



McHenry County  
Purchasing Department  
2200 N Seminary Avenue  
Woodstock, IL 60098

**Bid 22-5558**  
**McHenry County Division of Transportation (MDCOT)**  
**Salt Dome Roof Replacement**

Contact Person:

Djuana Leonard, C.P.M., Procurement Specialist Email: [dmleonard@mchenrycountyil.gov](mailto:dmleonard@mchenrycountyil.gov)

**Bid Due Date and Time: *November 16, 2022 no later than 9:00 a.m. (CST)***

PDFs should be emailed to [dmleonard@mchenrycountyil.gov](mailto:dmleonard@mchenrycountyil.gov).

Electronic bids accepted, no onsite bid opening.

**MANDATORY COVER PAGE (1/6)**

**PLEASE TYPE or PRINT CLEARLY**

Company: CJM Roofing, LLC. Date: 11/16/2022

Contact Person: Christopher MacInnes

Address: 5333 NW Hwy City: Crystal Lake State: IL Zip Code: 60014

Email Address: chris@cjmroof.com

Telephone Number: 224-363-2696

The attention of bidders is directed to the McHenry County Purchasing Ordinance, amended June 1, 2021. This Ordinance is incorporated by reference into this bid as if it were contained herein. If you have not received a copy of the above Ordinance and desire a copy, please contact the Purchasing office.

Any communication regarding this bid between the date of issue and date of award is required to go through the Procurement Specialist listed above (or the Purchasing Administrative Specialist). Unauthorized contact with other McHenry County staff or officers is strictly forbidden.

**MANDATORY PAGE (2of6)**  
**Bid PAGE**

LUMP SUM COST: \$ 99,585.00

Written lump sum cost: Ninety-Nine Thousand Five Hundred Eighty-Five Dollars and 00/100

Exceptions to this Bid: \_\_\_\_\_

**MANDATORY PAGE (3of6)**  
**REFERENCES**

List three (3) references, other than The County of McHenry, that you have done similar work, service or supplied similar products to within the last twelve (12) months. **It is the bidder's responsibility to ensure references respond upon request. Email addresses are required.**

Entity: Home of the Sparrow  
Address: 2116 Ringwood Road City, State and Zip Code: McHenry, IL 60050  
Telephone Number: 815-719-0749 Contact Person Debbie DeGraw  
Email Address: ddegrow@hosparrow.org

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Entity: Crystal Lake Park District  
Address: 1051 W Route 176 City, State and Zip Code: Crystal Lake, IL 60014  
Telephone Number: 815-482-2327 Contact Person Kyle Berge  
Email Address: kberge@crystallakeparks.org

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Entity: Terri Tepper  
Address: 261 Kimberly Road City, State and Zip Code: North Barrington, IL 60010  
Telephone Number: 847-567-2118 Contact Person Terri Tepper  
Email Address: tpt2118@gmail.com

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**MANDATORY PAGE (4of6)**  
**CERTIFICATONS and SIGNATURE PAGE**

- I acknowledge to have read, understand, and agree to the **Bid or Request Documents** Provided for this Bid or Request as posted on McHenry County's Website  Yes
- I acknowledge to have read, understand, and agree to the policies contained within the **McHenry County Purchase Ordinance**, amended June 1, 2021  Yes
- I acknowledge I have read, understand, and agree to the **Standard Terms and Conditions** provided for this Bid or Request as posted on McHenry County's website.  Yes
- I acknowledge to have read, understand, and agree to all **Addenda** provided for this Bid or Request as posted on McHenry County's website.  Yes
- Vendor certifies it has reviewed, completed & submitted the **Mandatory Page 5of6 County of McHenry Status of Ownership Information**  Yes
- I acknowledge there to be **six (6) Mandatory Pages, including the W-9 (6of6)** to be completed and/or submitted for my Bid or Submission to be considered.  Yes
- Submitter certifies it has not been barred from contracting with a unit of State or Local Government because of a violation of Section 33E-3 or 33E-4 of the Criminal Code of 1961, as amended.  Yes
- Vendor certifies it is aware that all contracts for the Construction of Public Works are subject to the **Illinois Prevailing Wage Act** (820 ILCS 130/1-12) and this Bid or Request  Is Subject to,  Is NOT Subject to the Illinois Prevailing Wage Act.  Yes
- Vendor acknowledges this Bid or Request  Is Subject to,  Is NOT Subject to the **Employment of Illinois Workers in Public Works Act** (30 ILCS 570/3) and will comply with the requirements set forth in this Act.  Yes
- I acknowledge this Bid or Request  Requires,  Does NOT Require a **Bid Bond**  Yes
- In addition, under penalties of perjury, I certify that my correct **Federal Taxpayer Identification Number** is: 87-2152792
  
