance.

Consultant agrees that prior to any commencement of work to furnish evidence of Insurance coverage providing for at minimum the coverages, endorsements and limits described above directly to the Village of Orland Park, Nicole Merced, Purchasing Coordinator, 14700 S. Ravinia Avenue, Orland Park, IL 60462. Failure to provide this evidence in the time frame specified and prior to beginning of work may result in the termination of the Village's relationship with the contractor.

ACCEPTED & AGREED ON 9/3

Signature

Printed Name

C 1

Title

Authorized to execute agreements for:

Al Warren Oil Co. Inc.
Name of Company

Note: Sample Certificate of Insurance and Additional Insured Endorsements attached.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/20/2021

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		CONTACT To Request a Certificate		
Cottingham & Butler 800 Main St.		PHONE (A/C, No, Ext): 888-785-4677	FAX (A/C, No): 563-	-587-5866
Dubuque IA 52001		E-MAIL ADDRESS: certificates@cottinghambutl	er.com	
		INSURER(S) AFFORDING	COVERAGE	NAIC#
		INSURER A: Arch Insurance Company		11150
Al Warren Oil Company, Inc	ALTOTRA-02	ınsurer в : Crum & Forster Specialty Ir	surance Company	44520
4243 South Knox		INSURER c : AGCS Marine Insurance Co	ompany	22837
Chicago IL 60432	a	INSURER D: AXIS Surplus Insurance Co	mpany	26620
		INSURER E: Aspen Specialty Insurance	Company	10717
		INSURER F:		
COVERAGES	CEDTIEICATE MUMBED, COOCAAOCO	DEL 4	OLONI MILLER TO	

CERTIFICATE NUMBER: 620641253

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.

ISR TR		TYPE OF INSURANCE	ADDL S	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S
A	X	CLAIMS-MADE X OCCUR		ZAGLB9233603	6/1/2021	6/1/2022	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,000,000 \$ 300,000
				S			MED EXP (Any one person)	\$ 10,000
-							PERSONAL & ADV INJURY	\$ 1,000,000
-		I'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000
	X	POLICY PRO- JECT LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000
		OTHER:						\$
A		OMOBILE LIABILITY		ZACAT9523503	6/1/2021	6/1/2022	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
		ANY AUTO					BODILY INJURY (Per person)	\$
	^	OWNED SCHEDULED AUTOS ONLY					BODILY INJURY (Per accident)	\$
		AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
								\$
		UMBRELLA LIAB X OCCUR		SEO-113331	6/1/2021	6/1/2022	EACH OCCURRENCE	\$2,000,000
		EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$ 2,000,000
		DED X RETENTION \$ 0						\$
	AND	KERS COMPENSATION EMPLOYERS' LIABILITY Y / N		ZAWCI9429503	6/1/2021	6/1/2022	X PER OTH-	
	ANYP	PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A				E.L. EACH ACCIDENT	\$1,000,000
	(Man	datory in NH) describe under					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
-	DÉSC	CRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
=	Cargo Pollui Umbr	ition		MZI93077915 ER00MWL21 P-001-000343183-02	6/1/2021 8/3/2021 6/1/2021	6/1/2022 6/1/2022 6/1/2022	Limit Limit Limit	300,000 5,000,000 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The Auto Liability and General Liability policies include a blanket automatic additional insured endorsement that provides an additional insured status only when there is a written contract between the named insured and The Village of Orland Park, and their respective officers, trustees, directors, officials, employees, volunteers and agents that requires such a status subject to the terms and conditions of the endorsement attached to the policy. The certificate holder is additional insured on the General Liability policy on a primary and non contributory basis only when there is a written contract between the named insured and The Village of Orland Park, and their respective officers, trustees, directors, officials, employees, volunteers and agents that requires such status, subject to all the terms and conditions of the endorsement attached to the policy.

CERTIFICATE HOLDER	CANCELLATION
Village of Orland Park 14700 Rayinia Ave	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Orland Park IL 60462	AUTHORIZED REPRESENTATIVE

ITEM	DESCRIPTION	MID-GRADE (NO LEAD) 89 OCTANE	ULTRA LOW SULFUR B5 #2 DIESEL w/ 5% BIO DIESEL	ULTRA LOW SULFUR B5 DIESEL Winter Blend 70/30	RED DYED ULTRA LOW SULFUR DIESEL
-	TANK SIZE IN GALLONS	10000	10000	SAME AS DIESEL	SAME AS DIESEL
N	INDEX PRICE FROM OPIS (9-15-21) Chicago CONT. AVG-9/15	2.443	2.2427	2.4768*	2.2391
8	MARK-UP PER GALLON	<0375>	0,0000	0,0000	0000
4	ILLINOIS MOTOR FUEL TAX	0.392	0.467	0.467	0
2	ILLINOIS UNDERGROUND STORAGE TAX	0.003	0.003	0.003	0.003
9	ENVIRONMENTAL IMPACT FEE	0.008	0.008	0.008	0.008
7	COOK COUNTY TAX	0.09	0.06	0.06	90.00
80	TYPE AND BRAND OF ADDITIVE (DIESEL)	N/A	ADDITIVE: INNOSPEC	ADDITIVE: INNO SPEC	ADDITIVE:
	TOTAL COST	2.8685	7.7807	3,0148	
	*70% #2 (2.2427) +30% #1 (\$3.0232) =\$2.4768 Winter Blend				
	Proposer		Arnie Berg		
	Firm Name:	2	Al Warren Oil Co. Inc		
	Signed:		- Arrival		
			CFO		
	Dated		9/29/2021		

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	Proposer		Arnie Berg		
	Firm Name:	2	Al Warren Oil Co. Inc		
	Signed:		- Arrival		
			CFO		
	Dated		9/29/2021		

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