

CITY OF SOUTH BEND, INDIANA
CONTRACTOR'S QUOTE FOR PUBLIC WORK



PROJECT NAME: The Hope Building Roof Replacement

PROJECT NO. 125-021BR2

QUOTES DUE Tuesday, October 14, 2025, at 9:00 A.M. (EDT)

(Must be completed for all quotes. Please type or print)

Date: 10/14/2025 Firm: FOSO Construction ,LLC

Address: 6002 N Michigan Rd

City/State/Zip: Indianapolis, IN 46228 Telephone Number: (317) 362.0645

Email Address: lmezz@fosoconstruction.com /crgarcia@fosoconstruction.com

Agent of Bidder (if Applicable): _____

Pursuant to notices given, the undersigned offers to furnish labor and/or material necessary to complete the public works project of:

Roof and Skylight Replacement at The Hope Building (530 S. Michigan St.)

the City of South Bend, Indiana, in accordance with plans and specifications prepared by:

Tom Loew Design Build

and dated 08/12/2025 for the sum of (enter the Total Quote as shown on the Proposal)

Eight Hundred Seventy Thousand Dollars and 00/XX (\$ 870,000.00)

(Enter Sum of Total Quote plus Alternates shown on Proposal) (Numerical)

If alternative quotes apply, the undersigned submits a proposal for each in accordance with the notice. Any addendums attached will be specifically referenced at the applicable page.

If additional units of material included in the contract are needed, the cost of units must be the same as that shown in the original contract if accepted by the City of South Bend. If the quote is to be awarded on a unit basis, the itemization of the units shall be shown on a separate attachment.

By _____

(Signature)

Charles Garcia

(Printed Name of Person Signing)

ACCEPTANCE

The above quote is accepted this _____ day of _____ 20 _____

Subject to the following conditions: _____

BOARD OF PUBLIC WORKS

President

Members



QUOTE/PROPOSAL CITY OF SOUTH BEND

PROJECT NAME The Hope Building Roof Replacement
PROJECT NO. 125-021BR2
QUOTES DUE Tuesday, October 14, 2025, at 9:00 A.M. (EDT)

BASE QUOTE

| Item No. | Description | Quantity | Unit | Unit Price | Total Amount |
|----------------------------|------------------------------------|----------|------|---------------|---------------|
| 1 | Roof Area 1 – Main Building | 1 | LSUM | \$ 514,200.00 | \$ 514,200.00 |
| 2 | Roof Area 2 – Addition | 1 | LSUM | \$197,110.00 | \$ 197,110.00 |
| 3 | Masonry Allowance | 1 | LSUM | \$5,000 | \$5,000 |
| 4 | Structural Reinforcement Allowance | 1 | LSUM | \$8,000 | \$8,000 |
| Total Amount of Base Quote | | | | | \$ 724,310.00 |

ALTERNATE ITEM

| Item No. | Description | Quantity | Unit | Unit Price | Total Amount |
|--------------------------------|------------------------|----------|------|------------|---------------|
| 1 | Roof Area 3 - Skylight | 1 | LSUM | \$ | \$ 145,690.00 |
| Total Amount of Alternate Item | | | | | \$ 145,690.00 |

Firm: FOSO Construction ,LLC

Address: 6002 N Michigan Rd

City/State/Zip: Indianapolis, IN 46228 Telephone Number: (317 362.0645/317.340.5540

Fax Number: (317) 362.0754

By

(Signature)

Charles Garcia

(Printed Name of Person Signing)

When the prospective Contractor is unable to certify to any of the statements below, it shall attach an explanation to this Affidavit.

