

CITY OF CHICAGO  
 DEPARTMENT OF PURCHASES  
 CONTRACTS AND SUPPLIES  
 ROOM 403, CITY HALL, 121 NO. LA SALLE ST.

**JUSTIFICATION FOR NON-COMPETITIVE PROCUREMENT**

**COMPLETE THIS SECTION IF NEW CONTRACT, TERM AGREEMENT OR PURCHASE ORDER**

For contract(s) in this request, answer applicable questions in each of the 4 major subject areas below in accordance with the Instructions for Preparation of Non-Competitive Procurement Form on the reverse side.

Request that negotiations be conducted only with Grant Construction, Inc. for the product and/or services described herein.

Name of Person or Firm

This is a request for: X (One-Time Contract per Requisition # 15818 (copy attached) or        Term Agreement or        Delegate Agency (Check one). If Delegate Agency, this request is for "blanket approval" of all contracts within the        (Attach List) (Program Name) Pre- Assigned Specification No.        Pre- Assigned Contract No.       

**COMPLETE THIS SECTION IF AMENDMENT OR MODIFICATION TO CONTRACT**

Describe in detail the change in terms of dollars, time period, scope of services, etc., its relationship to the original contract and the specific reasons for the change. Indicate both the original and the adjusted contract amount and/or expiration date with this change, as applicable. Attach copy of all supporting documents. Request approval for a contract amendment or modification to the following:

Contract # C029239 Company or Agency Name: Grant Construction, Inc

Specification #        Contract or Program Description: Construction Consultant  
 Mod #        (Attach List, if multiple)

<u>Maurice Lathan</u>	<u>x2-9238</u>	<u>Maurice Lathan</u>	<u>OBM - EZ</u>	<u>7/29/04</u>
Originator's Name	Telephone	Signature	Department	Date

Indicate SEE ATTACHED in each box below if additional space needed:

<input checked="" type="checkbox"/> PROCUREMENT HISTORY - see attached
<input checked="" type="checkbox"/> ESTIMATED COST - see attached
<input checked="" type="checkbox"/> SCHEDULED REQUIREMENTS - see attached
<input checked="" type="checkbox"/> EXCLUSIVE OR UNIQUE CAPABILITY - see attached
<input checked="" type="checkbox"/> OTHER - N/A

APPROVED BY: \_\_\_\_\_ Date: \_\_\_\_\_ Board Chairperson \_\_\_\_\_ Date \_\_\_\_\_  
 Department Head Or Designee



City of Chicago  
Richard M. Daley, Mayor  
Office of Budget and Management

John F. Harris  
Director

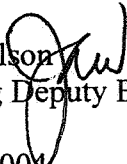
City Hall, Room 604  
121 North LaSalle Street  
Chicago, Illinois 60602  
(312) 744-3323  
(312) 744-3618 (FAX)  
(312) 744-3619 (TTY)

<http://www.cityofchicago.org>

## MEMORANDUM

**TO:** Phillip Cobb  
Deputy Procurement Officer

**ATTN:** Stacy Stewart  
Assistant to Commissioner

**FROM:** Jarese Wilson   
Managing Deputy Budget Director

**DATE:** July 29, 2004

**RE:** Non-Competitive Sole Source Justification for Grant Construction, Inc.

### I. Procurement History

Construction management has been a service required by the Chicago Empowerment Zone (EZ) since the first round of funding was allocated in 1996. Since implementation, the EZ office has focused on providing and promoting several initiatives they are: Economic Empowerment, Health and Human Services, Cultural Diversity, Youth Futures, Public Safety, Capacity Building, and Affordable and Accessible Housing. Many of our EZ/EC funded projects required new construction, expansion, or rehabilitation of structures defined as Economic Empowerment. The Empowerment Zone is requesting to retain the services of Grant Construction from June 2004 through June 2005 to assist with final construction projects and closeout construction procedures.

During our implementation phase, the EZ office contracted Department of General Services and R.M. Chin. Grant Construction was contracted with the Empowerment Zone in 1997 to assist with various construction projects. Grant Construction has provided exemplary work for the Empowerment Zone since 1997 assisting with the completion of 15 construction projects. The EZ is officially closing in December of 2004 and sequentially to assure that all construction projects are accurately completed, Grant Construction's services will be needed to monitor and assist with 18 construction projects through their completion. The Empowerment Zone is pleased with Grant Construction's level of knowledge, expertise and professionalism and is requesting their services.