- I am doing business as a (please indicate one):  Sole Proprietorship  
 Corporation: State of Incorporation: \_\_\_\_\_  
 Partnership  
 Other Limited Liability Corporation

I have carefully examined the Bid or Request, Scope of Work, Specifications, and any other documents accompanying or made a part of this Request. I certify I am duly authorized to submit on behalf of the firm, and the firm is ready, willing, and able to perform if awarded the contract. I further certify, under oath, this proposal is made without prior understanding, agreement, connection, discussion, or collusion with any other person, firm or corporation submitting a proposal for the same product or service.

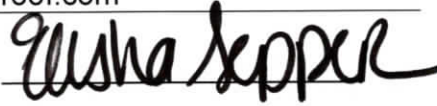
Individual/Company/Corporation: CJM Roofing, LLC.

Business Address: 5333 NW Hwy City, State and Zip Code: Crystal Lake, IL 60014

Printed Name and Title: Christopher MacInnes - Owner

Signature:  \_\_\_\_\_ Date: 11/15/22

Telephone Number: 224-363-2696 Email: chris@cjmroof.com

Witness Name & Title: Elisha Tepper - Director of Operations Witness Signature: 

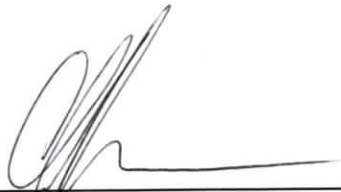
*End of Document*



McHenry County  
 Purchasing Department  
 2200 N Seminary Avenue  
 Woodstock IL 60098  
[purchasing@mchenrycountvil.gov](mailto:purchasing@mchenrycountvil.gov)

### Status of Ownership Information

*\*Illinois Public Act 102-0265 was approved in August 2021 requiring collection of "Status of Ownership" information.*

1. APPLICATION TYPE: <input checked="" type="checkbox"/> New      Change/Update	2. FEDERAL I.D. # OR SOCIAL SECURITY #: 87-2152792	3. DATE: 11/16/2022
4. BUSINESS NAME & ADDRESS: CJM Roofing, LLC. 5333 Northwest Highway Crystal Lake, IL 60014	5. REMIT ADDRESS FOR PAYMENTS (if different):	
6. STATUS OF OWNERSHIP (This field is <u>required</u> . Please select at least one): <i>This information is collected for reporting purposes only and not vendor selections.</i> <i>Please check any of the following that apply to the ownership of your firm.</i>  Prefer not to disclose <input checked="" type="checkbox"/> Not Applicable  Minority-Owned      Women-Owned      Veteran-Owned      Small Business		7. HOW ARE YOU CERTIFYING?  Certificates Attached  <input checked="" type="checkbox"/> Self-Certifying
8. PRIMARY CONTACT PERSON (Bids/Quotes/Purchase Orders):  Name: Elisha Tepper Official Capacity: Director of Operations Telephone #: (224) 363-2696  E-Mail: elisha@cjmroof.com	9. PERSONS AUTHORIZED TO SIGN Bids/Offers/Contracts:  Name: Christopher MacInnes Official Capacity: Owner  Name: Official Capacity:	
<p><b>PLEASE PRINT THIS FORM, SIGN IT, AND SEND IT BACK WITH CERTIFICATES OF OWNERSHIP (unless self-certifying).</b></p>		
10. I hereby certify that the information supplied herein is true and correct.  <div style="display: flex; justify-content: space-between;"> <div data-bbox="240 1719 792 1789"> <p><b>Christopher MacInnes - Owner</b>            _____            Print or Type Name and Title</p> </div> <div data-bbox="885 1564 1437 1789">             _____            Signature         </div> </div>		

