### PROPOSER SUMMARY SHEET

# RFP #25-007 Police Department Evidence Storage Room Project

siness Name: BEAR Construction Company
reet Address: 1501 Rohlwing Road
ty, State, Zip: Rolling Meadows, IL, 60008
ontact Name: Bill Sanchez
le: VP of Construction
one: <u>815-621-0243</u> Fax:
Mail address: bills@bearcc.com
GRAND TOTAL PROPOSAL PRICE  All project allowances shall be included in the Grant Total Proposal Price. See Allowance Schedule in Section 01 21 00 – 1.06 in Exhibit B - Project Manual, for list of Allowances.
AUTHORIZATION & SIGNATURE
ame of Authorized Signee: Bill Sanchez
gnature of Authorized Signee:
le: VP of Construction Date: 03/05/2025



### **Bid Bond**

### CONTRACTOR:

(Name, legal status and address)
BEAR CONSTRUCTION COMPANY
1501 Rohlwing Road
Rolling Meadows, IL 60008

### OWNER:

(Name, legal status and address)
VILLAGE OF ORLAND PARK

14700 Ravinia Avenue, Orland Park, IL 60462

BOND AMOUNT: Ten Percent of Amount bid (10% of Amount Bid)

### PROJECT:

Signed and sealed this

(Name, location or address, and Project number, if any)
Police Department Evidence Storage Room Project
RFP #25-007 - Project No. 2024-039

13th

### SURETY:

(Name, legal status and principal place of business)

FIDELITY AND DEPOSIT COMPANY OF MARYLAND 1299 Zurich Way, 5th Floor Schaumburg, IL 60196-1056

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

Project Number, if any:

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

day of February 2025

organica and source and	
	BEAR CONSTRUCTION COMPANY
Depa amidu	(Principal) (Seal)
(Witness) LISA AMIDE!	
1/ 11	(Title) ANDEFOR, CFO
V	FIDELITY AND DEPOSIT COMPANY OF MARYLAND
1-Hally	(Surety) (Seal)
(Witness) Kristin Hannigan	Macellex
,	(Title) Susan A. Welsh, Attorney in Fact

### ACKNOWLEDGEMENT BY SURETY

## STATE OF ILLINOIS COUNTY OF COOK

On this 13th day of February, 2025 before me, Nicholas Kertesz, a Notary Public, within and for said County and State, personally appeared Susan A. Welsh to me personally known to be the Attorney-in-Fact of and for Fidelity and Deposit Company of Maryland and acknowledged that she executed the said instrument as the free act and deed of said Company.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, at my office in the aforesaid County, the day and year in this certificate first above written.

Notary Public in the State of Illinois

County of Cook

OFFICIAL SEAL
NICHOLAS KERTESZ
NOTARY PUBLIC, STATE OF ILLINOIS
COOK COUNTY
MY COMMISSION EXPIRES 03/09/2027

### EXTRACT FROM BY-LAWS OF THE COMPANIES

"Article V, Section 8, <u>Attorneys-in-Fact</u>. The Chief Executive Officer, the President, or any Executive Vice President or Vice President may, by written instrument under the attested corporate seal, appoint attorneys-in-fact with authority to execute bonds, policies, recognizances, stipulations, undertakings, or other like instruments on behalf of the Company, and may authorize any officer or any such attorney-in-fact to affix the corporate seal thereto; and may with or without cause modify of revoke any such appointment or authority at any time."

### CERTIFICATE

I, the undersigned, Vice President of the ZURICH AMERICAN INSURANCE COMPANY, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing Power of Attorney is still in full force and effect on the date of this certificate; and I do further certify that Article V, Section 8, of the By-Laws of the Companies is still in force.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the ZURICH AMERICAN INSURANCE COMPANY at a meeting duly called and held on the 15th day of December 1998.

RESOLVED: "That the signature of the President or a Vice President and the attesting signature of a Secretary or an Assistant Secretary and the Seal of the Company may be affixed by facsimile on any Power of Attorney...Any such Power or any certificate thereof bearing such facsimile signature and seal shall be valid and binding on the Company."

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at a meeting duly called and held on the 5th day of May, 1994, and the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seals of the said Companies, this 3h day of 2h day

> Thomas O. McClellan Vice President

TO REPORT A CLAIM WITH REGARD TO A SURETY BOND, PLEASE SUBMIT A COMPLETE DESCRIPTION OF THE CLAIM INCLUDING THE PRINCIPAL ON THE BOND, THE BOND NUMBER, AND YOUR CONTACT INFORMATION TO:

Zurich Surety Claims 1299 Zurich Way Schaumburg, IL 60196-1056 reportsfclaims@zurichna.com 800-626-4577

# ZURICH AMERICAN INSURANCE COMPANY COLONIAL AMERICAN CASUALTY AND SURETY COMPANY FIDELITY AND DEPOSIT COMPANY OF MARYLAND POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Illinois, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Illinois (herein collectively called the "Companies"), by Robert D. Murray, Vice President, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint Corinne CHAPMAN, Roger PARAISON, Kristin L. HANNIGAN, Tara A. MAQUINTO, Robert NACHREINER, Therese M. JACKSON, Sandra M. WINSTED, Dartonya WRIGHT, Susan A. WELSH, Judith A. LUCKY-EFTIMOV, James B. MCTAGGART, Jean TORRES, Samantha CHIERICI, Jessica B. DEMPSEY, Christina L. SANDOVAL, Nicholas KERTESZ of Chicago, Illinois, of its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: any and all bonds and undertakings, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland., and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 19th day of April, A.D. 2024.

ZURICH AMERICAN INSURANCE COMPANY COLONIAL AMERICAN CASUALTY AND SURETY COMPANY FIDELITY AND DEPOSIT COMPANY OF MARYLAND

ATTEST:

By: Robert D. Murray Vice President

By: Dawn E. Brown Secretary

State of Maryland County of Baltimore

On this 19th day of April, A.D. 2024, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, Robert D. Murray, Vice President and Dawn E. Brown, Secretary of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, deposeth and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.

Genevieve M. Maison

GENEVIEVE M. MAISON
NOTARY PUBLIC
BALTIMORE COUNTY, MD
My Commission Expires JANUARY 27, 2025





Proposals shall complete this Certificate of Compliance. Failure to comply with all submission requirements may result in a determination that the Proposals is not responsible.

The	e undersigned Bill Sanchez (Enter Name of Person Making Certification)
as	VP of Construction (Enter Title of Person Making Certification)
an	d on behalf of BEAR Construction Company (Enter Name of Business Organization)
cer	tifies that Proposers is:
1)	A BUSINESS ORGANIZATION: Yes [X] No [ ]
	Federal Employer I.D. #: 36-3351654  (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 X Corporation Illinois (State of Incorporation)  7/16/1984 (Date of Incorporation)
2)	STATUS OF OWNERSHIP
	Illinois Public Act 102-0265, approved August 2021, requires the Village of Orland Park to collect "Status of Ownership" information. This information is collected for reporting purposes only. Please check the following that applies to the ownership of your business and include any certifications for the categories checked with the proposal. Business ownership categories are as defined in the Business Enterprise for Minorities, Women, and Persons with Disabilities Act, 30 ILCS 575/0.01 <i>et seq</i> .
	Minority-Owned [ ] Small Business [ ] (SBA standards) Women-Owned [ ] Prefer not to disclose [ ] Veteran-Owned [ ] Not Applicable [X] Disabled-Owned [ ]
	How are you certifying? Certificates Attached [ ] Self-Certifying [ ]

### STATUS OF OWNERSHIP FOR SUBCONTRACTORS

This information is collected for reporting purposes only. Please check the following that applies to the ownership of subcontractors.

Minority-Owned [ ]	Small Business [ ] (SBA standards)
Women-Owned [ ]	Prefer not to disclose [ ]
Veteran-Owned [ ]	Not Applicable [X]
Disabled-Owned [ ]	** ** ***

### 3) AUTHORIZED TO DO BUSINESS IN ILLINOIS: Yes [X] No [ ]

The Proposer is authorized to do business in the State of Illinois.

### 4) ELIGIBILE 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.

### 5) <u>SEXUAL HARASSMENT POLICY COMPLIANT</u>: 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:

(II) 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."

