Release Summary Sheet

Contract (PO) Number: 15036

Release Number: 6

Specification Number: 51701

Name of Contractor: FHP TECTONICS CORP.

City Department: DEPT OF GENERAL SERVICES

Title of Contract: DEPT. OF GENERAL SERVICES-JOB ORDER CONTRACT REHABILITATION OF CITY FACILITIES

Dollar Amount of Release: $209,114.57

Release Description: GENERAL CONSTRUCTION-PUBLIC WORKS RELATED

Procurement Services Contact Person: LYLIANIS RODRIGUEZ

Vendor Number: 50067181
Submission Date:
CITY OF CHICAGO
BLANKET RELEASE

SUBJECT TO SUBCONTRACTOR CERTIFICATION
Furnish the supplies and/or services described below in conformance with conditions set forth herein and in your offer

<table>
<thead>
<tr>
<th>RELEASE DATE</th>
<th>PURCHASE ORDER</th>
<th>RELEASE NUMBER</th>
<th>SPECIFICATION NUMBER</th>
<th>VENDOR NUMBER</th>
<th>SITE NAME</th>
<th>DELIVERY DATE</th>
<th>PAGE NUMBER</th>
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<tbody>
<tr>
<td>5/6/2008</td>
<td>15036</td>
<td>6</td>
<td>51701</td>
<td>50067181</td>
<td>A</td>
<td></td>
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DELIVER TO: 38-038
038-0030
30 N. LA SALLE ST.
ROOM 3700
Chicago, IL 60602-2500

ORDERED FROM:
FHP TECTONICS CORP.
8725 W. HIGGINS ROAD
CHICAGO, IL 60631

DELIVERY CHARGES to be PREPAID
TITLE TO PASS ON DELIVERY

CONTACT: 742-3987

PO DESCRIPTION: DEPT. OF GENERAL SERVICES-JOB ORDER CONTRACT REHABILITATION OF CITY FACILITIES

BLANKET RELEASE

THIS SIGNED RELEASE IS YOUR AUTHORITY TO FURNISH THE SPECIFIED SUPPLIES AND/OR SERVICES IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE BLANKET AGREEMENT NUMBER: 15036

THIS PURCHASE IS FOR DEPARTMENT: 38 - DEPT. OF GENERAL SERVICES

SUBMIT THE ORIGINAL INVOICE TO:

<table>
<thead>
<tr>
<th>PO Line</th>
<th>Ship Line</th>
<th>COMMODITY INFORMATION</th>
<th>QUANTITY</th>
<th>UOM</th>
<th>UNIT COST</th>
<th>TOTAL COST</th>
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<td>1</td>
<td>99842</td>
<td>209,114.57</td>
<td>USD</td>
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<td>209,114.57</td>
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GENERAL CONSTRUCTION-PUBLIC WORKS RELATED

FHP-08-013A; LAKEVIEW CLINIC; Q-8-004; ANDROS; NO CIP

<table>
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<tr>
<th>Dist</th>
<th>BFY</th>
<th>FUND</th>
<th>COST CTR</th>
<th>APPR</th>
<th>ACCNT</th>
<th>ACTV</th>
<th>PROJECT</th>
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</table>

SHIPMENT TOTAL: 209,114.57

RELEASE TOTAL: 209,114.57

APPROVAL:

SIGNATURE DATE SIGNATURE DATE

Payment on this order will be made upon receipt of an original vendor invoice form referencing this order.
Submit the original invoice to the department referenced above.
Mark all packages and papers with the purchase number.
Any deliveries containing overshipments will be reflected unless otherwise authorized in this purchase.
This purchase is subject to the City of Chicago General Conditions for Supplies, Work, or Professional Consulting Services; Special Conditions, Disclosure Ownership, Acceptance Page, as applicable, which are attached hereto or incorporated herein by reference.
**Disclosure of Retained Parties**

**A. Definitions and Disclosure Requirements**

1. As used herein, the term "Contractor" means a person or entity who has any contract lease with the City of Chicago.
2. Pursuant to Executive Order 97-1, every city contract and lease must be accompanied by a disclosure statement.
   Providing certain information and attorneys, lobbyists, accountants, consultants, subcontractors, and other persons
   whom the contractor has retained or expects to retain with respect to the contract or lease. In particular, the contractor
   must disclose the name of each such person, his or her business address, the nature of the relationship, and the
   amount of fees paid or estimated to be paid.
3. The Contractor is not required to disclose employees who are paid solely through the Contractor's regular payroll.
4. "Lobbyist" means any person (a) who for compensation or on behalf of any person other than himself undertakes to
   influence any legislative or administrative action, or (b) any part or whose duties as an employee of another
   includes undertaking to influence any legislative or administrative action.