**CONTRACTOR'S NON-COLLUSION AND NON-DEBARMENT AFFIDAVIT,
CERTIFICATION REGARDING INVESTMENT WITH IRAN, EMPLOYMENT ELIGIBILITY
VERIFICATION, NON-DISCRIMINATION COMMITMENT AND CERTIFICATION OF USE
OF UNITED STATES STEEL PRODUCTS OR FOUNDRY PRODUCTS**

(Must be completed for all quotes and bids. Please type or print)

STATE OF Indiana)
) SS:
Marion COUNTY)

The undersigned Contractor, being duly sworn upon his/her/its oath, affirms under the penalties of perjury that:

1. Contractor has not, nor has any other member, representative, or agent of the firm, company, corporation or partnership represented by him, entered into any combination, collusion or agreement with any person relative to the price to be bid by anyone at such letting nor to prevent any person from bidding nor to induce anyone to refrain from bidding, and that this bid is made without reference to any other bid and without any agreement, understanding or combination with any other person in reference to such bidding. Contractor further says that no person or persons, firms, or corporation has, have or will receive directly or indirectly, any rebate, fee, gift, commission or thing of value on account of such sale; and
2. Contractor certifies by submission of this proposal that neither contractor nor any of its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency; and
3. Contractor has not, nor has any successor to, nor an affiliate of, Contractor, engaged in investment activities in Iran.
 - a. For purposes of this Certification, "Iran" means the government of Iran and any agency or instrumentality of Iran, or as otherwise defined at Ind. Code § 5-22-16.5-5, as amended from time-to-time.
 - b. As provided by Ind. Code § 5-22-16.5-8, as amended from time-to-time, a Contractor is engaged in investment activities in Iran if either:
 - i. Contractor, its successor or its affiliate, provides goods or services of twenty million dollars (\$20,000,000) or more in value in the energy sector of Iran; or
 - ii. Contractor, its successor or its affiliate, is a financial institution that extends twenty million dollars (\$20,000,000) or more in credit to another person for forty-five (45) days or more, if that person will (i) use the credit to provides goods and services in the energy sector in Iran; and (ii) at the time the financial institution extends credit, is a person identified on list published by the Indiana Department of Administration.
4. Contractor does not knowingly employ or contract with an unauthorized alien, nor retain any employee or contract with a person that the Contractor subsequently learns is an unauthorized

alien. Contractor agrees that he/she/it shall enroll in and verify the work eligibility status of all of Contractor's newly hired employees through the E-Verify Program as defined by I.C. 22-5-1.7-3. Contractor's documentation of enrollment and participation in the E-Verify Program is included and attached as part of this bid/quote; and

5. Contractor shall require his/her/its subcontractors performing work under this public contract to certify that the subcontractors do not knowingly employ or contract with an unauthorized alien, nor retain any employee or contract with a person that the subcontractor subsequently learns is an unauthorized alien, and that the subcontractor has enrolled in and is participating in the E-Verify Program. The Contractor agrees to maintain this certification throughout the term of the contract with the City of South Bend, and understands that the City may terminate the contract for default if the Contractor fails to cure a breach of this provision no later than thirty (30) days after being notified by the City.

6. Persons, firms, partnerships, corporations, associations, or joint venturers awarded a contract by the City of South Bend through its agencies, boards, or commissions shall not discriminate against any employee or applicant for employment in the performance of a City contract with respect to hire, tenure, terms, conditions, or privileges of contract or employment, or any matter directly or indirectly related to contracting or employment because of race, sex, religion, color, national origin, ancestry, gender expression, gender identity, sexual orientation, or due to age or disability that does not affect that person's ability to perform the work.

In awarding contracts for the purchase of work, labor, services, supplies, equipment, materials, or any combination of the foregoing including, but not limited to, public works contracts awarded under public bidding laws or other contracts in which public bids are not required by law, the City, its agencies, boards, or commissions will consider the Contractor's good faith efforts to obtain participation by those subcontractors certified by the State of Indiana as a Minority Business ("MBE") or as a Women's Business Enterprise ("WBE") as a factor in determining the lowest, responsible, responsive bidder.

Contractors seeking the award of a City contract cannot be required to award a subcontract to an MWBE; however, they may not unlawfully discriminate against said MBE/WBE. On goal-eligible contracts, Contractors are required to either meet both MBE and WBE utilization goals or demonstrate that the Contractor has made good faith efforts to obtain participation from MBE and WBE subcontractors. A finding of noncompliance or a discriminatory practice shall prohibit that Contractor from being awarded a City contract for a period of one (1) year from the date of such determination, and such determination may also be grounds for terminating the contract to which the discriminatory practice or noncompliance pertains.

7. The undersigned Contractor agrees that the following nondiscrimination commitment shall be made a part of any contract which it may henceforth enter into with the City of South Bend, Indiana or any of its agencies, boards or commissions.