### 6) EQUAL EMPLOYMENT OPPORTUNITY COMPLIANT: Yes [X] 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.

### 7) PREVAILING WAGE COMPLIANCE: Yes [X] No [ ]

In the manner and to the extent required by law, this RFP is subject to the Illinois Prevailing Wage Act and to all laws governing the payment of wages to laborers, workers and mechanics of a Proposer or any subcontractor of a Proposer bound to this agreement who is performing services covered by this contract. If awarded the Contract, per 820 ILCS 130 et seg. as amended, Proposer shall pay not less than the prevailing hourly rate of wages, the generally prevailing rate of hourly wages for legal holiday and overtime work, and the prevailing hourly rate for welfare and other benefits as determined by the Illinois Department of Labor or the Village and as set forth in the schedule of prevailing wages for this contract to all laborers, performing under this workers and mechanics work contract https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/Rates.aspx).

The undersigned Proposer further stipulates and certifies that it has maintained a satisfactory record of Prevailing Wage Act compliance with no significant Prevailing Wage Act violations for

the past three (3) years.

Certified Payroll. The Illinois Prevailing Wage Act requires any contractor and each subcontractor who participates in public works to file with the Illinois Department of Labor (IDOL) certified payroll for those calendar months during which work on a public works project has occurred. The Act requires certified payroll to be filed with IDOL no later than the 15th day of each calendar month for the immediately preceding month through the Illinois Prevailing Wage Portal—an electronic database IDOL has established for collecting and retaining certified payroll. The Portal may be accessed using this link: <a href="https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/certifiedtranscriptofpayroll.aspx">https://www2.illinois.gov/idol/Laws-Rules/CONMED/Pages/certifiedtranscriptofpayroll.aspx</a>. The Village reserves the right to withhold payment due to Contractor until Contractor and its subcontractors display compliance with this provision of the Act.

### 8) EMPLOYMENT OF ILLINOIS WORKERS ON PUBLIC WORKS ACT: Yes [X] No [ ]

In the manner and to the extent required by law, this ITB/RFP is subject to the Employment of Illinois Workers on Public Works Act (30 ILCS 570/0.01 *et seq.*). If awarded the Contract, per 820 ILCS 130 et seq. as amended, and if the Employment of Illinois Workers on Public Works Act (30 ILCS 570/0.01) is in effect, Proposer shall maintain full compliance with its requirements.

### 9) PARTICIPATION IN APPRENTICESHIP AND TRAINING PROGRAM: Yes [X] No [ ]

Proposer participates in apprenticeship and training programs applicable to the work to be performed on the project, which are approved by and registered with the United States Department of Labor's Office of Apprenticeship.

Name of A&T Program: _	United Brotherhood of Carpenters & Joiners of America
Brief Description of Progr	am:
The United Brotherhood	l of Carpenters (UBC) apprenticeship program is a paid,
on-the-job training prog	ram that combines classroom instruction with practical
experience on constructi	on sites, allowing individuals to learn a wide range of
carpentry skills like fram	ing, finishing, and installation, while earning wages and
benefits as they progress	towards becoming a journeyman carpenter; the
program typically lasts s	everal years and includes specialized training in areas
like commercial carpent	ry, residential carpentry, millwork, and concrete
forming, depending on t	he local union and project needs.

### 10) TAX COMPLIANT: Yes [X] No [ ]

Proposer is current in the payment of any tax administered by the Illinois Department of Revenue, or if it is not: (a) it is contesting its liability for the tax or the amount of tax in accordance 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.

### **AUTHORIZATION & SIGNATURE:**

I certify that I am authorized to execute this Certificate of Compliance on behalf of the Proposer set forth on the Proposer Summary Sheet, 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 in this RFP, 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
Bill Sanchez
Name of Authorized Officer
VP of Construction
Title
03/05/2025
Date

### **REFERENCES**

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

Propos	Proposer's Name: BEAR Construction Company									
	(Enter Name of Business Organization)									
1.	ORGANIZATION	Rusu-McCartin Boys & Girls Clubs of Chicago								
	ADDRESS	4411 W Chicago Avenue Chicago, IL 60651								
	PHONE NUMBER	312-235-8011								
	CONTACT PERSON	Larisa Morrison								
	YEAR OF PROJECT	2023								
2.	ORGANIZATION	Exchange 55 Lawndale Fleet Storage yard and Structures								
	ADDRESS	3305 S Lawndale Chicago, IL 60623								
	PHONE NUMBER	815-263-6776								
	CONTACT PERSON	Nick Pullara								
	YEAR OF PROJECT	2024								
3.	ORGANIZATION	Era Valdivia Contractors (EVC) Redevelopment								
	ADDRESS	11909 S Avenue O Chicago, IL 60617								
	PHONE NUMBER	773-617-3927								
	CONTACT PERSON	Jose Valdivia								
	YEAR OF PROJECT	2023								



Phone: (847) 222-1900

Fax: (847) 222-9910 www.Bearcc.com

### Police Dept. Evidence Storage Room Project

15100 Ravinia Ave., Orland Park, IL 60462

Design Firm Williams Architects, LTD. Plans: January 27, 2025 Addendums: Addendum #1 thru 5 Proposal Date: March 5, 2025

Usable SF: 1,800

### Division 1 - General Requirements

### **General Conditions**

Supervision

Project Management Assistant Project Manager

Provide dumpsters/disposal

**General Conditions Subtotal:** 

### **General Requirements**

Final Cleaning by others Building protection

Storage Trailers

General Requirements Subtotal:

### Division 2 - Existing Conditions

### Demolition

Provide dumpster

Demo cleanup

Demo and removal of of existing CMU walls

Demo and removal of wood platform above two rooms

Demo and removal of guardrail as shown

Demo and removal of lights

Demo and removal of ductwork shown on MD1.0

Haul demolished work out of building

Haul demolished work out of building - MEP

Demolition Subtotal:

### Division 3 - Concrete

### Concrete

No work figured

Concrete Subtotal:



1501 Rohlwing Road

Rolling Meadows, Illinois 60008-1336

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### Division 4 - Masonry

### Masonry

Infill Cores in walls with approved Grout per Detail 3/S3.0 Grout Top cell Solid - At CMU Wall per Detail 6/S3.0 Infill Beam pockets with Masonry Grout

Masonry Subtotal:

### **Division 5 - Metals**

### Structural Steel

Furnish & Install New Mezzanine Structural Steel Framing and Plain Bar Grating (1" x 3/16" x 1-3/16"), S1.0

Furnish & Install Support Angles at Perimeter, 2-4/S3.0 Furnish & Install New Guardrail at Existing Stairs, 8/S3.0 and A5.1

Furnish & Install New Removable Guardrail Sections (4 EA @ 3'-0"), 9/S3.0 and A5.1

Furnish only - Bearing Plates, 3-7/S3.0; Stud Plates, 6/S3.0

Structural Steel Subtotal:

### Misc Metals

No Scope Included

Metals Subtotal: \$

### Division 6 - Wood and Plastic

### Carpentry

Furnish and install install Lyon storage shelves (40) Remove and install existing metal ceilings in storage rooms.

