



ILLINOIS TOLLWAY
Doing Business with the Illinois Tollway
Contract Compliance Construction Forms/Documents

Seannica Spencer, Sr. Contract Compliance Analyst
May 9, 2022

INTRODUCTION

OBJECTIVES:

- ▶ To improve participants' understanding of the contract compliance documents/forms.
- ▶ To minimize errors in completing and submitting compliance documents/forms.
- ▶ The following will be discussed:
 - ▶ Disadvantaged Business Enterprise (DBE) & Veteran-Owned Small Business (VOSB) Prime Contractor Documents
 - ▶ Disadvantaged Business Enterprise (DBE) & Veteran-Owned Small Business (VOSB) Subcontractor Documents
 - ▶ Good Faith Efforts (GFE) Documentation
 - ▶ Workforce Projection Documentation

OVERVIEW

DBE & VOSB FORM
2026 - UTILIZATION
PLAN

DBE & VOSB FORM
2025 -
PARTICIPATION
COMMITMENT
STATEMENT FORM

DBE & VOSB FORM
2023 Good Faith
Efforts

FORM 1256-
WORKFORCE
PROJECTION

DBE FORM 2026 - UTILIZATION PLAN

- ▶ Bidders are required to fully read and comply with the Special Provision.
- ▶ Submit only one DBE Utilization Plan for each Project at time of Bid.
- ▶ This Utilization Plan, Form 2026 must:
 - ▶ --be submitted with the bid or the bid will be deemed non-responsive
 - ▶ --be an accurate representation of work and pricing agreed upon between the prime and the DBE firm prior to bid submission
- ▶ The Participation Statement(s) (DBE Form 2025), with original signatures, pay item description and pricing are to be submitted to Tollway Contract Compliance at contractcompliance@getipass.com from the lowest apparent bidder on the fifth (5th) calendar day after bids are due or the bid will be deemed non-responsive.
- ▶ Each company listed on the Utilization Plan and subsequent Participation Statement must be listed in a certifying agency's database as stipulated in the Special Provision at the time of bid submission to be considered acceptable for DBE credit.
- ▶ In no case should a Contractor remove, replace or reduce the commitment to a DBE listed in the initial Utilization Plan on the Participation Statement without prior written consent of ISTHA. Under no circumstances is the Bidder allowed to change the amount of the core bid submitted or any other documentation unrelated to this special provision.

DBE FORM 2026 - UTILIZATION PLAN

- ▶ Prime Contractor
- ▶ Contact Name
- ▶ Contact phone Number
- ▶ Contact E-Mail Address
- ▶ Contract number
- ▶ Core Value Amount
- ▶ Check if you will meet or exceed the goal (advertised goal and commitment goal) or are requesting a waiver.
- ▶ Complete DBE firm, scope of work and DBE- Amount
(DBE certified vendors: ILUCP, City of Chicago, Small Business Administration SBA 8)
- ▶ Signature, Title & Date



ILLINOIS STATE TOLL HIGHWAY AUTHORITY
DBE FORM 2026 - UTILIZATION PLAN

CONTRACT NUMBER RR-1234
CORE VALUE AMOUNT \$1,000.00

PRIME CONTRACTOR: Test Incorporated
CONTACT NAME: Test Brown
CONTACT PHONE NUMBER: (312)123-3456
CONTACT E-MAIL: testbrown@getipass.com

Check one:

- Contractor will meet or exceed the DBE Contract Goal and will provide Disadvantaged Business Participation as presented below.
 - PERCENTAGE OF ADVERTISED DBE GOAL : 25%
 - PERCENTAGE OF DBE COMMITMENT: 25.04%
- Contractor requests a waiver of the DBE Contract Goal.
 - The Bidder is requesting the contract Goal be accordingly modified or waived. Attached is all information required by the Special Provision in support of this request, including Good Faith Efforts - Form 2023.
 - DOLLAR AMOUNT OF WAIVER REQUEST: _____
 - PERCENTAGE OF WAIVER REQUEST: _____
 - PERCENTAGE OF DBE COMMITMENT: _____

Instructions to Bidders:

1. Bidders are required to fully read and comply with the Special Provision.
2. Submit only one DBE Utilization Plan for each Project at time of Bid.
3. This Utilization Plan, Form 2026 must:
 - be submitted with the bid or the bid will be deemed non-responsive
 - be an accurate representation of work and pricing agreed upon between the prime and the DBE firm prior to bid submission
4. The Participation Statement(s) (DBE Form 2025), with original signatures, pay item description and pricing are to be submitted to Tollway Contract Compliance at contractcompliance@getipass.com from the lowest apparent bidder on the fifth (5th) calendar day after bids are due or the bid will be deemed non-responsive.
5. Each company listed on the Utilization Plan and subsequent Participation Statement must be listed in a certifying agency's database as stipulated in the Special Provision at the time of bid submission to be considered acceptable for DBE credit.
6. In no case should a Contractor remove, replace or reduce the commitment to a DBE listed in the initial Utilization Plan on the Participation Statement without prior written consent of ISTHA. Under no circumstances is the Bidder allowed to change the amount of the core bid submitted or any other documentation unrelated to this special provision.
7. If trucker, please describe if company will transport materials/equipment to or from a Public Works job site or if company will transport materials/equipment by the sellers or suppliers.

DBE UTILIZATION PLAN		
DBE Firm Name	Scope of Work Specific description of overall work to be performed.	DBE - Amount (\$) If supplier, enter 60% credit amount.
Orange Blossom	Supplier	\$50.40
Groundwork Construction	Digging Trench	\$150.00
Truck and Build	Trucking (hauling equipment)	\$50.00
TOTAL		\$250.40


For ebid: the submission of Form 2026 constitutes signature of this form.
For hardcopy: signature required.
Form 2026 - 02/2022

Test Brown President 04/19/22
Signature Title Date

DBE & VOSB FORM 2025 - DBE & VOSB PARTICIPATION STATEMENT FORM

- ▶ This form must be completed for EACH disadvantaged business participating in the DBE/VOSB Utilization Plan. This form is due to the Tollway from the lowest apparent bidder on the fifth (5th) calendar day after bids are due or the bid will be deemed non-responsive to contractcompliance@getipass.com. If additional space is needed, complete an additional form(s) for the firm or attach a detailed information on the DBE firm company letterhead.
- ▶ **SUBCONTRACTING:** If any of the DBE/VOSB scope of work will be subcontracted, provide the name of the contractor and attach a brief explanation, description and pay item number of the work that will be subcontracted. DBE/VOSB credit will not be given for work subcontracted to Non-DBE/VOSB contractors, except for as allowed in the Special Provision for Disadvantaged Business Enterprise Participation.

DBE FORM 2025 - DBE PARTICIPATION STATEMENT FORM

 Illinois State Toll Highway Authority "ISTHA" DBE FORM 2025 - DBE PARTICIPATION STATEMENT FORM, PART 2

CONTRACT #	RR-1234	DBE FIRM NAME:	Orange Blossom	CIRCLE ALL THAT APPLY	<input checked="" type="checkbox"/> DBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> SBA (A)
CHECK ALL THAT APPLY:	PRIME <input type="checkbox"/> JV PARTNER <input type="checkbox"/> SUBCONTRACTOR <input type="checkbox"/> TRUCKER <input type="checkbox"/> SUPPLIER <input checked="" type="checkbox"/> MANUFACTURER <input type="checkbox"/>				
IF TRUCKER, CHECK ALL THAT APPLY:	Transportation of materials or equipment to or from a Public Works job site <input type="checkbox"/> Transportation of materials or equipment by the sellers or suppliers <input type="checkbox"/>				
SUBCONTRACTOR:	TIER 1 (SUB TO PRIME):	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	TIER 2 OR BELOW:	<input type="checkbox"/> Y <input type="checkbox"/> N	UNDER CONTRACT TO:
Will the DBE subcontract a portion of its contract to one or more subcontractors?	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N				
<small>Total amount of the DBE subcontract that will be subcontracted to non DBE companies</small> <small>Total amount of the DBE subcontract that will be subcontracted to DBE companies</small>					

This form must be completed for EACH disadvantaged business participating in the DBE Utilization Plan. This form is due to the Tollway from the lowest apparent bidder on the fifth (5th) calendar day after bids are due or the bid will be deemed non-responsive to contractcompliance@getpass.com. If additional space is needed, complete an additional form(s) for the firm or attach a detailed information on the DBE firm company letterhead.