**B. Certification**

Contractor hereby certifies as follows:

1. This Disclosure relates to the following transaction:

   - **Project name**: FHP-07-003 A
   - **Location**: Lakeview Health Center Chillers
   - **Specification, loan or other identifying number**: 15036

2. Name of Contractor: FHP Tectonics, Corp.

3. **EACH AND EVERY** attorney, lobbyist, accountant, consultant, subcontractor, or other person retained or anticipated
   to be retained by the Contractor with respect to or in connection with the contract or lease is listed below
   (attach additional pages if necessary):

<table>
<thead>
<tr>
<th>Name</th>
<th>BUSINESS ADDRESS</th>
<th>MBE WBE or Non</th>
<th>Relationship (attorney, lobbyist, subcontractor, etc.)</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anchor Mechanical, Inc.</td>
<td>215 S. Abderdeen Chicago, IL 60607</td>
<td>Non</td>
<td>Subcontractor</td>
<td>$121,929.00 Est.</td>
</tr>
<tr>
<td>Laural Supply Corporation</td>
<td>2500 W. Lake Street Chicago, IL 60612</td>
<td>WBE</td>
<td>Supplier</td>
<td>$42,136.00 Est.</td>
</tr>
</tbody>
</table>

CHECK HERE IF NO SUCH PERSONS HAVE BEEN RETAINED OR ARE ANTICIPATED TO BE RETAINED____________

4. The Contractor understands and agrees that the city may rely on the information provided herein and that providing
   any false incomplete or inaccurate information shall constitute default under the contract and may result in
   termination of the contract or lease.
5. The Contractor understands and agrees that in any case in which the Contractor is uncertain whether a disclosure is required under the Executive order, the Contractor must either
   ask the city whether disclosure is required or make the disclosure.

Under the Penalties of perjury, I certify that I am authorized to execute this Disclosure on behalf of the Contractor that the information disclosed herein is true and complete, and that no
relevant information has been withheld.

---

Signature

Date

Name (Type or Print)

---

Subscribed and sworn to before me

this ___ day of 20__

Notary Public Signature

**Disclosure Statement**
April 22, 2008

Mr. Montel M. Gayles  
Chief Procurement Officer  
Department of Procurement Services  
City Hall, Room 403  
121 North LaSalle Street  
Chicago, IL 60602

Attn: Catherine Mellon  
JOC Manager

Re: JOC Project Number: FHP-08-013-A / Q-08-004  
Project Title: Lakeview Health Center  
Address: 2847 N. Clark St.  
Estimated Cost: 213,296.87  
Specification Number: 51701  

Dear Mr. Gayles:

We request that the above referenced project be contracted under the Job Order Contracting (JOC) Method. Attachment A describes the scope of work and the appropriateness for using JOC for this project.

Please direct all technical inquiries to Project Manager, Art Andros at (312) 742-3858 and all other inquiries to Staci-Rae Bixler at 744-1636.

If you concur with our recommendation, please sign below and return a copy for our files.

Sincerely,

[Signature]

Michi E. Peña  
Commissioner

[Signature]

Montel M. Gayles  
Chief Procurement Officer

Approved:  
Nicholas Ahrens  
Mary Capecci  
Arthur Andros
For all Proposed JOC Projects, Please complete Items 1 and 2 below. As appropriate, Complete items 3, 4 and 5. Attach to MOA (JOC Approval Letter)

1. Please describe the major features of this project.

   Replace chiller unit

   Remove Approx 500 pounds of refrigerant
   Remove existing chiller
   Supply and install new Carrier unit Model# 30RB-1306C-487-L
   Install the regfrigant and glycol
   Supply and install 60000 BTU fan Coil
   install Approx 500 pounds of refrigerant and 300 gallons glyco
   install 400 amp fused disconnect
   Test and ballance new system
   Include all electrical and associated plumbing
   repair all roof penetrations

2. Please explain why this project could not be bid using the city's traditional bid process and the need to use JOC Procurement system.

   There is not enough time to Procure this project do to the seasons. We need to get the units Ordered, and up before summer season. No Term or in-house trades to do this project

3. If the project is a one trade project, please provide an explanation of why it would not be in the city's best interest to do the project using DGS trades or existing term agreements.

   This project involves more than one trade.

4. If it is anticipated that over 25% of the project will consist of Non Pre-Priced items, please provide an explanation on why JOC should be used.

   It is anticipated that the amount of Non Pre-Priced work tasks will be less than 25%.

5. If some elements of the proposed JOC Project scope of work are covered by city term agreements, these elements should be removed from the JOC Project.

   The Scope of Work for this project is not covered by a City Term Agreement.
DEPARTMENT OF GENERAL SERVICES
Bureau of Architecture, Engineering & Construction Management

JOB ORDER CONTRACT (JOC)
PRE-CONSTRUCTION FUNDING APPROVAL

User Dept: ___________________________ Date: ____________

Originator: Art Andros Phone: (312) 742-3858

Project Number: FHP-08-013.A / Q-08-004

Project Name: Lakeview Health Center

Project Scope: ___________________________

Location/Address: 2847 N. Clark St.

Justification: ___________________________

Est. Project Budget: $213,296.87

CIP #: ___________________________

Funding Strips:
07-401-38-2005-4188-0540-40092-15-1
02-115-38-2005-9114-0140

Funding Verified By: ___________________________ Date: ____________

Can this request be completed by one of the following:

1. In-House Trades Yes No X
2. Term Contract Yes No X
3. Competitive Bid Yes No X

If No, for any of the above please explain:

__________________________ ____________
Approver: Nicholas J. Ahrens, Jr., Deputy Commissioner Date: 4/32/08

__________________________ ____________
Approver: Michi E. Peña, Commissioner Date: 4/11/08