City of Chicago  
Richard M. Daley, Mayor

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## II. Estimated Cost

The cost for Grant Construction, Inc. to manage the attached list of construction projects through 2005 is \$186,576 to be paid from State administrative funds chargeable to 876-08-2005-1005-0140. This figure was arrived at through negotiations with Ken Grant and is the total of direct labor with a multiplier of 2.3 and a contingency provision of \$62,192 if additional hours are needed at the written request of the Managing Deputy Budget Director. The hourly rate to be paid to Ken Grant is \$52. Attached is a list of projects to be contracted.

## III. Exclusivity

Grant Construction, Inc. has provided substantial value-added services through Ken Grant's experience with programmatic requirements, infrastructure requirements and personalities in at least fifteen (15) construction projects with the EZ/EC since 1997; nine (9) which are currently active. Over the past seven (7) years, he has helped put into place procedures and technical guidelines which will continue to hold for current and future structural projects. Ken Grant's continued presence to assist existing staff during our close-out phase will be critical to the completion of the EZ/EC Economic Empowerment initiative.



## Ken Grant Project List -7/29/04

### Current/Active Construction Projects:

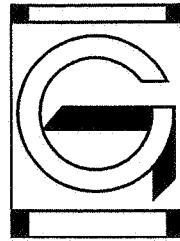
1. Bethel New Life
2. Chetwyn Rodgers
3. Chicago Park District-Homan Square
4. Little Black Pearl
5. Salvation Army Red Shield
6. Westside Health Authority
7. Westside Improvement Association
8. El Hogar
9. African Bazaar

### Prospective Projects to be Contracted:

1. Centers for New Horizons
2. Century Place Development Corp.
3. Childrens Home and Aid Society
4. Chicago Christian Industrial League
5. Muntu Dance Theatre
6. Second City
7. Supreme Liberty Life
8. Roseland Little League
9. Juarez High School Expansion

# GRANT CONSTRUCTION, INCORPORATED CONSTRUCTION / CONSULTATION

552 East 73rd Street  
Chicago, Illinois 60619  
Tel: (773) 783-8707  
Fax: (773) 783-8708



July 12, 2004

M (s) Darlene Watkins  
Director of Construction and Programs  
Chicago Empowerment Zone Program  
20 North Clark Street  
Chicago, IL. 60602

SUBJECT: EMPOWERMENT ZONE ENTERPRISE COMMUNITY PROGRAM  
CONSTRUCTION MANAGEMENT OVERSIGHT

Dear M (s) Watkins:

GRANT CONSTRUCTION, INC. (GCI) is pleased to present our proposed scope of services and cost proposal to provide extension of staff services to the Empowerment Zone / Enterprise Communities program for the City of Chicago.

If you have any questions or if we can be further assistance, please contact me at (773) 373-2090.

Respectfully,  
GRANT CONSTRUCTION, INC.

A handwritten signature in black ink, appearing to read 'KENNETH E. GRANT', with a long horizontal line extending to the right.

Kenneth E. Grant  
President

cc: EZ FILE

M(s) Darlene Watkins  
Chicago Empowerment Zone Program  
Director of Construction and Programs  
20 N. Clark Street  
Chicago, Illinois 60602

July 12, 2004

EMPOWERMENT ZONE / ENTERPRISE COMMUNITY PROGRAM  
CONSTRUCTION MANAGEMENT OVERSIGHT  
SCOPE OF SERVICES

This Proposal is based on GRANT CONSTRUCTION, INC. as the PRIME CONSULTANT; additional services will be performed on an as needed basis. (Upon written request from the Executive Director of the Chicago Empowerment Zone) as a SubConsultant to GRANT CONSTRUCTION, INC.

The scope of the Empowerment Zone Program encompasses a wide range of multi-functional community projects. Therefore, an efficient construction management oversight system is necessary to ensure that projects are completed within proposed time, cost, and quality constraints.

Since 1997 the Chicago Empowerment Zone Program (EZ) has used the services of GRANT CONSTRUCTION, INC. (GCI) PARSONS BRINCKERHOFF (PB) and R.M. CHIN & ASSOC. (RMCA) to provide experienced construction management staff under the EZ/EC Program. EZ has successfully managed the completion of the projects started in 1997-2003 as well as new multiple Empowerment Zone projects being developed by contracting with an outside consultant to provide continuity with the existing program and support new projects as they come on line. Through the introduction of extension of staff services, EZ staff has more efficiently monitored the overall scope of the Empowerment Zone Program.