Contractor agrees not to discriminate against or intimidate any employee or applicant for employment in the performance of this contract with privileges of employment, or any matter directly or indirectly related to employment, because of race, religion, color, sex, gender expression, gender identity, sexual orientation, handicap, national origin or ancestry. Breach of this provision may be regarded as material breach of contract.

I, the undersigned bidder or agent as contractor on a public works project, understand my statutory obligations to the use of steel products or foundry products made in the United States (I.C. 5-16-8-1). I hereby certify that I and all subcontractors employed by me for this project will use steel products or foundry products made in the United States on this project if awarded. I understand I have an affirmative duty to notify the City in my bid that my proposal does not include the use of steel products or foundry products made in the United States. I understand it is my sole obligation and responsibility to provide a justification to the City, subject to review and approval, why the cost of United States made steel or foundry products is unreasonable. Prior to award and upon submission of bid which does not use steel products or foundry products made in the United States, the City, through its director of public works, shall make a determination if the price of United States made steel or foundry is unreasonable. I understand that violations hereunder may result in forfeiture of contractual payments.

I hereby affirm under the penalties of perjury that the facts and information contained in the foregoing bid for public works are true and correct.

Dated this 13 day of OCT, 20 25

POSO CONSTRUCTION
Contractor/Bidder (Firm)

[Signature]
Signature of Contractor/Bidder or Its Agent

CHARLES R. GARCIA (PRESIDENT)
Printed Name and Title

Subscribed and sworn to before me this 13 day of OCTOBER, 20 25

My Commission Expires 10-15-2029

[Signature]
Notary Public

County of Residence HAMPTON





**CITY OF SOUTH BEND
MINORITY AND WOMEN BUSINESS ENTERPRISE INCLUSION PROGRAM PLAN
FORM MBE-1.0
MBE UTILIZATION PLAN**

This completed form should be supplied with Bids that pertain to City of South Bend Public Works Projects involving MBE participation. It is the bidder's sole responsibility to verify whether any listed minority or woman business meets the MBE qualifications.

*****Goals should be calculated based on the Base Bid only.*****

Project Number: 125-021BR2 Project Name: The Hope Building Roof Replacement

Bidder: FOSO Construction ,LLC Total Bid Amount: \$870,000.00 MBE Goal: 0.6%

Page 1 of 1

| Name & Address of MBE | Primary Contact Person (Name/Telephone) | Scope of Work to be Performed (Attach scope/schedule if you need additional space) | Dollar Amount of MBE Component | Percentage of Total Bid/Proposal |
|-----------------------------|--|---|-----------------------------------|--|
| FOSO Construction ,LLC | Luciano Mezzeta 317-628-7919 | Project Management | \$136,000.00 | 17% |
| Indiana Elite Services, LLC | Alejandro Saucedo | Project Supervision | \$35,000.00 | 4.3% |
| | | | | |
| | | | | |

Submitted by: Charles Garcia
Print Name


Signature

10/14/2025
Date

*****Goals should be calculated based on the Base Bid only.*****



**CITY OF SOUTH BEND
MINORITY AND WOMEN BUSINESS ENTERPRISE INCLUSION PROGRAM PLAN
FORM WBE-1.0
WBE UTILIZATION PLAN**

This completed form should be supplied with Bids that pertain to City of South Bend Public Works Projects involving WBE participation. It is the bidder's sole responsibility to verify whether any listed minority or woman business meets the WBE qualifications.

*****Goals should be calculated based on the Base Bid only.*****

Project Number: 125-021BR2 Project Name: The Hope Building Roof Replacement

Bidder: FOSO Construction ,LLC Total Bid Amount: \$870,000.00 WBE Goal: 2.1%

Page 1 of 1

| Name & Address of WBE | Primary Contact Person (Name/Telephone) | Scope of Work to be Performed (Attach scope/schedule if you need additional space) | Dollar Amount of WBE Component | Percentage of Total Bid/Proposa l |
|-----------------------|--|---|-----------------------------------|--|
| Xtreme Cleaning | Contresse Harris | Job Progress Cleaning, Final Cleaning, & Site Support Operations | \$18,000.00 | 2.1% |
| | | | | |
| | | | | |
| | | | | |