**Carpentry Subtotal:** 

### Millwork

No Scope Included

Millwork Subtotal:



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<u> Division 7 - Thermal and Moisture Protection</u>		
Roofing		
No Scope Included		
	Roofing Subtotal:	\$ -
M. C. D		
Metal Panels  No Scope Included		
No scope included		
	Metal Panels Subtotal:	\$ ·
EIFS		
No Scope Included		
	EIFS Subtotal:	\$
Insulation		
No Scope Included		
	Insulation/Fire Proofing Subtotal:	- I
	insulation/Fire Proofing Subtotal.	-
<u> Division 8 - Openings</u>		
Doors, Frames, Hardware		
No Scope Included		
	Doors, Frames, & Hardware Subtotal:	\$
Specialty Doors		
No Scope Included		
	Specialty Doors Subtotal:	\$



Glazing

No Scope Included

Resinous Flooring
No Scope Included

1501 Rohlwing Road Rolling Meadows, Illinois 60008-1336

Phone: (847) 222-1900

Fax: (847) 222-9910 www.Bearcc.com

Glazing Subtotal:	\$ \\ \tag{-1}
Drywall Subtotal:	\$
Acoustical Ceiling Subtotal:	<b>\$</b>
Flooring Subtotal:	\$
Ceramic Tile Subtotal:	\$ -
	Glazing Subtotal:  Drywall Subtotal:  Acoustical Ceiling Subtotal:  Flooring Subtotal:

Resinous Flooring Subtotal: \$



> Phone: (847) 222-1900 Fax: (847) 222-9910

> > www.Bearcc.com

### Decorating

Prep, prime, and paint new guardrails Paint exposed CMU Paint exposed gypsum board

**Decorating Subtotal:** 

### **Specialties**

No work figured; Included under carpentry number

Specialties Subtotal: \$ -

### Division 21 - Fire Suppression

### **Fire Protection**

Extend existing sprinkler system to area under new mezzanine Provide upright heads and new branch line Provide hydraulic calculations

Fire Protection Subtotal:

### Division 22 - Plumbing

### **Plumbing**

No Scope Included

Plumbing Subtotal: \$

### Division 23 - Heating, Ventilating, & Air Conditioning

### HVAC

Mechanical demolition including ductwork, grilles, diffusers, exhaust transfer grilles HVAC Ductwork

Temporary connections to HVAC system to main functional during project

Furnish and install all required grilles, registers, and diffusers

Testing and and balancing post construction

All new exhaust grilles and transfer grilles to be the same size as the existing.

Furnish and install new ductwork and supports

Coordinate with electrical to avoided lighting with new duct run

Furnish and install new transfer grilles and exhaust grilles

Extend existing ductwork to accommodate lower ceiling in storage rooms

Furnish and install duct rigid insulation

**HVAC Subtotal:** 



> Phone: (847) 222-1900 Fax: (847) 222-9910 www.Bearcc.com

### Division 26 - Electrical

### **Electrical**

### Demolition

Provide demo of existing electric - Ground/Upper Floors

Provide temp lighting - String light

Existing Fixtures & Fixture supports to be removed. Ex. Circuit downstream of existing

lighting control panel relay shall remain for reuse.

Ex. Ceiling Occupancy sensor shall removed and re-installed in new ceiling. Existing Pull

Box to remain

### Lighting

Provide & Install lighting - new (15) F1A/4/a Provide & Install lighting - new (4) F1A/4/b Provide & Install lighting - new (4) F1C/4/c Provide & Install lighting - new (4) F1C/4/c Provide & Install lighting - new (18) F1A/HP-2/c

Provide & Install lighting - new (18) F1A/HP-2/

Provide & Install lighting - new (1) F1B/HP-2/c

### **Power and Distribution**

Provide & Install GFI outlets as necessary to meet code

### Fire Alarm

Provide life safety device - Speaker Provide life safety device - Strobe

Provide time to submittal to the City of Orland Park for approval

Stamped Engineering drawings Included

Submittals of product data

F/A needs to match on what is the existing system.

Included time for inspection Orland FP District

**Electrical Subtotal:** 

### **Allowances**

### **Allowances**

\$20,000.00 Contingency Allowance

Allowances Subtotal



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DIRECT CONSTRUCTION COSTS		
PERMIT ALLOWANCE	ls	EXCLUDED
PERMIT EXPEDITOR ALLOWANCE	İs	EXCLUDED
BOND	ls	
INSURANCE	ls	
CONTRACTOR FEE	ls	

Total cost, subject to notes, clarifications, and alternates: \$ 259,240.00

### **Notes, Clarifications, & Exclusions**

### Division 1 - General Requirements

- 1 All work to be performed in a workmanlike manner by union labor during regular working hours.
- 2 Overtime/premium time is included for demolition activities, floor coring, work in occupied tenant spaces, or shutdowns of power, water or other systems that knowingly impact other occupied tenant spaces.
- This proposal is valid for 30 days from most recent date above and does not include provisions for any significant increases in wages or materials. After 30 days, proposal is subject to review.
  - Square footages and other measurements used in this proposal are for BEAR's bid purposes only and are not intended to reflect rentable numbers unless noted as such.
- 5 Provide = Furnish and install / Furnish = supply material only / Install = labor to install only
- 5 NIC = not in contract / F&I = furnish and install / FBO = furnished by others / SF = square feet / LF = lineal feet / EA = Each
- 7 Project commencement without required municipal building permits is not advised. If client advises work to commence without such permits, client shall indemnify Bear CC for any and all costs, fines or penalties incurred.
- 8 Correction of pre-existing conditions or building code violations are not included unless specifically noted within this proposal or are inherent to the work being performed.
  9
  - Schedule and completion dates are subject to supply chain issues, manufacturer lead times, shipping or other delays, labor strikes, inclement weather, or other causes beyond our control. BEAR shall make every effort to identify these risks, but items outside of our control may impact completion at no fault of BEAR.
- 10 Costs to accelerate, expedite or "quick ship" materials are not included.
- 11 Customer to provide utilities (e.g. electric service, heat, water) and restroom facilities at no cost to BEAR and its subcontractors, unless specifically noted within this proposal.
- 12 We have excluded the permit fees and/or permit expediting fees.
- 13 Building fees for elevator operator, drain down fees, security guards, base building janitorial etc. are not included unless specifically noted above. Said fees, if incurred, will be an addition to the contract amount.
- 14 Application for LEED or WELL certification is not included. If requested in advance, qualifying materials or back-up documentation required for either certification can be provided to a third party applicant.
- 15 Liquidated or consequential damages provisions are not included.
- 6 Subcontractor Default Insurance (SDI), Performance or payment bonds are not included.
- 17 Builders Risk Insurance coverage is not included.



> Phone: (847) 222-1900 Fax: (847) 222-9910

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- All applicable sales and use taxes are included above. On any tax-exempt projects, client shall provide documentation to BEAR to verify that status.
- 19 Relocating, moving or storage of existing contents (e.g. furniture, furnishings, file cabinets, equipment, etc.) in order to perform our work is not included.
- Premises will be left in a contractor's "broom clean" condition. Final/professional cleaning, including, but not limited to VCT waxing, window cleaning, etc. is not 20 included.
- 21 Costs for removal and/or disposal of debris generated by customer/tenant's vendors (e.g. cabling, furniture, security, etc.) are not included. Any BEAR labor and trash disposal fees required due to excessive discarded items by said vendors will be an add to the contract amount.
- 22 With the exception of standard subcontractor shop drawings and submittals, engineering and/or design related costs are not included.
- 23 BEAR assumes no-cost use of Architectural and MEP design drawings in CAD or similar format to provide shop drawings and as-built documents.
- 24 Third party testing of any kind is not included.
- 25 We are aware that the area will be in use while work is being performed and we will have to coordinate install with the PD.
- Proposal figured we are using existing lift at mezzanine level.
- 27 Pricing include using building restrooms at owner cost.

### **Division 2 - Demolition**

- Testing, abatement, remediation or removal of any hazardous materials (e.g. asbestos, lead, mold, etc.) is not included.
- We have not included any removal, scarifying or shot blasting of existing mastic, existing floor finish residue adhesives and/or underlayments. Such costs, if included, would be outlined within the Flooring section of this proposal.

### Division 3 - Concrete

We have included an \$2,500 allowance for coring that is shown on the S drawings.

### Division 4 - Masonry

- Field applied sealers is excluded.
- 2 Exclude chemical cleaning of CMU.

### Division 5 - Metals

- We assume we will have access through evidence garage. 1
- 2 We are aware that we will be lifting over existing work stations.
- 3 Grating will be installed using saddle clamps.
- We have quoted picket type rails as shown in the architectural drawings 4
- 5 We have excluded any coring or concrete patch per keynote #1 shown on the S1.0.

### Division 6 - Millwork

No work figured.

### Division 7 - Thermal & Moisture Protection

No work figured.

### **Division 8 - Doors and Windows**

No work figured.

### Division 9 - Finishes

- Floor preparation included above is limited to carpet and tile prep. Leveling of floors to +/- 1/4" or any other tolerances is not included. 1
- 2 If/when existing materials and finishes are being salvaged and re-used, we cannot guarantee color match of any existing finishes to new (flooring, ceiling tile, etc.) due to age, wear, and/or dye lot changes.
- Moisture testing or remediation of floor slab(s) is not included.

