

VILLAGE OF ORLAND PARK  
14700 Ravinia Avenue  
Orland Park, IL 60462

VILLAGE CLERK'S OFFICE

Subject: PURCHASE OF POOL PUMPS

Date: 2/24/2012

Present: Cathy Zuro (Clerk's) Denise Domalewski (Finance)

Time: 12:00:00 PM

| Bid Submitted By                       | Address  | Telephone      | Amount of Bid | Bid Security Deposit |
|--|--|----------------|---------------|----------------------|
| Controlled Environmental Systems, Inc. | 16308 S. 107th Avenue, Suite 12<br>Orland Park, IL 60467 | (708) 460-6333 | SEE ATTACHED  | N/A                  |

Notes:

Village Manager Grimes (Summary Sheet Only)  
Denise Domalewski  
Frank Stec

Village Clerk: David P Maher  
Date: 2/24/2012

**BIDDER SUMMARY SHEET**

Pool Pumps  
Project Name

IN WITNESS WHEREOF, the parties hereto have executed this Bid as of date shown below.

Firm Name: Controlled Environmental Systems, Inc.

Address: 16308 S. 107th Avenue, Suite 12

City, State, Zip Code: Orland Park, IL 60467

Contact Person: Carol J. Simadis

FEIN #: 36-3642957

Phone: (708) 460-6333 Fax: (708) 460-6377

E-mail Address: contenvs@aol.com

**RECEIPT OF ADDENDA:** The receipt of the following addenda is hereby acknowledged:

Addendum No. \_\_\_\_\_, Dated \_\_\_\_\_, Addendum No. \_\_\_\_\_, Dated \_\_\_\_\_

| ITEM                 | Cost of Pump Only | Cost with Installation |
|----------------------|-------------------|------------------------|
| VIT-FFFM Size 12FDLC | \$ 19,525.00      | \$ 22,525.00           |
| VIT-FFFM Size 14RHMC | \$ 21,750.00      | \$ 24,750.00           |
| VIT-FFFM Size 10LHC  | \$ 15,800.00      | \$ 18,800.00           |

Delivery Time: 6-8 weeks number of days from order date.

Signature of Authorized Signee: Carol J. Simadis, President

Title: President Date: 8/24/10

**BID CERTIFICATION SHEETS SUMMARY**

Bid Opening Date: 2.24.12

For: Purchase of Pool Pumps

| BIDDER NAMES >>>>>>  | Controlled Environmental Systems |  |   |  |
|--|----------------------------------|--|---|--|
| Bidder Summary Sheet   | ✓                                |  | ✓ |  |
| Business Organization  | ✓                                |  |   |  |
| Certificate of Eligibility   | ✓                                |  |   |  |
| Equal Employment Opportunity                                       | ✓                                |  |   |  |
| Certification of Compliance with IL Prevailing Wage Act            | ✓                                |  |   |  |
| Contractors Certification Sexual Harassment, Tax & Substance Abuse | V1                               |  |   |  |
| Apprenticeship & Training Program Certification (Not Required)     | ✓                                |  |   |  |
| References   | ✓                                |  |   |  |
| Insurance Requirements   | ✓                                |  |   |  |
| Bid Bond   | N/A                              |  |   |  |

\*A check mark in the box indicates inclusion of the required form with the proposal package. A "V#" indicates a variance that will be explained below.

**VARIANCE EXPLANATIONS:**

V1 - did not complete #3 - Drug and Alcohol Testing Program.

NOTE: If the potential recommended bidder had any variances, please verify with the Contract Administrator that they are not material variances prior to recommendation to your committee.