Submitted by: Charles Garcia
Print Name


Signature

October 14, 2025
Date

*****Goals should be calculated based on the Base Bid only.*****



STATE OF INDIANA

Michael K. Braun, Governor

DEPARTMENT OF ADMINISTRATION Division of Supplier Diversity

Indiana Government Center South
402 West Washington Street, Room W462
Indianapolis, IN 46204
(317) 232 - 3061

February 11, 2025

Mr. Charles Garcia
Foso Construction, LLC
6002 North Michigan Road.
Indianapolis, IN 46228

Subject: Application for MBE Certification

Dear Mr. Garcia,

Congratulations! The Indiana Department of Administration, Division of Supplier Diversity is pleased to inform you that **Foso Construction, LLC** is hereby certified as a Minority Business Enterprise (MBE).

Your company provides a commercially useful function in the areas listed below. Only work performed in these areas will be counted towards Minority Business Enterprise participation:

UNSPSC CODE(S)

| <i>Code</i> | <i>Description</i> |
|-------------|---|
| 15121900 | Greases |
| 26111704 | Battery chargers |
| 26111710 | Product specific battery packs |
| 31211801 | Paint or varnish removers |
| 39121703 | Cable ties |
| 40141738 | Drain plugs |
| 46151505 | Barriers |
| 46161500 | Traffic control |
| 70171802 | Storm water drainage |
| 72120000 | Nonresidential building construction services |
| 72121406 | School building construction services |
| 72141121 | Water main construction service |
| 72141123 | Manhole Construction Service |
| 72141505 | Earthmoving service |
| 81151604 | Land surveying |

On September 13, 2010, the Governor's Commission on Supplier Diversity approved the department's effort to streamline its recertification process. Instead of conducting an onsite visit to each company seeking recertification, the department now has the discretion to waive the visit after a thorough review of the company's file and recertification documents. We have approved your recertification and it is valid through **February 29, 2028**. Please note that IDOA continues to reserve the right to conduct a site visit or phone interview at any time with certified companies.

Referencing: Foso Construction, LLC

Although your certification is valid for three years, you are required to submit an annual *Affidavit of Continued Eligibility (ACE)* form each year. Instructions on how to receive and complete this form can be located at <https://www.in.gov/idoa/mwbe/minority-and-womens-business-enterprises/certify-your-business/>. Please remember that you must notify us immediately if any changes occur. Failure to notify us of changes or to provide an ACE form annually will result in the revocation of your certification. Changes include, but are not limited to, changes in location, contact information, ownership, and control.

We encourage you to visit IDOA's procurement website, www.in.gov/idoa/2464.htm, and update your Business Registration Profile. You must review and update your profile regularly, because state purchasing agents and prime contractors may use this information to contact you for business opportunities.

While this letter serves as notification of certification, it does not serve to prove continued eligibility. Please visit <https://www.in.gov/idoa/mwbe/2743.htm> to verify your certification status. Please contact our office at (317) 232-3061 or mwbe@idoa.in.gov if you have any other questions or concerns about your letter.

Sincerely,

Peter Sobun, Director of Certification
Indiana Department of Administration
Division of Supplier Diversity

PS/jm



STATE OF INDIANA

Eric J. Holcomb, Governor

DEPARTMENT OF ADMINISTRATION

Division of Supplier Diversity

Indiana Government Center South
402 West Washington Street, Room W462
Indianapolis, IN 46204

October 17, 2024

Mr. Charles Garcia
Foso Construction LLC
6002 Michigan Road
Indianapolis, IN 46228

Subject: Indiana Veteran Owned Small Business Enterprise Certification

Dear Mr. Garcia:

Congratulations! The Indiana Department of Administration Division of Supplier Diversity ("Division") is pleased to inform you that **Foso Construction LLC** is hereby certified as an Indiana Veteran Owned Small Business Enterprise ("IVOSB").