Services provided by a contracted consultant has been streamlined by using established CSI formats for oversight, coordination, and review during pre-construction, site construction, and post-construction work phases. The following basic services are recommended to maintain effective project management.

1. PRECONSTRUCTION PHASE SERVICES

- Project scope (documentation, submittals, and initial schedule) review
- Project drawing and plan review
- Project specification review
- Architect and Contractor qualification review

2. CONSTRUCTION PHASE SERVICES

- On-site construction inspection
- Quality assurance monitoring
- Work schedule and progress review
- Contractor progress payment verification
- Change order review and management
- Punch-list and final inspection

EZ / EC CONSTRUCTION MANAGEMENT OVERSIGHT  
SCOPE OF SERVICES

3. POST-CONSTRUCTION PHASE SERVICES

- Warranty procurement and review
- As-built drawing review
- Project closeout and final payment
- Claims management assistance

By providing a simplified one-tier management structure, the construction management oversight consultant will coordinate activities from project acceptance through completion of construction. The use of standardized documentation such as the Construction Project Booklet and CSI formats has allowed EZ staff to become more educated and familiar with the basic construction requirements over time. The construction oversight manager then could concentrate on technical aspects and project details. Typically, based upon the proposed volume and time frame of work, one construction manager should be able to oversee and coordinate activities in the following functional areas.

- PROJECT CONTROLS
- COST ADMINISTRATION
- TECHNICAL REVIEW
- CONSTRUCTION ACTIVITIES

Occasionally, the Executive Director may determine that an additional person is temporarily required on the management oversight staff. In such instances, the Executive Director could elect to authorize the consultant to provide additional short-term staff. Such additional services would be engaged only upon written authorization of the Executive Director.

The Prime construction oversight manager (GRANT CONSTRUCTION, INC.) may not be required full time during many periods of the EZ / EC Program EZ staff will collect project documentation and correspondence for weekly review and reporting. Based upon the size of the proposed projects and the level of oversight required, a guideline budget for construction management services is estimated at 2.5 to 4 percent of overall construction cost.

PROGRAM/CONSTRUCTION MANAGEMENT CONSULTANT:

COMPENSATION:

**BUDGET**

:

NAME:	PROPOSED HOURS PER WEEK	RATE	AMOUNT	MULTIPLIER	SUBTOTAL	ANNUALLY 52-WEEKS
KENNETH E. GRANT	20	\$52.00/HR.	\$1,040.00	2.3	\$2,392.00	\$124,384.00
CONTINGENCY:	10	\$52.00/HR.	\$520.00	2.3	\$1,196.00	<u>\$62,192.00</u>
<b>TOTAL ANNUAL BUDGET</b>						<b>\$186,576.00</b>



City of Chicago  
Richard M. Daley, Mayor

Department of  
Procurement Services

Eric J. Griggs  
Acting Chief Procurement Officer

City Hall Room 403  
121 North LaSalle Street  
Chicago, Illinois 60602  
(312) 744-4900  
(312) 744-2949 (TTY)

<http://www.cityofchicago.org>

Kenneth Grant, President  
**Grant Construction, Inc.**  
552 East 73<sup>rd</sup> Street  
Chicago, IL 60619

Certification Effective:	February 5, 2004
Certification Expires:	March 1, 2009
Annual Certificate Expires:	March 1, 2005

Dear Mr. Grant:

We are pleased to inform you that **Grant Construction, Inc.** has been certified as an **MBE** by the City of Chicago. This **MBE** certification, which is valid for five years, must be re-validated annually. Your firm's next annual validation is required by **March 1, 2005**.

As a condition of continued certification during this five year period, you must file a No-Change Affidavit within 60 days of the date of expiration. **Please note that you must include a copy of your most current Corporate Federal Tax Returns.** Failure to file this Affidavit will result in the termination of your certification. You must also notify the Office of Business Development of any changes in ownership or control of your firm or any other matters or facts affecting your firm's eligibility for certification.