PAY ITEM NO. *	DESCRIPTION: Specific description of overall work to be performed. Indicate whether furnish only, or both furnish and install	QUANTITY	UNIT PRICE	TOTAL CONTRACT AMOUNT (\$)	CHECK IF SUPPLIER	TOTAL DBE CREDIT AMOUNT (\$) <small>(reduce to 60% of contract amount if firm is a SUPPLIER)</small>
	Supplies			\$84.00	X	\$50.40
TOTALS FOR THIS DBE FIRM:				\$84.00		\$50.40

*Contingency Work must not be included under Pay Items and will not be approved toward DBE goal participation until such time as those Pay Items have been confirmed as required work of the contract. Direct Allowance items, including but not limited to Mobilization Item #5671010, will not be approved within the DBE Utilization Plan. NOTE that these items are not included in the determination of the DBE Goal percentage.

1. PARTIAL PAY ITEMS: For any of the above ITEMS that are partial pay items, specifically describe the work and subcontract dollar amount.

2. SUBCONTRACTING: If any of the DBE scope of work will be subcontracted, provide the name of the contractor and attach a brief explanation, description and pay item number of the work that will be subcontracted. DBE credit will not be given for work subcontracted to Non-DBE contractors, except for as allowed in the Special Provision for Disadvantaged Business Enterprise Participation.

3. COMMITMENT: The undersigned certifies that the information herein is true and correct, and that the DBE listed below has agreed to perform a commercially-useful function in the work of the contract item(s) listed above and to execute a contract to that effect with the Prime Contractor. The undersigned further understands that NO CHANGES to the type or scope of work performed by the DBE may be made without PRIOR WRITTEN APPROVAL and that complete and accurate information regarding actual work performed by the DBE on this contract and the payment thereon must be provided to ISTHA's Contract Compliance. **The Prime Contractor will not assign any of the contract items listed above to a firm other than the DBE identified below without ISTHA's prior written approval. The Prime Contractor must request, in writing, approval by ISTHA's Contract Compliance of any proposed amendment to the type or scope of work to be performed by the DBE no later than three business days from the date the Prime Contractor becomes aware of the circumstances supporting the request. Failure to receive written approval prior to a change in type or scope is a violation of the Special Provision for DBE Participation and can subject the contractor to contract sanctions.**

<i>Test Brown</i> Signature for Prime Contractor	President	04/19/22	<i>John Jones</i> Signature for DBE Contractor	Manager	04/19/22
Contact: Test Brown	Title	Date	Contact: John Jones	Title	Date
Firm Name: Test Incorporated			Firm Name: Orange Blossom		
E-mail: testbrown@getpass.com			E-mail: john.jones@orangeblossom.com		
Phone: (312)123-3456			Phone: (773)467-8910		
Address: 789 E. Fox Avenue, Chicago, IL			Address: 231 W. Mountain Hill, Chicago, IL		


(Rev 7/2020) DBE - 13

- ▶ Contract Number
- ▶ DBE Firm Name
- ▶ Circle All That Apply
- ▶ Pay Item Number
- ▶ Description
- ▶ Quantity
- ▶ Unit Price
- ▶ Total Contract Amount
- ▶ Total VOSB Credit Amount
- ▶ Prime and Subcontractor Signature

VOSB FORM 2025 - VOSB PARTICIPATION STATEMENT FORM

ate Toll Highway Authority

VOSB

 Illinois State Toll Highway Authority "ISTHA" VOSB FORM 2025 - VOSB PARTICIPATION STATEMENT F