Your company provides a commercially useful function in the areas listed below. Only work performed in these areas will be counted towards IVOSB participation:

UNSPSC CODE(S)

| <i>Code</i> | <i>Description</i> |
|-------------|---|
| 70171802 | Storm water drainage |
| 72120000 | Nonresidential building construction services |
| 72121406 | School building construction services |
| 72141121 | Water main construction service |
| 72141123 | Manhole Construction Service |

Foso Construction LLC's certification is valid from **October 17, 2024**, through **October 17, 2026**. Annually, the company must complete the Affidavit of Continued Eligibility Form and submit it to the Division. The company must complete the recertification process every two years. The Division recommends that you start this process at least 90 days prior to the expiration of the company's certification to avoid any lapse in your certification. More information regarding this process, along with additional information about the IVOSB program and available opportunities, can be found at: <https://www.in.gov/idoa/2863.htm>.

Referencing: Foso Construction LLC

Please contact our office at (317) 232-3061 or indianaveteranspreference@idoa.in.gov if you should have any questions or concerns.

Sincerely,

Peter Sobun

Peter Sobun, Director of Certification
Indiana Department of Administration
Division of Supplier Diversity

PS/jm



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/18/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | | | |
|--|--|--|--|---------------|
| PRODUCER Witkemper Insurance Group P.O. Box 547 104 East 10th Street Greensburg IN 47240 | | CONTACT NAME: Kristin Milburn PHONE (A/C, No, Ext): 812-663-3500 E-MAIL ADDRESS: kmilburn@wig-ins.com FAX (A/C, No): 812-663-3421 | | |
| INSURED Foso Construction, LLC Furrow Construction Corp. 6002 Michigan Road Indianapolis IN 46228 FOSOCON-01 | | INSURER(S) AFFORDING COVERAGE | | NAIC # |
| | | INSURER A : Property Owners Insurance | | 32905 |
| | | INSURER B : Auto-Owners Insurance Company | | 18988 |
| | | INSURER C : | | |
| | | INSURER D : | | |
| | | INSURER E : | | |
| INSURER F : | | | | |

COVERAGES**CERTIFICATE NUMBER:** 2068421298**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|--|-----------|----------|---------------|-------------------------|-------------------------|---|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | 09783927 | 4/1/2025 | 4/1/2026 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$ |
| B | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | 5378392700 | 4/1/2025 | 4/1/2026 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0 | | | 5378392701 | 4/1/2025 | 4/1/2026 | EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$ |
| A | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N N | | N/A | A106550751 | 4/1/2025 | 4/1/2026 | PER STATUTE E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |
| A | Leased/Rented Equipment | | | 09783927 | 4/1/2025 | 4/1/2026 | Limit Deductible \$250,000 \$1,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Kristin Milburn

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STATE OF INDIANA

Eric J. Holcomb, Governor

DEPARTMENT OF ADMINISTRATION

Division of Supplier Diversity Indiana

Government Center South 402 West
Washington Street, Room W462
Indianapolis, IN 46204 (317) 232 - 3061

February 11, 2025 Mr. Alejandro Saucedo

Indiana's Elite Cleaning LLC
403 West Jefferson Boulevard, ½
South Bend, IN 46601

Subject: Request for amendment to MBE certification

Dear Mr. Saucedo,

A request for amendment of the UNSPSC code(s) assigned to Indiana's Elite Cleaning LLC was received January 29, 2025. After a thorough review, the Indiana Department of Administration, Division of Supplier Diversity has determined the firm is eligible for an amendment to the previously granted UNSPSC code(s).

This determination is based on information submitted to us, which indicates that the company provides a commercially useful function in the areas listed below, which will be added to its certification listing. Below is a full listing of the UNSPSC code(s) it is now currently certified in:

UNSPSC CODE(S)

| Code | Description |
|----------|--|
| 72102401 | Exterior painting services |
| 72151302 | Commercial painting service |
| 72151303 | Industrial Painting Service |
| 72152700 | Concrete Installation and Repair Services |
| 72153501 | Building exterior cleaning service |
| 72153504 | High pressure water blasting |
| 72153505 | Construction site clean up service |
| 72153506 | New building post construction cleanup service |
| 76111500 | General building and office cleaning services |
| 76111600 | Building component cleaning services |
| 76111700 | Building site clean up |
| 76111800 | Transport vehicle cleaning |
| 86131502 | Painting |

This certification is valid through February 28, 2027. Although your certification is valid for a three-year period, you are required to submit an annual Affidavit of Continued Eligibility, which reflects updates regarding the issues critical to maintaining your certification. However, you must notify us immediately if any changes occur. Failure to notify us of changes or to provide the Affidavit of Continued Eligibility form annually will result in the revocation of your certification.