The City may commence actions to remove your firm's eligibility if you fail to notify us of any changes of facts affecting your firm's certification or if your firm otherwise fails to cooperate with the City in any inquiry or investigation. Removal of eligibility procedures may also be commenced if your firm is found to be involved in bidding or contractual irregularities.

Your firm's name will be listed in the City's Directory of Disadvantaged Business Enterprises, Minority Business Enterprises and Women Business Enterprises in the specialty area(s) of:

#### **Construction Management Consultant**

Your firm's participation on City contracts will be credited only toward **MBE** goals in your area(s) of specialty. While your participation on City contracts is not limited to your specialty, credit toward **MBE** goals will be given only for work done in the specialty category.

Thank you for your continued interest in the City's Minority, Women and Disadvantaged Business Enterprise Programs.

Very truly yours,

Eric J. Griggs  
Acting Chief Procurement Officer  
EJG/wld

NEIGHBORHOODS





**CITY OF CHICAGO  
 PURCHASE REQUISITION**

**Copy (Department)**

<b>DELIVER TO:</b>  008-2801 20 N CLARK 20 N. CLARK ST. 28TH FLOOR Chicago, IL 60602	<b>REQUISITION:</b> 15818  <b>PAGE:</b> 1 <b>DEPARTMENT:</b> 08 - PLANNING & DEVELOPMENT <b>PREPARER:</b> Rosalind D Stevens <b>NEEDED:</b> <b>APPROVED:</b> 7/28/2004
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**REQUISITION DESCRIPTION**  
 CONSTRUCTION CONSULTING  
 SPECIFICATION NUMBER: PN08C029239

**COMMODITY INFORMATION**

LINE	ITEM	QUANTITY	UOM	UNIT COST	TOTAL COST							
1	96117	186,576.00	USD	1.00	186,576.00							
	CONSTRUCTION CONSULTING											
	SUGGESTED VENDOR: GRANT CONSTRUCTION, INC.					REQUESTED BY: Rosalind D Stevens						
DIST	BFY	FUND	COST CTR	APPR	ACCNT	ACTV	PROJECT	RPT CAT	GENRL	FUTR	Dist. Amt.	
1	004	0100	0992005	9029	220000	0000	00000000	000000	00000	0000	186,576.00	
<b>LINE TOTAL:</b>											<b>186,576.00</b>	
<b>REQUISITION TOTAL:</b>											<b>186,576.00</b>	

# CPAC PROJECT CHECKLIST

For CPAC Team Use Only	
Date Received	_____
Date Returned	_____
Date Accepted	_____

**IMPORTANT:** PLEASE READ AND FOLLOW THE INSTRUCTIONS FOR COMPLETING THE PROJECT CHECKLIST AND CONTACT THE APPROPRIATE TEAM LEADER IF YOU HAVE ANY FURTHER QUESTIONS. ALL INFORMATION SHOULD BE COMPLETED INCLUDING THE SUPPLEMENTAL CHECKLIST REQUIRED BY THE SPECIFIC CPAC TEAM. ATTACH ALL REQUIRED MATERIALS AND SUBMIT FOR HANDLING TO THE DEPARTMENT OF PROCUREMENT SERVICES, ROOM 403, CITY HALL, 121 N. LASALLE STREET, CHICAGO, ILLINOIS 60602.

## PROJECT

Date: 07/29/04 Contact Person: Jarese Wilson  
 ID No (Spec, RX, Project): \_\_\_\_\_ Tel: 4-7870 Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Department: Budget-EZ Project Manager: Maurice Lathan  
 Bureau: 08 Tel: 2-9238 Fax: 4-9696 E-mail: \_\_\_\_\_  
 Contract No (if known): C029239 Estimated Value \$ \$186,576  
 Project Title/Description: Grant Construction, Inc., Construction Consulting

## SCOPE STATEMENT

attached is a detailed scope of services and/or specification

**IMPORTANT:** THIS IS A CRITICAL PORTION OF YOUR SUBMITTAL. IN ORDER FOR A TEAM TO ACCEPT YOUR SUBMITTAL YOU MUST COMPLETE ALL TEAM SPECIFIC SCOPE REQUIREMENTS AS SET FORTH IN THE SUPPLEMENTAL CHECKLIST FOR THAT TEAM.

The following is a general description of what would be included in a Scope of Services or Specification:  
 A clear description of all anticipated services and products, including: time frame for completion, special qualifications of prospective vendors, special requirements or needs of the project, locations, anticipated participating user departments, citation of any applicable City ordinance or state/federal regulation or statute.