### **Division 10 - Specialties**

No work figured.

### Division 11 - Equipment

No work figured.

### Division 12 - Furnishings

No work figured.

### Division 21 - Fire Sprinklers

We exclude re-routing or raising of the sprinkler system main piping or branch piping to accommodate lighting or similar conflicts.

### Division 22 - Plumbing

No work figured.



1501 Rohlwing Road

Rolling Meadows, Illinois 60008-1336

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### Division 23 - HVAC

1

All existing HVAC items to be re-used are assumed to be in working order. Survey and/or repair of these items, unless specifically mentioned above, is excluded.

2 We exclude any HVAC chilled or condenser water riser cut-ins or shutdowns for new connections. We assume future valves exist at these locations.

### Division 26 - Electrical

- 1 Any existing lighting that is to be re-used or relocated is assumed functional. Unless specifically noted above, no ballast changes, relamping or LED conversions are included.
- 2 We exclude relocation of any above ceiling obstructions in relation to new light lay-out.
- 3 All existing panels/breakers are assumed to be in working order and have enough availability/space for work stated above.
- 4 Correction of pre-existing Fire Alarm system conditions or building code violations are not included unless specifically noted within this proposal
- 5 Fire alarm drawings are included but limited to the engineered drawings renditions ( Allowance \$1,000 is included).
- 6 Temp lighting and power included.
- 7 EMT conduit is figured for interior wiring branching and homeruns.
- 8 Conduit & conductor is figured fire alarm wiring.

### **Division 27 - Communications**

No work figured.

### **Division 28 - Electronic Safety and Security**

No work figured.

RESPECTFULLY SUBMITTED:

Bill Sanchez

Project Manager
BEAR CONSTRUCTION COMPANY

### Contractor's Qualification Statement

### SUBMITTED BY:

(Organization name and address.)

**BEAR Construction Company** 1501 Rohlwing Road Rolling Meadows, IL 60008

### SUBMITTED TO:

(Organization name and address.)

The Village of Orland Park 14700 S. Ravina Ave. Orland Park, IL 60462

### 2023 General Contractor of the Year - American Subcontractors Association

### TYPE OF WORK TYPICALLY PERFORMED

(Indicate the type of work your organization typically performs, such as general contracting, construction manager as constructor services, HVAC contracting, electrical contracting, plumbing contracting, or other.)

General Construction and Construction Management

### THIS CONTRACTOR'S QUALIFICATION STATEMENT INCLUDES THE FOLLOWING: (Check all that apply.)

[	X	]	Ex	hit	it	A	_ (	Ge	nei	al	I	nfoi	m	ati	on		
[	X	]	Ex	hib	oit	В	- I	Fin	an	cia	al	and	P	erf	on	ma	nce
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[ X ] Exhibit C – Project-Specific Information [ X ] Exhibit D - Past Project Experience

### ADDITIONS AND DELETIONS:

The author of this document has added information needed for its completion. The author may also have revised the text of the original AIA standard form. An Additions and Deletions Report that notes added information as well as revisions to the standard form text is available from the author and should be reviewed. A vertical line in the left margin of this document indicates where the author has added necessary information and where the author has added to or deleted from the original AIA text.

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

### CONTRACTOR CERTIFICATION

The undersigned certifies under oath that the information provided in this Contractor's Qualification Statement is true and sufficiently complete so as not to be misleading.

Ó	rganiz	ation's	Authorized	Represen	ative
-					

Information

Signature

Bill Sanchez, Vice President

Printed Name and Title

NOTARY

State of Illinois

County of Cook

My commission expires:

OFFICIAL SEAL MONICA LYN BRENNAN NOTARY PUBLIC, STATE OF ILLINOIS My Commission Expires 4/1/25

### General Information

(Paragraphs deleted)

This Exhibit is part of the Contractor's Qualification Statement, submitted by BEAR Construction Company and dated the Twenty-Sixth day of February in the year Two Thousand Twenty-Five.

(In words, indicate day, month and year.)

### § A.1 ORGANIZATION

§ A.1.1 Name and Location

§ A.1.1.1 Identify the full legal name of your organization.

**BEAR Construction Company** 

§ A.1.1.2 List all other names under which your organization currently does business and, for each name, identify jurisdictions in which it is registered to do business under that trade name.

None

§ A.1.1.3 List all prior names under which your organization has operated and, for each name, indicate the date range and jurisdiction in which it was used.

None

§ A.1.1.4 Identify the address of your organization's principal place of business and list all office locations out of which your organization conducts business. If your organization has multiple offices, you may attach an exhibit or refer to a website.

1501 Rohlwing Rd., Rolling Meadows, IL 60008 - Principal place of business

1 N. LaSalle St., Suite 2700, Chicago, IL 60602

222 W. Merchandise Mart Plaza, Suite #14-121A, Chicago, IL 60654

2 E. Bradford Dr., Bradley, IL 60915

509 S. County Fair Dr., Champaign, IL 61821

633 W. Wisconsin Ave., Suite #330, Milwaukee, WI 53203

### § A.1.2 Legal Status

§ A.1.2.1 Identify the legal status under which your organization does business, such as sole proprietorship, partnership, corporation, limited liability corporation, joint venture, or other.

BEAR Construction Company is an Illinois Corporation.

.1 If your organization is a corporation, identify the state in which it is incorporated, the date of incorporation, and its four highest-ranking corporate officers and their titles, as applicable.

State of incorporation: Illinois
Date of incorporation July 16, 1984
President: James S. Wienold

Secretary & Treasurer: George H. Wienold Executive Vice President: Scott Kurinsky

### ADDITIONS AND DELETIONS:

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.2 If your organization is a partnership, identify its partners and its date of organization.

N/A

.3 If your organization is individually owned, identify its owner and date of organization.

N/A

- .4 If the form of your organization is other than those listed above, describe it and identify its individual leaders:
- § A.1.2.2 Does your organization own, in whole or in part, any other construction-related businesses? If so, identify and describe those businesses and specify percentage of ownership.

No

### § A.1.3 Other Information

§ A.1.3.1 How many years has your organization been in business?

BEAR Construction Co. was organized 40 years ago.

§ A.1.3.2 How many full-time employees work for your organization?

As of 2/26/2025, BEAR had a total of 202 full-time employees (93 field employees and 109 office employees).

§ A.1.3.3 List your North American Industry Classification System (NAICS) codes and titles. Specify which is your primary NAICS code.

See attached List of all Codes.

BEAR's primary NAICS code is 236220: Commercial and Institutional Building Construction

§ A.1.3.4 Indicate whether your organization is certified as a governmentally recognized special business class, such as a minority business enterprise, woman business enterprise, service-disabled veteran owned small business, woman owned small business in a HUBZone, or a small disadvantaged business in the 8(a) Business Development Program. For each, identify the certifying authority and indicate jurisdictions to which such certification applies.

None

### § A.2 EXPERIENCE

- § A.2.1 Complete Exhibit D to describe up to four projects, either completed or in progress, that are representative of your organization's experience and capabilities.
- § A.2.2 State your organization's total dollar value of work currently under contract.

Approximately \$220,982,890 as of 9/30/2024

§ A.2.3 Of the amount stated in Section A.2.2, state the dollar value of work that remains to be completed:

Approximately \$94,412,830 as of 9/30/2024

§ A.2.4 State your organization's average annual dollar value of construction work performed during the last five years.

### § A.3 CAPABILITIES

§ A.3.1 List the categories of work that your organization typically self-performs.

Demolition, Carpentry, Labor, Painting

§ A.3.2 Identify qualities, accreditations, services, skills, or personnel that you believe differentiate your organization from others.

BEAR Construction Company was founded in July of 1984 by three brothers dedicated to doing quality work above all else. 40 years later, those same brothers have built a \$250-million-dollar company based on that same principle, and our family-focused culture still reflects those values. Two of those original founders remain active in our day-to-day operations and are instantly available to any client or employee to provide guidance or address any challenge. BEAR's "Client First" philosophy has allowed us to maintain repeat business from over 80% of our past clients, a figure we gauge our success by.