CONTRACT #	RR-1234	VOSB FIRM NAME:	Pine Oak Landscaping	CIRCLE ALL THAT APPLY	<input checked="" type="checkbox"/> VOSB	SD
CHECK ALL THAT APPLY:	<input type="checkbox"/> PRIME	<input type="checkbox"/> JV PARTNER	<input checked="" type="checkbox"/> SUBCONTRACTOR	<input type="checkbox"/> TRUCKER	<input type="checkbox"/> SUPPLIER	<input type="checkbox"/> MANUFACTURER
IF TRUCKER, CHECK ALL THAT APPLY:	<input type="checkbox"/> Transportation of materials or equipment to or from a Public Works job site		<input type="checkbox"/> Transportation of materials or equipment by the sellers or suppliers			
SUBCONTRACTOR:	TIER 1 (SUB TO PRIME):	<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	TIER 2 OR BELOW:	<input type="checkbox"/> Y	<input type="checkbox"/> N
Will the VOSB subcontract a portion of its contract to one or more subcontractors?		<input checked="" type="checkbox"/> Y	<input type="checkbox"/> N	Total amount of the VOSB subcontract that will be subcontracted to non VOSB companies		
				Total amount of the VOSB subcontract that will be subcontracted to VOSB companies		

This form must be completed for EACH veteran-owned business participating in the VOSB Utilization Plan. This form is due to the Tollway from the lowest apparent bidder on the fifth (5th) calendar day after bids are bid will be deemed non-responsive to contractcompliance@getipass.com. If additional space is needed, complete an additional form(s) for the firm or attach a detailed information on the VOSB firm company letter

PAY ITEM NO. *	DESCRIPTION: Specific description of overall work to be performed. Indicate whether furnish only, or both furnish and install	QUANTITY	UNIT PRICE	TOTAL CONTRACT AMOUNT (\$)	CHECK IF SUPPLIER	TOTAL VOSB CREDIT AMOUNT (reduce to 60% of contract amount a SUPPLIER)
	Landscaping			\$35.00		\$35.00
TOTALS FOR THIS VOSB FIRM:				\$35.00		\$35.00

*Contingency Work must not be included under Pay Items and will not be approved toward VOSB goal participation until such time as those Pay Items have been confirmed as required work of the contract. Direct A including but not limited to Mobilization Item #J5671010, will not be approved within the VOSB Utilization Plan. NOTE that these items are not included in the determination of the VOSB Goal percentage.

1. **PARTIAL PAY ITEMS:** For any of the above ITEMS that are partial pay items, specifically describe the work and subcontract dollar amount.
2. **SUBCONTRACTING:** If any of the VOSB scope of work will be subcontracted, provide the name of the contractor and attach a brief explanation, description and pay item number of the work that will be subcontracted. VOSB credit will not be given for work subcontracted to Non-VOSB contractors, except for as allowed in the Special Provision for Veteran Small Business.
3. **COMMITMENT:** The undersigned certify that the information herein is true and correct, and that the VOSB listed below has agreed to perform a commercially-useful function in the work of the contract item(s) listed and to execute a contract to that effect with the Prime Contractor. The undersigned further understand that NO CHANGES to the type or scope of work performed by the VOSB may be made without PRIOR WRITTEN APPROVAL and that complete and accurate information regarding actual work performed by the VOSB on this contract and the payment thereto must be provided to ISTHA's Contract Compliance. **The Prime Contractor not assign any of the contract items listed above to a firm other than the VOSB identified below without ISTHA's prior written approval. The Prime Contractor must request, in writing, approval by ISTHA Contract Compliance of any proposed amendment to the type or scope of work to be performed by the VOSB no later than three business days from the date the Prime Contractor becomes aware of the circumstances supporting the request. Failure to receive written approval prior to a change in type or scope is a violation of the STATE OF ILLINOIS VETERAN SMALL BUSINESS PARTICIPATION AND UTILIZATION PLAN and can subject the contractor to contract sanctions.**

<i>Test Brown</i>	President	04/19/2022	<i>Jano Smith</i>
Signature for Prime Contractor	Title	Date	Signature for VOSB Contractor
			Project Manager
			04/19/2022
			Date

- ▶ Contract Number
- ▶ VOSB Firm Name
- ▶ Circle All That Apply
- ▶ Pay Item Number
- ▶ Description
- ▶ Quantity
- ▶ Unit Price
- ▶ Total Contract Amount
- ▶ Total VOSB Credit Amount
- ▶ Prime and Subcontractor Signature

Good Faith Efforts



DBE FORM 2023

Demonstration of Good Faith Efforts to Achieve DBE Subcontracting Goal

If the DBE contract goal was not achieved, the Good Faith Efforts checklist and contacts log must be submitted with the bid. Failure to do so may render the Bidder's solicitation response non-responsive and cause it to be rejected, or render the Bidder ineligible for contract award, at ISTHA's sole discretion. **The Bidder must provide all evidence relied upon in support of its Good Faith Efforts with its bid.**

Good Faith Efforts Checklist

Insert on each line below the initials of the authorized Bidder representative who is certifying the Bidder has completed the activities described below and attach proof of such efforts for review. If any of the items were not completed, attach a detailed written explanation. If any other efforts were made to obtain DBE participation in addition to the items listed below, attach a detailed written explanation.