Changes include, but are not limited to:

- Change in location or contact information (address, phone number, e-mail address, etc.)
- Change in services provided (amendment to certification)
- Change in ownership
- Change in control

While this letter serves as notification of certification, it does not serve to prove continued eligibility. Please visit <http://www.in.gov/idoa/mwbe/2743.htm> to verify your certification status. Please contact our office at (317) 232-3061 or mwbe@idoa.in.gov if you have any questions or concerns about your letter. if you have any other questions.

Sincerely,

Peter Sobun

Peter Sobun, Director of Certification
Indiana Department of Administration
Division of Supplier Diversity

PS

DATE (MM/DD/YYYY)
10/08/2024



STATE OF INDIANA

Mike Braun, Governor

DEPARTMENT OF ADMINISTRATION Division of Supplier Diversity

Indiana Government Center South
402 West Washington Street, Room W462
Indianapolis, IN 46204
(317) 232 - 3061

May 12, 2025 Ms. Contresse Harris

Xtreme Clean Residential and Commercial Cleaning LLC

915 S. Twyckenham Drive
South Bend, IN 46615

Subject: Application for M/WBE Certification

Dear Ms. Harris,

Congratulations! The Indiana Department of Administration, Division of Supplier Diversity is pleased to inform you that **Xtreme Clean Residential and Commercial Cleaning LLC** is hereby certified as a Minority and Women's Business Enterprise (M/WBE).

Your company provides a commercially useful function in the areas listed below. Only work performed in these areas will be counted towards Minority or Women's Business Enterprise (M/WBE) participation:

UNSPSC CODE(S)

| <i>Code</i> | <i>Description</i> |
|-------------|---|
| 47130000 | Cleaning and janitorial supplies |
| 47131800 | Cleaning and disinfecting solutions |
| 76111500 | General building and office cleaning services |
| 76111501 | Building cleaning services |

This certification is valid through **May 31, 2028**.

Although your certification is valid for three years, you are required to submit an annual ***Affidavit of Continued Eligibility (ACE)*** form each year. Instructions on how to receive and complete this form can be located at <https://www.in.gov/idoa/mwbe/minority-and-womens-business-enterprises/certify-your-business/>. Please remember that you must notify us immediately if any changes occur. Failure to notify us of changes or to provide an ACE form annually will result in the revocation of your certification. Changes include, but are not limited to, changes in location, contact information, ownership, and control.

We encourage you to visit IDOA's procurement website, www.in.gov/idoa/2464.htm, and update your Business Registration Profile. You must review and update your profile regularly, because state purchasing agents and prime contractors may use this information to contact you for business opportunities.

Reference: Xtreme Clean Residential and Commercial Cleaning LLC

While this letter serves as notification of certification, it does not serve to prove continued eligibility. Please visit <https://www.in.gov/idoa/mwbe/2743.htm> to verify your certification status. Please contact our office at (317) 232-3061 or mwbe@idoa.in.gov if you have any other questions or concerns about your letter.

Sincerely,

Peter Sobun

Peter Sobun, Director of Certification
Indiana Department of Administration
Division of Supplier Diversity

PS/aw



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/13/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| | | |
|--|--|--------------------------|
| PRODUCER Don Hollingsworth 2226 MIAMI ST SOUTH BEND IN 46613 | CONTACT NAME: Don Hollingsworth | |
| | PHONE (A/C, No, Ext): (574) 233-3400 | FAX (A/C, No): |
| | E-MAIL ADDRESS: dholling@amfam.com | |
| | INSURER(S) AFFORDING COVERAGE | |
| | NAIC # | |
| | INSURER A: Midvale Indemnity Company 27138 | |
| INSURED XTREME CLEAN RESIDENTIAL AND COMMERCIAL CLEANING LLC 915 S TWYCKENHAM DR South Bend IN 46615 | INSURER B: | |
| | INSURER C: | |
| | INSURER D: | |
| | INSURER E: | |
| | INSURER F: | |