## TYPE OF PROCUREMENT REQUESTED (check all that apply)

Competitive Bid  RFQ/RFP/RFS/RFI  Sole Source\*\*  Term Agreement  One Shot  
 Mod/Amendment  Time Extension  Additional Funding  Small Order  S/O Emergency

## FORMS

F-25\* (add line item)  F-10\* (special approvals)  SSRB\*\* (sole source approval)  
 F-26\* (new term agreement)  RX (one-shot requisition)  OBM Authorization  
 F-27\* (time extension)  APRF (all purpose request form)  
 F-29\* (change vendor limit)

\*\* Sole source requests must include vendor quotes/proposal and MBE/WBE compliance requirements

## FUNDING

City:  Corporate  Bond  Enterprise  Grant\*  Other \_\_\_\_\_  
 State:  IDOT/Transit  IDOT/Highway  Grant\*  Other \_\_\_\_\_  
 Federal:  FHWA  FTA  FAA  Grant\*  Other \_\_\_\_\_  
 Funding Strip(s): 004-0100-0992005-9029-22000

\* Attach copy of any applicable grant agreement terms and conditions

## TIME FRAME

Date Needed: 06/2004 Requested Contract Term (y/m/d): 06/2004-06/2005

## PRE BID/SUBMITTAL REQUIREMENTS

Requesting Pre Bid/Submittal Conference?  Yes  No Requesting Conference be Mandatory?  Yes  No  
 Requesting Site Visit?  Yes  No Requesting Site Visit be Mandatory?  Yes  No

N/A

# CPAC PROJECT CHECKLIST

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## ARCHITECTURAL/ENGINEERING SUPPLEMENTAL CHECKLIST

**Required Attachments:** Scope of Services, including location, description of project, services required, deliverables, and other information as required

### Risk Management

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

**Pre-Qualification** Category No. \_\_\_\_\_ Category Description: \_\_\_\_\_

For Pre-Qualification Program, attach list of suggested firms to be solicited

**Other Agency Concurrence Required:**  None  State  Federal  Other (fill in) \_\_\_\_\_ **N/A**

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## AVIATION CONSTRUCTION SUPPLEMENTAL CHECKLIST

DOA sign-off for final design documents:  Yes  No

### Required Attachments:

Copy of Draft Contract Documents and Detailed Specifications.

### Risk Management:

**N/A**

Current Insurance Requirements prepared/approved by Risk Management: Yes  No

Will work be performed within 50 feet of CTA or ATS structure or property? Yes  No

Will work be performed airside? Yes  No

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## CAPITAL EQUIPMENT (VEHICLES) SUPPLEMENTAL CHECKLIST

### Required Attachments:

Detailed Specifications including detailed description of the vehicle(s) or equipment, mounted equipment, if any, and options/accessories.

Special Provisions (Delivery, Warranty, Manuals, Training, Additional Unit Purchase Options, Bid Submittal Information, etc.)

Delivery Location(s)

Technical Literature

**N/A**

Drawings, if any

Part Number List ( Manufacturer; or  Dealer;  or Other Source: \_\_\_\_\_)

Copy of current Price List(s)/Catalog(s)

Form F-10 or other authorization document

Any other exhibits and attachments

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## COMMODITIES SUPPLEMENTAL CHECKLIST

### Required attachments:

Copies of price lists, catalogs, drawings, variations of part numbers

Any other exhibits or attachments

**N/A**

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## CONSTRUCTION SUPPLEMENTAL CHECKLIST (LARGE & SMALL)

### Required attachments: Copy of Draft (80% Completion)

Copy of Draft (80% Completion) Contract Documents and Detailed Specifications

**N/A**

### Risk Management

Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No

Will services be performed on or near a waterway?  Yes  No

# CPAC PROJECT CHECKLIST

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## DELEGATE AGENCY SUPPLEMENTAL CHECKLIST

### Required attachments:

Attach Scope of Services that includes the following information 1) Program background & objectives; 2) Type of services for which proposals are sought; 3) Location and time line for delivery of services; 4) Qualifications, skills, and/or experience necessary; 5) Special licenses or certifications required; 6) Evaluation process (if known).