Identified portions of the contract work capable of performance by available DBEs, including, where appropriate, breaking out contract work items into economically feasible units to facilitate DBE participation even when the Bidder could perform those scopes with its own forces.

Solicited through reasonable and available means (e.g., pre-bid meetings, networking session, written notices, advertisements) DBEs to perform the types of work that could be subcontracted on this project, within sufficient time to allow them to respond.

- ILUCP DBE Directory:
<http://www.idot.illinois.gov/doing-business/certifications/disadvantaged-business-enterprise-certification/il-ucp-directory/index>
- City of Chicago's MWBE Directory:
<https://chicago.mwdbe.com/FrontEnd/VendorSearchPublic.asp?TN=Chicago>
- County of Cook, IL's MWBE Directory:
<http://www.cookcountyl.gov/mbewbevebe-directory/>
- Small Business Administration's SBA 8(a) Directory:
http://dsbs.sba.gov/dsbs/search/dsp_dsbs.cfm

Provided timely and adequate information about the plans, specifications and requirements of the contract. Followed up initial solicitations to answer questions and encourage DBEs to submit bids.

Negotiated in good faith with interested DBEs that submitted bids and thoroughly investigated their capabilities.

Made efforts to assist interested DBEs in obtaining bonding, lines of credit, or insurance as may be required for performance of the contract (if applicable).

Utilized resources available to identify available DBEs, including but not limited to DBE assistance groups; local, state and federal minority or women business assistance offices; and other organizations that provide assistance in the recruitment and placement of DBEs.

Affidavit of Truthfulness: Signature below affirms accuracy of Good Faith Efforts and Tollway to provide above information

Print Name: _____ Phone contact: _____

Position: _____ E-mail address: _____

Signature: _____ Date: _____



DBE FORM 2023

Good Faith Efforts Contacts Log for Soliciting - DBE Participation: Form 2023 continued

Project name: _____ Project number: _____

Bidder name: _____ Contact person: _____

Use this form to document all contacts and responses (telephone, e-mail, fax, etc.) regarding the solicitation of DBEs. Duplicate as needed. **The Bidder must provide all evidence relied upon in support of its Good Faith Efforts with its bid.**

Name of DBE	Date and method of contact	Scope of work solicited	Reason agreement was not reached

Affidavit of Truthfulness: Signature below affirms accuracy of Good Faith Efforts and Tollway to provide above information

Print Name: _____ Phone contact: _____

Position: _____ E-mail address: _____

Signature: _____ Date: _____

EEO 1256 FORM INSTRUCTION (part 1)

#	Item	Instructions
1	Job titles	List the job classifications/titles that are needed to complete the scope of work-including the entire workforce for the prime and all subcontractors. This includes all diverse and non-diverse employee job classifications/titles.
2	Number of Hours required to complete job for each title?	List how many labor hours are needed to complete the scope of work for each classification/title.
3	Number of positions in the job title to complete the job?	List how many employees are needed to complete the scope of work for each job title.
4	Number currently employed in the job title?	List how many employees are currently employed at each job title/position.
5	Number from column 4, that are minorities?	List the number of minority hires from #4 your firm currently has for each position/job title.
6	Number from column 4, that are Female?	List the number of female hires from #4 your firm currently has for each position/job title
7	Number of positions needed to be hired? (column 3-4) Automatic Calculation?	Calculation of the difference between #3 and #4 above; or how many of the positions specified in #3 are currently open/vacant that the contractor will commit to.