Our diverse team of professionals, educated and experienced in a variety of sectors, allows us to apply best practices and technology to each and every client. BEAR currently employs licensed in-house professionals to assist with architectural planning, MEP engineering and design. BEAR's full-service Estimating Department is staffed by 8 full-time individuals, each having expertise in our various work sectors, allowing us to produce accurate budgets and competitive bids. We place great value and pride in our collaborative Subcontractor relationships, based upon mutual trust, which allow us to tap into the pulse of any market at any time. Real-time pricing allows us to provide a clear and accurate cost analysis to each of our clients.

BEAR is capable of just about any project size or type. Unlike many of our competitors, we will still service a client looking for small-scale work, but we also have the expertise and ability to handle a project as large as the \$1B redevelopment of the 2.75M square foot Old Chicago Post Office. Our ability to provide competitive services, regardless of the project size, is what separates BEAR Construction Company from other General Contractors of our size and larger. Our "self-perform" trade staff of carpenters, laborers and painters also allows us to provide responsive client services that many of our competitors cannot. Continuing to service our client needs, regardless of size, has provided us with the opportunities which have made BEAR Construction Company what it is today.

§ A.3.3 Does your organization provide design collaboration or pre-construction services? If so, describe those services.

BEAR Construction provides pre-construction services for a majority of our negotiated General Conditions & Fee (GC & Fee) based contracts and all of our Integrated Project Delivery (IPD) clients. Our services are tailor made to each individual client and include:

- Evaluation of existing site and or building conditions
- Thorough constructability review of design documents with the assistance of our in-house architectural & MEP engineering specialists
- Preliminary project scheduling identifying critical path, long lead items, etc.
- Assembly of early design assist packages for long lead items.
- Schematic design and design development cost studies, with cost-tracking comparisons.
- Collaboration with qualified subcontracting partners for real time current market cost solutions
- Evaluation of cost saving and value engineering options.

§ A.3.4 Does your organization use building information modeling (BIM)? If so, describe how your organization uses BIM and identify BIM software that your organization regularly uses.

BEAR Construction Company utilizes the BIM 360 Glue system. BIM technology is typically used on our larger and more complex projects, or with clients who require enhanced coordination. Utilizing Revit models provided by the design professionals, we are able to lay out, pre-plan and collaborate with our prime subcontractor partners prior to the start of actual construction, reducing cost, shortening schedules, and identifying potential constructability challenges. Contractors realize savings in fabrication and field installation time, which drives costs down and compresses the overall schedule to the client's benefit. The end results are lower construction costs, on-time deliveries and streamlining of the entire process.

§ A.3.5 Does your organization use a project management information system? If so, identify that system.

We have primary capabilities with Viewpoint, Procore, Fieldwire and Submittal Exchange with many team members having experience with other platforms hosted by the design or owner's team on a project, such as Procore and Newforma. BEAR is capable of working within any desired platform.

### § A.4 REFERENCES

§ A.4.1 Identify three client references:

Lori J. Olson, RPA	Richard Roehr, MBA CHFM	Bryan L. Oyster, LEED
Vice President - Zeller Realty Group	President / CEO - AMITA Mercy	Senior Vice President and General
401 N Michigan Avenue, Suite 250	Medical Center	Manager - Jones Lang LaSalle
Chicago, IL 60611	1325 N. Highland Avenue	433 W. Van Buren Street, Ste. 280
(312) 640-7611	Aurora, IL 60506	Chicago IL 60607
lolson@zellerrealty.com	(630) 859-2222	Mobile: 630-408-1441
	richard.roehr@amitahealth.org	bryan.oyster@am.jll.com

### § A.4.2 Identify three architect references:

V.P.Trinh	Michael Eichhorn	Carrie Matlock
Principal	Wold Architects & Engineers	President – DLA Architects
ARCON & Associates	110 N Brockway St	2 Pierce Pl
2050 S. Finley Rd	Suite 220	Suite 1300
Lombard, IL 60148	Palatine, IL 60067	Itasca, IL 60143
630-495-1900	847-241-6100	847-742-4063
vptrinh@arconassoc.com	meichhorn@woldae.com	c.matlock@dla-ltd.com

### § A.4.3 Identify one bank reference:

(Insert name, organization, and contact information)

BMO Harris Bank, 111 W. Monroe St., Chicago, IL 60603 - Attn: Bilal Rathore

§ A.4.4 Identify three subcontractor or other trade references:

Shaun Corcoran	Bill Preston	Karen Barba
SRC Electric, LLC	Senior Vice President - International	Katco Development, Inc.
360 Bennett Rd	Decorators, Inc.	415 S. Williams St
Elk Grove Village, IL 60007	28059 W Commercial Avenue	Mount Prospect, IL 60056
847-258-4400	Barrington, IL 60010	847-222-9662
Shaun@SRCElectric.com	(847) 526-7477	karen@katcodevelopment.com
	bpreston@4idi.com	

(Paragraphs deleted)

### Attachment to Exhibit A - Part A.1.3.3



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### **NAICS CODES**

NAICS Code	NAICS Title
236210	Industrial Building Construction
236220	Commercial and Institutional Building Construction
237110	Water and Sewer Line and Related Structures Construction
237120	Oil and Gas Pipeline and Related Structures Construction
237130	Power and Communication Line and Related Structures Construction
237990	Other Heavy and Civil Engineering Construction
238110	Poured Concrete Foundation and Structure Contractors
238120	Structural Steel and Precast Concrete Contractors
238130	Framing Contractors
238140	Masonry Contractors
238150	Glass and Glazing Contractors
238160	Roofing Contractors
238170	Siding Contractors
238190	Other Foundation, Structure, and Building Exterior Contractors
238210	Electrical Contractors
238220	Plumbing, Heating, and Air-Conditioning Contractors
238290	Other Building Equipment Contractors
238310	Drywall and Insulation Contractors
238320	Painting and Wall Covering Contractors
238330	Flooring Contractors
238340	Tile and Terrazzo Contractors
238350	Finish Carpentry Contractors
238390	Other Building Finishing Contractors
238910	Site Preparation Contractors
238990	All Other Specialty Trade Contractors
541350	Building Inspection Services
561210	Facilities Support Services

### Financial and Performance Information

This Exhibit is part of the Contractor's Qualification Statement, submitted by BEAR Construction Company and dated the Twenty-Sixth day of February in the year Two Thousand Twenty-Five.

(In words, indicate day, month and year.)

### § B.1 FINANCIAL

§ B.1.1 Federal tax identification number:

36-3351654

§ B.1.2 Attach financial statements for the last three years prepared in accordance with Generally Accepted Accounting Principles, including your organization's latest balance sheet and income statement. Also, indicate the name and contact information of the firm that prepared each financial statement.

This information will be provided upon receipt of an executed Non-Disclosure Agreement prepared by BEAR Construction Company.

§ B.1.3 Has your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management, been the subject of any bankruptcy proceeding within the last ten years?

No

§ B.1.4 Identify your organization's preferred credit rating agency and identification information.

(Identify rating agency, such as Dun and Bradstreet or Equifax, and insert your organization's identification number or other method of searching your organization's credit rating with such agency.)

BEAR's Dun and Bradstreet # is 147526743.

### § B.2 DISPUTES AND DISCIPLINARY ACTIONS

§ B.2.1 Are there any pending or outstanding judgments, arbitration proceedings, bond claims, or lawsuits against your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management, or any of the individuals listed in Exhibit A, Section 1.2, in which the amount in dispute is more than \$75,000? (If the answer is yes, provide an explanation.)

None.

§ B.2.2 In the last five years has your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management: (If the answer to any of the questions below is yes, provide an explanation.)

- .1 failed to complete work awarded to it? No
- 2 been terminated for any reason except for an owners' convenience?

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No

- had any judgments, settlements, or awards pertaining to a construction project in which your organization was responsible for more than \$75,000?
- filed any lawsuits or requested arbitration regarding a construction project? .4
- § B.2.3 In the last five years, has your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management; or any of the individuals listed in Exhibit A Section 1.2:

(If the answer to any of the questions below is yes, provide an explanation.)