### Other Attachments (please submit all that apply)

1. Copy of grant application and/or grant agreement
2. Evidence of award authority (DAAC agenda with agency name highlighted; City Council ordinance with agency name highlighted; or OBM letter)
3. Modification information (Copy of Form F-8A; screen print of EPS AWDS table)

Does program require Executive Order 91-1 clearance?  
Is boilerplate from Law available or in production?  
Would your department benefit from technical assistance?

N/A  
N/A  
N/A

\_\_ Yes \_\_ No  
\_\_ Yes \_\_ No  
\_\_ Yes \_\_ No

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## HARDWARE/SOFTWARE SUPPLEMENTAL CHECKLIST

\_\_ ITSC (approved by BIS)

N/A

\_\_ OBM (approved by Budget form/memo)

Attach any documentation indicating any previous purchase activity to assist in the procurement process

\_\_ Grant document attached

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## PROFESSIONAL SERVICES SUPPLEMENTAL CHECKLIST

- \_\_ Detailed scope of services as described on page 1.
- \_\_ The Schedule of Compensation
- \_\_ Deliverables
- \_\_ Request for individual contract services (if applicable)
- \_\_ The appropriate EPS form

N/A

\* If this is a Telecommunications/Utilities project, please also address the following:

- Has the project been reviewed by DGS? \_\_ Yes \_\_ No  
Attach copy of DGS Recommendation; Reservation(s); or participate under current contract.  
Does the project include software? \_\_ Yes \_\_ No  
If yes, is signed ITSC form attached? \_\_ Yes \_\_ No  
Does the location involve:  
A public way? \_\_ Yes \_\_ No  
Any concession in the City's facilities? \_\_ Yes \_\_ No  
Is it anticipated City Council approval of the project or contract will be required? \_\_ Yes \_\_ No

# CPAC PROJECT CHECKLIST

## SMALL ORDERS SUPPLEMENTAL CHECKLIST

- Yes No
- \_\_\_ \_\_\_ 1. Special Approval Form/Justification Letter. **N/A**  
 e.g. (Emergency Contract, Telecommunication Back-up documents, Proposals , EPS Form F-10, etc..).
- \_\_\_ \_\_\_ 2. Suggested Vendor.
- \_\_\_ \_\_\_ 3. Commodity Code, Manufacturer, Catalog Information, Model No., Quantity, Unit Cost/Measure, Color etc.,
- \_\_\_ \_\_\_ 4. Detailed Specification or Scope of Work.

## ATTACHMENT REQUIRED FOR EACH SMALL ORDERS PROCUREMENT TYPE

(Check Appropriate Group)

1. **ONE SHOT (PN)** **N/A**
- YES ( ) NO ( ) Detailed Specifications  
 YES ( ) NO ( ) Suggested Vendor  
 YES ( ) NO ( ) Support Documentation
3. **N/A** **EMERGENCY CONTRACT**
- YES ( ) NO ( ) Justification Letter  
 YES ( ) NO ( ) Vendor Proposal  
 YES ( ) NO ( ) Pre-assigned Requisition (RX)
4. **TELEPHONE/FAX BIDS**
- YES ( ) NO ( ) Justification Letter
2. **SOLE SOURCE REQUIREMENTS** **N/A**
- YES (  ) NO ( ) Vendor Proposal  
 YES ( ) NO ( ) Disclosure Affidavit  
 YES (  ) NO ( ) Letter of Exclusive or Unique Capability  
 YES (  ) NO ( ) Support Documentation from Vendor/Manufacturer.  
 YES (  ) NO ( ) Signature(s) of Originator or Departmental Head/Designee.

## WORK SERVICES & FACILITY MAINTENANCE SUPPLEMENTAL CHECKLIST

**Required Attachments:** Detailed Specifications (Scope of Services) including detailed description of the work, locations (with supporting detail), user department contacts, work hours/days, laborer/supervisor mix, compensation and price escalation considerations, contract term and extension options, contractor qualifications, citation of any applicable City/State/Federal statutes or regulations, citation of any applicable technical standards and price lists, catalogs, technical drawings and other exhibits and attachments as appropriate.

### Risk Management

- Will services be performed within 50 feet of CTA train or other railroad property?  Yes  No
- Will services be performed on or near a waterway?  Yes  No
- Will services require the handling of hazardous/biowaste material?  Yes  No
- Will services require the blocking of streets or sidewalks in any way?  
 Which may affect public safety?  Yes  No

**N/A**