EEO 1256 FORM INSTRUCTION (part 2)

8	How many apprentices will be hired for each job title?	List the number of apprentice hires your firm will commit to for each position. Note - apprentices are only bona fide apprentices currently in a training program certified by the U.S. Department of Labor, and hours credited towards the EEO Program are only those hours the apprentice was employed at the construction site.
9	How many Journeymen will be hired?	List the number of journeymen hires your firm will commit to for each position. Note - certified by the U.S. Department of Labor, and hours credited towards the EEO Program are only those hours the journeymen spends employed at the construction site.
10	How many trainees will be hired?	List the number of trainee hires your firm will commit to for each position. Hours credited towards the EEO Program are only those hours the journeymen spends employed at the construction site.
11	How many minority hires and hours for each position/hire?	Number of minority workers that will be hired for each position, and the number of minority hours that your firm will commit to, to meet the minority goal. The number of hires should not be more than column #7 for each position/title.
12	How many female hires and hours for each position/hire?	Number of female workers that will be hired for each position, and the number of female hours that will be committed to meet the female goal. The number of hires should not be more than column #7 for each position/title.
13	Anticipated hire dates for each position/titles?	List the anticipated hiring date for the minorities, women, apprentices and journeymen hires for each position/title committed to.

FORM 1256- WORKFORCE PROJECTION



ILLINOIS TOLLWAY
 2700 Ogden Avenue, Downers Grove, IL 60515
 (630) 241-6800 • illinoistollway.com

FORM 1256-WORKFORCE PROJECTION

The undersigned bidder has analyzed minority group and female populations, unemployment rates and availability of workers for the location in which this contract work is to be performed, and for the locations from which the bidder recruits employees, and hereby submits the following workforce projection including a projection for minority and female employee utilization in all job categories in the workforce to be allocated to this contract. The Form 1256 is due from the lowest apparent bidder on the 5th calendar day after bids are due or the bid will be deemed non-responsive. The completed form should be emailed to: contractcompliance@getipass.com.

1	2	3	4	5	6	7	8	9	10	11	12	13		
Job Titles	Number of hours required to complete job for each title	Number of positions in the job title to complete job	Number currently employed in the job title	Number from column 4, that are minorities?	Number from column 4, that are Women?	Number of positions needed to be hired? (column 3-4) Automatic Calculation	How many apprentices will be hired for each job title?	How many journeymen will be hired for each job title?	How many trainees will be hired for each job title?	Minorities to be hired in each title?	Number of minority hours committed to meet the required goal	Females to be hired in this title?	Number of female hours committed to meet the required goal	Anticipated hire dates for titles
Laborer	16	2	1	1	1	1	0	0	0	1	8	0	2	4/30/2022
Operator	8	1	1	0	0	0	0	0	0	0	0	0	0	
TOTALS	24	3	2	1	1	1	0	0	0	1	8	0	2	

The undersigned agrees to commit to meeting the goal of minority and female participation on this contract. In the event that the undersigned is unable to meet the hires with its own efforts, the company will further commit to reach out to Tollway Contract Compliance for assistance with hires in each category.

Test Incorporated

Company Name
 (Rev 7/2020)

Test Brown

Signature of Owner/Operator or designee
 EEO - 7

REMINDERS

- ▶ **DBE & VOSB FORM 2026 - UTILIZATION PLAN - Due at the time of bid.**
- ▶ **DBE & VOSB FORM 2025 - DBE PARTICIPATION STATEMENT FORM - due on the fifth (5th) calendar day after bids are due or the bid will be deemed non-responsive.**
- ▶ **Good Faith Efforts FORM 2023 - Due at the time of bid.**
- ▶ **FORM 1256- WORKFORCE PROJECTION - due on the fifth (5th) calendar day after bids are due or the bid will be deemed non-responsive.**
- ▶ **A Copy of current Certification Letters should be provided for each certified vendor listed on the 2026 Form.**

CONTRACT COMPLIANCE

Contact Information

For questions on Compliance issues please contact us at contractcompliance@getipass.com

Compliance Staff Contacts:

- Seannica Spencer, Sr. Contract Compliance Analyst – sspencer@getipass.com
- Grace Perez, Contract Compliance Manager – gperez@getipass.com
- Shelly Jones, Sr. Manager of Program Development – sjones@getipass.com