- been convicted of, or indicted for, a business-related crime? Νo
- had any business or professional license subjected to disciplinary action?
- been penalized or fined by a state or federal environmental agency? .3

2

### **Project Specific Information**

This Exhibit is part of the Contractor's Qualification Statement, submitted by BEAR Construction Company and dated the Twenty-Sixth day of February in the year Two Thousand Twenty-Five.

(In words, indicate day, month and year.)

### PROJECT:

(Name and location or address.) Multiple Projects and Locations

### CONTRACTOR'S PROJECT OFFICE:

(Identify the office out of which the contractor proposes to perform the work for the Project.)

Rolling Meadows, Illinois

### TYPE OF WORK SOUGHT

(Indicate the type of work you are seeking for this Project, such as general contracting, construction manager as constructor, design-build, HVAC subcontracting, electrical subcontracting, plumbing subcontracting, etc.)

General Contracting and Construction Management

### CONFLICT OF INTEREST

Describe any conflict of interest your organization, its parent, or a subsidiary, affiliate, or other entity having common ownership or management, or any of the individuals listed in Exhibit A Section 1.2, may have regarding this Project.

None

### § C.1 PERFORMANCE OF THE WORK

§ C.1.1 When was the Contractor's Project Office established?

BEAR Construction headquarters were relocated to its current Rolling Meadows location in 2002.

§ C.1.2 How many full-time field and office staff are respectively employed at the Contractor's Project Office?

> As of 2/26/2025, BEAR had a total of 202 full time employees (93 field employees and 109 office employees).

§ C.1.3 List the business license and contractor license or registration numbers for the Contractor's Project Office that pertain to the Project.

City of Chicago General Contractor's License No. TGC04174

§ C.1.4 Identify key personnel from your organization who will be meaningfully involved with work on this Project and indicate (1) their position on the Project team, (2) their office

### ADDITIONS AND DELETIONS:

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location, (3) their expertise and experience, and (4) projects similar to the Project on which they have worked.

Please reference the Project Team section in our companion Responses to the RFP.

§ C.1.5 Identify portions of work that you intend to self-perform on this Project.

BEAR may provide Demolition, labor, carpentry, & painting services on this project.

§ C.1.6 To the extent known, list the subcontractors you intend to use for major portions of work on the Project.

BEAR has not finalized the Subcontractors it would use for major portions of the Project.

### § C.2 EXPERIENCE RELATED TO THE PROJECT

§ C.2.1 Complete Exhibit D to describe up to four projects performed by the Contractor's Project Office, either completed or in progress, that are relevant to this Project, such as projects in a similar geographic area or of similar project type. If you have already completed Exhibit D, but want to provide further examples of projects that are relevant to this Project, you may complete Exhibit E.

§ C.2.2 State the total dollar value of work currently under contract at the Contractor's Project Office:

\$220,982,889.80 as of 9/30/2024

§ C.2.3 Of the amount stated in Section C.2.2, state the dollar value of work that remains to be completed:

\$94,412,828.87 as of 9/30/2024

§ C.2.4 State the average annual dollar value of construction work performed by the Contractor's Project Office during the last five years.

2019-2023: \$203,437,006

§ C.2.5 List the total number of projects the Contractor's Project Office has completed in the last five years and state the dollar value of the largest contract the Contractor's Project Office has completed during that time.

Number of Projects: 5,423 Largest Project: \$34,646,195.07 dated 4/30/2021 Post Office – Bid Package HVAC Old Post Office 404 W. Harrison Street, Chicago, IL

### § C.3 SAFETY PROGRAM AND RECORD

§ C.3.1 Does the Contractor's Project Office have a written safety program?

Yes

§ C.3.2 List all safety-related citations and penalties the Contractor's Project Office has received in the last three years.

None

§ C.3.3 Attach the Contractor's Project Office's OSHA 300a Summary of Work-Related Injuries and Illnesses form for the last three years.

OSHA Form 300A Summary dated January 19, 2024 is attached.

§ C.3.4 Attach a copy of your insurance agent's verification letter for your organization's current workers' compensation experience modification rate and rates for the last three years.

Assurance Agency letter dated September 18, 2024 is attached.

### § C.4 INSURANCE

§ C.4.1 Attach current certificates of insurance for your commercial general liability policy, umbrella insurance policy, and professional liability insurance policy, if any. Identify deductibles or self-insured retentions for your commercial general liability policy.

Proof of Insurance Certificate dated July 9, 2024 is attached.

§ C.4.2 If requested, will your organization be able to provide property insurance for the Project written on a builder's risk "all-risks" completed value or equivalent policy form and sufficient to cover the total value of the entire Project on a replacement cost basis?

Yes.

§ C.4.3 Does your commercial general liability policy contain any exclusions or restrictions of coverage that are prohibited in AIA Document A101-2017, Exhibit A, Insurance A.3.2.2.3? If so, identify.

No.

### § C.5 SURETY

§ C.5.1 If requested, will your organization be able to provide a performance and payment bond for this Project?

Yes.

§ C.5.2 Surety company name:

Zurich American Insurance Co.

§ C.5.3 Surety agent name and contact information:

Aon Agency 200 E. Randolph St. Chicago, IL 6060 I Attn: Brian McTaggart

Email: Brian.McTaggart@aon.com

Direct #: 312-381-4587

§ C.5.4 Total bonding capacity:

\$200,000,000

§ C.5.5 Available bonding capacity as of the date of this qualification statement:

\$165,000,000

### Attachment to Exhibit C - Part C.3.3



### THREE YEAR TRIR/DART Information

BEAR CC TRIR/DART	2021	2022	2023
Total Hours Worked	355,345	283,336	382,003
Total Number of Employees	191	197	212
Total Recordable Cases	1	0	0
Lost Workday Cases	1	0	0
Transfer/Restricted Cases	0	0	0
TRIR	.58	0	0
DART	.58	0	0

Please see the OSHA Logs from the above years for supporting information.

Should you have any questions please do not hesitate to contact me directly.

Monica L. Brennan Workers Compensation & Safety Coordinator | PHR, SHRM-CP

mbrennan@beacc.com

**BEAR** Construction Company

1501 Rohlwing Road, Rolling Meadows, IL 60008

847-421-5845 cell | 847-704-1794 direct

BEAR

Legal Disclaimer

www.bearcc.com

# OSHA's Form 300A (Rev. 04/2004)

# Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it. Because the forms in this recordkeeping package are "fillable/writable". PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

Year 2021

U.S. Department of Labor

Form opproved OMB no. 1218-0176 Occupational Safety and Health Administration

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Employees, farmer employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for every page of the Log. If you had no cases, write "0.

these forms.

Number of Cases	ses		· - 李
Total number of leaths	Total number of cases with days	Total number of cases with job transfer or	Total number of other recordable
	away from work	restriction	cases
0	त्	0	0
(a)	£	(i)	(r)
Number of Days	s/		

Total number of days	Total number of days of	
away from work	job transfer or restriction	
000	0	
\$	(1)	
Injury and Illness Types		

0	0	0	
(4) Poisonings	(5) Hearing loss	(6) All other illnesses	
4	0	0	
Total number of (M) (1) Injuries	(2) Skin disorders	(3) Respiratory conditions	

Public reporting burden for this collection of information is estimated to average 58 minutes par response, including thur to review the instructions, search and gather do data needed, and complete and average for information and information and information with COMB current lamibles. If you have any communes about these estimates or any other apprets of this data collecting, contact US Departures of Labor. OSHA Office of Sartistical Archysis, Room N-36-44, 200 Constitution Avenue, NW. Wathington, DC 20210. Do not send the completed forms to this office. Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Reset

Date 1/27/2022

Phone 847/222-1900

North American Industrial Classification (NAICS), if known (e.g., 336212) certify that I have examined this document and that to the best of Zip 60504 greenate, and complete. Employment information (If you don't have these figures, see the Bear Construction Company Knowingly falsifying this document may result in a fine. Industry description (e.g., Manufacture of motor truck trailers) 355,345,00 191 General Contractor, Construction, ᆗ Total hours worked by all employees last year State Worksheer on the next page to astimate.) Street 1501 Rohlwing Road Annual average number of employees Establishment information City Rolling Meadows Campany executive Your astablishment name 236220 moświedge Sign here

# OSHA's Form 300A (Rev. 04/2004)

# Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
Because the forms in this recordkeeping package are "fillable/writable."
PDF documents, you can type into the Input form fields and then save your inputs using the free Adobe PDF Reader.