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
requester. Do not  
send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p>1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>CJM Roofing</b></p> <p>2 Business name/disregarded entity name, if different from above</p>	
	<p>3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p><input type="checkbox"/> Individual/sole proprietor or single-member LLC    <input type="checkbox"/> C Corporation    <input type="checkbox"/> S Corporation    <input type="checkbox"/> Partnership    <input type="checkbox"/> Trust/estate</p> <p><input checked="" type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ <u>  S  </u></p> <p><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</p> <p><input type="checkbox"/> Other (see instructions) ▶</p>	<p>4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p><small>(Applies to accounts maintained outside the U.S.)</small></p>
	<p>5 Address (number, street, and apt. or suite no.) See instructions. <b>5333 NW HWY</b></p> <p>6 City, state, and ZIP code <b>Crystal Lake, IL 60014</b></p> <p>7 List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

<p><b>Part I Taxpayer Identification Number (TIN)</b></p> <p>Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i>, later.</p> <p><b>Note:</b> If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="10" style="text-align: center;"><b>Social security number</b></td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td colspan="10" style="text-align: center;">or</td> </tr> <tr> <td colspan="10" style="text-align: center;"><b>Employer identification number</b></td> </tr> <tr> <td style="width: 20px; height: 20px;">8</td> <td style="width: 20px; height: 20px;">7</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;">-</td> <td style="width: 20px; height: 20px;">2</td> <td style="width: 20px; height: 20px;">1</td> <td style="width: 20px; height: 20px;">5</td> <td style="width: 20px; height: 20px;">2</td> <td style="width: 20px; height: 20px;">7</td> <td style="width: 20px; height: 20px;">9</td> <td style="width: 20px; height: 20px;">2</td> </tr> </table>	<b>Social security number</b>																					or										<b>Employer identification number</b>										8	7		-	2	1	5	2	7	9	2
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<p><b>Part II Certification</b></p> <p>Under penalties of perjury, I certify that:</p> <ol style="list-style-type: none"> <li>The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and</li> <li>I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and</li> <li>I am a U.S. citizen or other U.S. person (defined below); and</li> <li>The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.</li> </ol> <p><b>Certification instructions.</b> You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.</p>	
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<b>Sign Here</b>	Signature of U.S. person ▶ <i>Christopher MacInnes</i>	Date ▶ <b>4/20/2022</b>
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### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

# MANDATORY PAGE

## SECTION 00 43 36 PROPOSED SUBCONTRACTORS FORM

**THIS FORM MUST BE COMPLETED AND RETURNED  
WITH BID SUBMISSION**

**FAILURE TO RETURN WITH BID MAY CAUSE BID TO BE  
REJECTED**

**HEREWITH IS THE LIST OF SUBCONTRACTORS / SUPPLIERS REFERENCED IN  
THE BID SUBMITTED BY:**

**(BIDDER)** CJM Roofing, LLC.

**DATED** November 15th, 2022 **AND WHICH IS AN INTEGRAL PART OF THE BID  
FORM.**

LIST ONE NAME FOR EACH LINE ITEM. FAILURE TO LIST THE REQUESTED  
SUBCONTRACTOR OR SUPPLIER OR LISTING MULTIPLE NAMES WILL RENDER THE BID  
"NON-RESPONSIVE" AND THE BID WILL BE SUBJECT TO DISQUALIFICATION AT THE  
OWNER'S SOLE DISCRETION. IF BIDDER WILL SELF-PERFORM THE WORK SUBJECT  
ITEM, PLEASE ENTER THE BIDDER'S NAME OR WRITE "SELF-PERFORM" IN THE SPACE  
PROVIDED.

BIDDER AGREES THAT, IF AWARDED THE CONTRACT FOR THIS PROJECT, HE WILL  
CONTRACT WITH THE SUBCONTRACTORS AND SUPPLIERS INDICATED BELOW AND  
WILL NOT DEVIATE WITHOUT EXPRESS WRITTEN AUTHORIZATION FROM THE OWNER.

THE FOLLOWING WORK WILL BE SELF-PERFORMED, OR PERFORMED BY  
SUBCONTRACTORS, OR PROVIDED BY SUPPLIERS, AND COORDINATED BY US:

### **1.01 LIST OF SUBCONTRACTORS AND SUPPLIERS – Please use empty cells to provide additional subcontractors or suppliers**

WORK SUBJECT	SUBCONTRACTOR / SUPPLIER NAME
A. <b>Roofing Contractor</b>	CJM Roofing, LLC.
B. <b>Other-List</b>	ABC Supply Company
C. <b>Other-List</b>	
D. <b>Painting/Miscellaneous</b>	Dulcedo Construction
E.	