Year 20 22

Occupational Safety and Health Administration Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases	ses		
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(9)	Œ	(1)	(ר)
Number of Days	ys ~		
Total number of days away from work		Total number of days of job transfer or restriction	
0		0	
(K)		(ר)	
Injury and Illness Types	ess Types		
Total number of (M)	j		29
(1) Injuries	0	(4) Poisonings	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

(5) Hearing loss(6) All other illnesses

(3) Respiratory conditions

0 0

(2) Skin disorders

Reset

Public reporting burden for this collection of information is estimated to average \$8 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are required to respond to the collection of information unless it displays a currently valid OMB control number, If you have any comments about these estimates or any other raperes of this data collection, contact. US Department of Labor, OSHA Office of Satistical Analysis, Room N-36-44, 300 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information  Your establishment name BEAR CONSTRUCTION COMPANY  Street 1501 ROHLWING ROAD	City ROLLING MEADOWS State IL Zip 60008	Industry description (e.g., Manufacture of mator truck trailers) CONSTRUCTION - GENERAL CONTRACTOR	North American Industrial Classification (NAICS), if known (e.g., 336212)	Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)	Annual average number of employees	Total hours worked by all employees last year	Sign here	Knowingly falsifying this document may result in a fine.	I certify that I have examined this document and that to the best of my knowledge the diffics and true accurate, and complete.  Company executive  Company executive  Page 17/222-1900  Date 01/13/2023	COLUMN TO THE PROPERTY OF THE
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# OSHA'S Form 300A (Rev. 04/2004)

# Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
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Year 20<sub>23</sub>

U.S. Department of Labor Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0." Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases	ses		
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(9)	(H)	(1)	(7)
Number of Days	s/		
Total number of days away from work		Total number of days of job transfer or restriction	
0		0	
(X)		(L)	

(6) All other illnesses (5) Hearing loss (4) Poisonings 0 0 0 Injury and Illness Types (3) Respiratory conditions Total number of . . (2) Skin disorders (1) Injuries

0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

0

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information because are not required to respond to the collection of information trainers are currently valid OMB control number, If you have any comments about these estimates or any other aspects of this data collection, connect; US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

	Company		Zip 60008	nck trailers) Management	, if known (e.g., 336
Establishment information	Your ostablishment name Bear Construction Company	Street 1501 Rohlwing Road	City Rolling Meadows State IL	Industry description (e.g., Manufacture of motor track trailers) General Contractor - Construction Management	North American Industrial Classification (NAICS), if known (e.g., 336

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.

336212)

212 Annual average number of employees

382,003.00 Total hours worked by all employees last year

Sign here

Knowingly falsifying this document may result in a fine.

certify that I have examined this document and that to the best of OFFO my knowledge the entries are true, accurate, and complete.

Date 01/19/2024 Phone 847-222-1900 Company executive

Reset



September 18, 2024

Bear Construction Company 1501 Rohlwing Road Rolling Meadows, IL 60008

RE: Experience Modification Rating Factor

To Whom it May Concern

Please let this letter serve as verification that your current Experience Modification Rating Factor is as follows:

Dates	Experience Modification Factor		
1/1/2021	.68		
1/1/2022	.70		
1/1/2023	.81		
1/1/2024	.66		
1/1/2025	.58		

If you have any questions, please do not hesitate to contact us.

Sincerely,

### SHARON PANOS, AIS, AINS, CRIS

Senior Client Service Representative
+1 847 908 8714
20 N. Martingale Road, Suite 100 | Schaumburg, IL | 60173
Sharon.Panos@MarshMMA.com | MarshMMAMidwest.com
Follow us on: LinkedIn | Twitter | Facebook | Instagram



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# Addenda to C.4.1 CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 7/9/2024

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).

20 North Martingale Road		CONTACT Sharon Panos  PHONE (A/C. No. Ext): (847) 908-8714  E-MAIL ADDRESS: Sharon.Panos@MarshMMA.com			
		INSURER(S) AFFORDING COVERAGE	NAIC#		
		INSURER A: Amerisure Partners Insurance C	11050		
Bear Construction Company 1501 Rohlwing Road		INSURER B: Amerisure Insurance Company	19488		
		INSURER c : Travelers Property Casualty Co	25674		
Rolling Meadows IL 60008-		INSURER D : Continental Casualty Co	20443		
		INSURER E :			
		INSURER F:			
COVERAGES	CERTIFICATE NUMBER: 353113306	REVISION NU	MBER:		

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.

INSR LTR	TYPE OF INSURANCE	ADDL S	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)		S
Α	X COMMERCIAL GENERAL LIABILITY		GL21194180305	7/1/2024	7/1/2025	EACH OCCURRENCE	\$ 2,000,000
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$1,000,000
						MED EXP (Any one person)	\$ 10,000
						PERSONAL & ADV INJURY	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$4,000,000
	POLICY X PRO- X LOC					PRODUCTS - COMP/OP AGG	\$4,000,000
	OTHER:	-					\$
Α	AUTOMOBILE LIABILITY		CA21194220305	7/1/2024	7/1/2025	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	X ANY AUTO OWNED SCHEDULED					BODILY INJURY (Per person)	\$
	AUTOS ONLY AUTOS					BODILY INJURY (Per accident)	\$
	X HIRED AUTOS ONLY X NON-OWNED AUTOS ONLY					PROPERTY DAMAGE (Per accident)	\$
						2000 COUNTY OF STREET S	\$
ВС	X UMBRELLA LIAB X OCCUR		CU21194200301 EX3Y99435224NF	7/1/2024 7/1/2024	7/1/2025 7/1/2025	EACH OCCURRENCE	\$ 25,000,000
	EXCESS LIAB CLAIMS-MADE		and red total mil	11112024	77172023	AGGREGATE	\$25,000,000
	DED X RETENTION \$ 0						\$
Α	AND EMPLOYERS' LIABILITY Y/N		WC21194210305	7/1/2024	7/1/2025	X PER OTH-	
	ANYPROPRIETOR/PARTNER/EXECUTIVE Y OFFICER/MEMBER EXCLUDED?	N/A				E.L. EACH ACCIDENT	\$1,000,000
	(Mandatory in NH)  If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$1,000,000
В	Crime (Employee Theft) Leased & Rented		6052488726 IM2119419	7/1/2024 7/1/2024	7/1/2025 7/1/2025	Limit Limit	\$1,000,000 \$50,000
DESC	COUNTING OF OPERATIONS // OCATIONS ///EURO						

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

Professional/Pollution Liability - Carrier: Pacific Insurance Company, Ltd. - Policy Period: 7/1/2024-7/1/2025 - Policy #83CPIEB5075 - Limits Each Occ/Agg: \$5,000,000 NAIC #10046

Cyber - Carrier: Travelers Excess and Surplus Lines Co. - Policy Period: 7/1/2024-7/1/2025 - Policy #CYB10794587501 - Limit \$1,000,000 Claims made/Agg NAIC \$29396

Workers Compensation and Employers' Liability: Any Proprietor/Partner/Executive Officer/Member, as listed on the policy, is excluded.

See Attached...

CERTIFICATE HOLDER	CANCELLATION		
Sample Sample Chicago IL 60008	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		
	Lisse To Gale		

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	, cent	OV OLIOTOUED ID.	
	AGEN	CY CUSTOMER ID:	the state of the s
ACORD® ADDITIONAL	L REMA	RKS SCHEDULE	Page 1 of 1
AGENCY Marsh & McLennan Agency LLC		NAMED INSURED Bear Construction Company 1501 Rohlwing Road Rolling Meadows IL 60008-	
POLICY NUMBER		Rolling Meadows IL 60008-	
CARRIER	NAIC CODE	EFFECTIVE DATE:	
ADDITIONAL REMARKS			
THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACC FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF	<mark>ord Form,</mark> F Liability II	NSURANCE	
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Proof of Insurance Only.			

ACORD 101 (2008/01)

### THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# CONTRACTOR'S BLANKET ADDITIONAL INSURED ENDORSEMENT FORM A

This endorsement modifies insurance provided under the following:

### COMMERCIAL GENERAL LIABILITY COVERAGE PART

Policy Number GL21194180005	Agency Number 0295855	Policy Effective Date 1/1/2024 Account Number	
Policy Expiration Date 1/1/2025	Date		
Named Insured  Bear Construction Company	Agency ASSURANCE AGENCY, LTD	Issuing Company AMERISURE INSURANCE COMPANY	

- a. SECTION II WHO IS AN INSURED is amended to add as an additional insured any person or organization:
  - (1) Whom you are required to add as an additional insured on this policy under a written contract or written agreement relating to your business; or
  - (2) Who is named as an additional insured under this policy on a certificate of insurance,
  - b. The written contract, written agreement, or certificate of insurance must:
    - (1) Require additional insured status for a time period during the term of this policy; and
    - (2) Be executed prior to the "bodily injury", "property damage", or "personal and advertising injury" leading to a claim under this policy.
  - c. If, however:
    - (1) "Your work" began under a letter of intent or work order; and
    - (2) The letter of intent or work order led to a written contract or written agreement within 30 days of beginning such work; and
    - (3) Your customer's customary contracts require persons or organizations to be named as additional insureds:

we will provide additional insured status as specified in this endorsement.

- 2. The insurance provided under this endorsement is limited as follows:
  - **a.** That person or organization is an additional insured only with respect to liability caused, in whole or in part, by:
    - (1) Premises you:
      - (a) Own;
      - (b) Rent:
      - (c) Lease; or
      - (d) Occupy;
    - (2) Ongoing operations performed by you or on your behalf. Ongoing operations does not apply to "bodily injury" or "property damage" occurring after:

- (a) All work to be performed by you or on your behalf for the additional insured(s) at the site of the covered operations is complete, including related materials, parts or equipment (other than service, maintenance or repairs); or
- **(b)** That portion of "your work" out of which the injury or damage arises is put to its intended use by any person or organization other than another contractor working for a principal as a part of the same project.
- (3) Completed operations coverage, but only if:
  - (a) The written contract, written agreement, or certificate of insurance requires completed operations coverage or "your work" coverage; and
  - **(b)** This coverage part provides coverage for "bodily injury" or "property damage" included within the "products-completed operations hazard".

However, the insurance afforded to such additional insured only applies to the extent permitted by law.

- **b.** If the written contract, written agreement, or certificate of insurance:
  - Requires "arising out of" language; or
  - (2) Requires you to provide additional insured coverage to that person or organization by the use of either or both of the following:
    - (a) Additional Insured Owners, Lessees or Contractors Scheduled Person Or Organization endorsement CG 20 10 10 01; or
    - (b) Additional Insured Owners, Lessees or Contractors Completed Operations endorsement CG 20 37 10 01:

then the phrase "caused, in whole or in part, by" in paragraph 2.a. above is replaced by "arising out of".

- **c.** If the written contract, written agreement, or certificate of insurance requires you to provide additional insured coverage to that person or organization by the use of:
  - (1) Additional Insured Owners, Lessees or Contractors Scheduled Person Or Organization endorsement CG 20 10 07 04 or CG 20 10 04 13; or
  - (2) Additional Insured Owners, Lessees or Contractors Completed Operations endorsement CG 20 37 04 or CG 20 37 04 13; or
  - (3) Both those endorsements with either of those edition dates; or
  - (4) Either or both of the following:
    - (a) Additional Insured Owners, Lessees or Contractors Scheduled Person Or Organization endorsement CG 20 10 without an edition date specified; or
    - (b) Additional Insured Owners, Lessees or Contractors Completed Operations endorsement CG 20 37 without an edition date specified;

then paragraph 2.a. above applies.

- **d.** Premises, as respects paragraph **2.a.(1)** above, include common or public areas about such premises if so required in the written contract or written agreement.
- e. Additional insured status provided under paragraphs 2.a.(1)(b) or 2.a.(1)(c) above does not extend beyond the end of a premises lease or rental agreement.
- f. The limits of insurance that apply to the additional insured are the least of those specified in the:
  - (1) Written contract;
  - (2) Written agreement:
  - (3) Certificate of insurance; or
  - (4) Declarations of this policy.

The limits of insurance are inclusive of and not in addition to the limits of insurance shown in the Declarations.

- g. The insurance provided to the additional insured does not apply to "bodily injury", "property damage", or "personal and advertising injury" arising out of an architect's, engineer's, or surveyor's rendering of, or failure to render, any professional services, including but not limited to:
  - (1) The preparing, approving, or failing to prepare or approve:
    - (a) Maps;
    - (b) Drawings;
    - (c) Opinions;
    - (d) Reports;
    - (e) Surveys;
    - (f) Change orders;
    - (g) Design specifications; and
  - (2) Supervisory, inspection, or engineering services.
- h. SECTION IV COMMERCIAL GENERAL LIABILITY CONDITIONS, paragraph 4. Other Insurance is deleted and replaced with the following:
  - 4. Other Insurance.

Coverage provided by this endorsement is excess over any other valid and collectible insurance available to the additional insured whether:

- a. Primary:
- b. Excess;
- c. Contingent; or
- d. On any other basis;

but if the written contract, written agreement, or certificate of insurance requires primary and non-contributory coverage, this insurance will be primary and non-contributory relative to other insurance available to the additional insured which covers that person or organization as a Named Insured, and we will not share with that other insurance.

i. If the written contract, written agreement, or certificate of insurance as outlined above requires additional insured status by use of CG 20 10 11 85, then the coverage provided under this CG 70 48 endorsement does not apply except for paragraph 2.h. Other Insurance. Additional insured status is limited to that provided by CG 20 10 11 85 shown below and paragraph 2.h. Other Insurance shown above.

## ADDITIONAL INSURED - OWNERS, LESSEES OR CONTRACTORS (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

### **SCHEDULE**

**Name of Person or Organization:** Blanket Where Required by Written Contract, Agreement, or Certificate of Insurance that the terms of CG 20 10 11 85 apply

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you.

CG 20 10 11 85 Copyright, Insurance Services Office, Inc., 1984





### Contractor's Past Project Experience

	1	2	3	4
PROJECT NAME	Congregation of St. Joseph	The Old Chicago Post Office	Gartner, Inc.	Sinch
PROJECT LOCATION	1515 W Ogden Avenue LaGrange Park, IL	433 W VanBuren Street, Chicago, IL	350 N Orleans Chicago, IL	1 N Wacker Drive Chicago, IL
PROJECT TYPE	New Construction	New Construction - Adaptive Reuse	Interior Buildout	Interior Buildout
OWNER	Congregation of St. Joseph	601W	Gartner, Inc.	Sinch
ARCHITECT	Hoffman Architects	Gensler	HDK	Nelson
CONTRACTOR'S PROJECT EXECUTIVE	Victor Senese - Vice President	Dennis Hill - Sr. Vice President	Tom Kosogof - Vice President	Jack Kammerer - Project Executive
KEY PERSONNEL (include titles)	Tom Schlueter - Senior Project Manager	Stephen Hoelter, Project Executive	Gianna Scarsella - Assistant Project Manager	Ryan Robinson - Project Manager
PROJECT DETAILS	Contract Amount \$15 million	Contract Amount \$380 million	Contract Amount \$8.8 million	Contract Amount \$3.9 million
	Completion Date 2017	Completion Date 2020	Completion Date 2018	Completion Date 2022
	% Self-Performed Work 15%	% Self-Performed Work	% Self-Performed Work 5%	% Self-Performed Work 5%
PROJECT DELIVERY METHOD	☐ Design-bid-build ☐ Design-build ☐ CM constructor ☐ CM advisor ☐ Other:	□ Design-bid-build     □ Design-build     □ CM constructor     □ CM advisor     □ Other:	☐ Design-bid-build ☐ Design-build ☐ CM constructor ☐ CM advisor ☒ Other: General Contractor	☐ Design-bid-build ☐ Design-build ☐ CM constructor ☐ CM advisor ☒ Other: General Contractor
SUSTAINABILITY CERTIFICATIONS	NA	LEED PLATINUM	NA	NA