COVERAGES

CERTIFICATE NUMBER: 00001162412869

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADDL INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
|----------|--|-----------|----------|---------------|-------------------------|--------------------------------|---|-------------|
| A | COMMERCIAL GENERAL LIABILITY | N | N | GLP1085958 | 02/01/2025 | 02/01/2026 | EACH OCCURRENCE | \$1,000,000 |
| | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$100,000 |
| | | | | | | | MED EXP (Any one person) | \$5,000 |
| | | | | | | | PERSONAL & ADV INJURY | \$1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | GENERAL AGGREGATE | \$2,000,000 |
| | <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC | | | | | | PRODUCTS - COMP/OP AGG | \$2,000,000 |
| | OTHER: | | | | | | | |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) | |
| | <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY | | | | | | BODILY INJURY (Per person) | |
| | | | | | | | BODILY INJURY (Per accident) | |
| | | | | | | PROPERTY DAMAGE (Per accident) | | |
| | UMBRELLA LIAB | | | | | | EACH OCCURRENCE | |
| | EXCESS LIAB | | | | | | AGGREGATE | |
| | DED | | | | | | | |
| | RETENTION \$ | | | | | | | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | | | PER STATUTE | OTH-ER |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | | | | | | E.L. EACH ACCIDENT | |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | E.L. DISEASE - EA | |
| | | | | | | | E.L. DISEASE - POLICY LIMIT | |
| | | | | | | | | |
| | PROFESSIONAL LIABILITY | | | | | | OCCURRENCE AGGREGATE | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Janitorial Cleaning Services

CERTIFICATE HOLDER

CANCELLATION

FOSO CONSTRUCTION LLC

6002 NORTH MICHIGAN ROAD
INDIANAPOLIS IN 46228

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

II. PRE-QUALIFICATION CHECKLIST (FOR BIDDERS THAT ARE NOT PRE-QUALIFIED)

(a) Acknowledgements:

- (i) X By checking this box, I hereby acknowledge that I am not a pre-qualified bidder with the City of South Bend.
- (ii) X By checking this box, I hereby acknowledge that the City reserves the right to request supplemental information, additional verification of any information provided, and may also conduct random inquiries of my current and prior customers. The City reserved the right to utilize all information provided in this submission and all information obtained in inquiries or requests to determine if a bidder is responsive and responsible. Additionally, I acknowledge that all information provided to the City shall be regarded as public records.
- (iii) X By checking this box, I hereby acknowledge that copies of all Applicable apprenticeship certificates or standards for training programs applicable to the work performed on the project may be requested at any time and shall be furnished upon request.
- (iv) X By checking this box, I hereby acknowledge and ensure that I and all sub-contractors, from whom I have accepted a bid and/or intend to hire to perform work on the public work project, are properly licensed. Furthermore, I acknowledge my understanding that it is my responsibility to ensure that all sub-contractors have the necessary licenses to undertake the work called for in this bid. If a sub-contractor loses their license at any point, it is the responsibility of that sub-contractor to notify the City.
- (v) X By checking this box, I hereby acknowledge that apprenticeship and training programs that I participate in have graduated at least five (5) apprentices in each of the past five (5) years.
- (vi) X By checking this box, I hereby acknowledge that all subcontractors performing work greater than \$250,000 also meet the qualifications of the Responsible Bidder Ordinance.

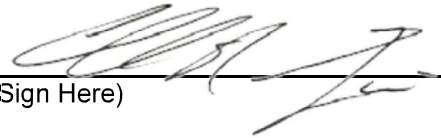
(b) Attachments:

- (i) X Indiana Secretary of State's on-line records (ie. Business verification) dated within sixty (60) days of the submission of said document showing that business is in existence, current with the Indiana Secretary of State's Business Entity Report, and eligible for a certificate of good standing. (Not applicable to individuals, sole proprietors or partnerships).
- (ii) N/A List identifying all former business names.
- (iii) N/A Any determinations by a court or governmental agency any violations of federal state, or local laws including, but not limited to, violations of contracting or antitrust laws, tax or licensing laws, environmental laws, Occupational Safety and Health Act (OSHA), or federal Davis-Bacon and related Acts, within the preceding five (5) years.
- (iv) X Statement about staffing capabilities, including labor sources. This statement indicates and ensures I have sufficient employees on staff to complete the work I am bidding on OR outlines how I intend to meet the staffing needs of the work.
- (v) X Statement that individuals who will perform work on the public work project on my behalf will be properly classified as an employee or as an independent contractor under all applicable state and federal laws and local ordinances.
- (v) X For every project, submit evidence of participation in apprenticeship and training programs, applicable to the work to be performed on the project, which are approved by and registered with the United States Department of Labor's Office of Apprenticeship, or its successor organization. This includes, but may not be limited to, letters from apprenticeship coordinators detailing the bidder's association with

the program, and the United States Department of Labor Office of Apprenticeship Certificates of Registration of Apprenticeship Programs for each type of work to be performed on the project.

- (vi) X Copy of a written plan for employee drug testing that covers all of my employees who will perform work on the public work project and meets or exceeds the requirements set forth in IC 4-13-18-5 or IC 4-13-18-6.
- (vii) X Evidence that I am utilizing a surety company which is on the Bureau of Fiscal Service "Department of Treasury's Listing of Approved Sureties" as required in the bid specifications or contract.
- (viii) N/A Written statement of any federal, state or local tax liens or tax delinquencies owed to any federal, state or local taxing body in the preceding three years.
- (ix) X List of projects of similar size and scope of work performed in all areas, including the State of Indiana, within three (3) years prior to the date on which the bid is due.

Date: 10/14/2025


(Sign Here)

 Charles Garcia
(Print Name Here)

 FOSO Construction ,LLC
(Name of Company)

 6002 N Michigan Rd
(Address of Company)

 Indianapolis
(City)

 Indiana
(State)

 317.362.0645
(Telephone Number)

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

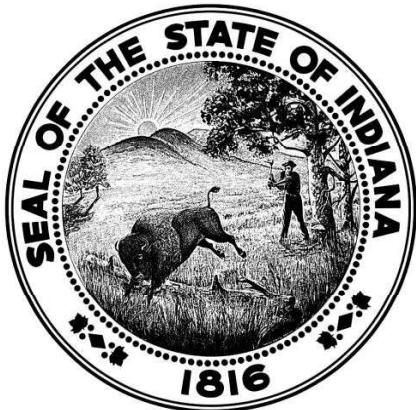
I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

FOSO CONSTRUCTION LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on August 14, 2012, and was in existence or authorized to transact business in the State of Indiana on October 13, 2025.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, October 13, 2025

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

2012081500022 / 20254677431

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on November 12, 2025.



Staffing Capability Statement

Foso Construction, LLC affirms that it possesses the staffing capacity, labor resources, and management oversight required to successfully execute The Hope Building Roof Replacement Project in accordance with all applicable public contracting standards and project specifications.

Our management team—comprising experienced project managers, superintendents, and site supervisors—will provide comprehensive coordination, quality control, and safety oversight throughout all phases of the roofing work. Foso Construction LLC is fully committed to maintaining compliance with federal, state, and local regulations governing public construction projects, including all labor, wage, and safety requirements.

To perform the roofing scope, **Foso Construction, LLC** will employ a combination of in-house tradespeople and qualified subcontractors specializing in roofing and related construction services. Each subcontractor engaged has been prequalified based on demonstrated experience, safety performance, financial stability, and compliance with all licensing, bonding, and insurance requirements.

In addition, **Foso Construction, LLC** maintains established relationships with multiple reputable labor providers, enabling the company to supplement staffing as necessary to meet project milestones and scheduling demands. This structure ensures that adequate labor, supervision, and resources are available at all times to support the timely, safe, and successful completion of The Hope Building Roof Replacement Project.

Foso Construction, LLC hereby certifies that all statements contained herein are true and accurate to the best of our knowledge and belief. The company further acknowledges that this affirmation is made in good faith and in compliance with applicable laws governing public procurement and contractor responsibility.

Foso Construction, LLC
6002 N Michigan Rd
Indianapolis, IN 46228



Worker Classification Statement

Foso Construction, LLC hereby affirms its full compliance with all applicable federal, state, and local labor and employment laws for The Hope Building Roof Replacement Project. All individuals performing work on this project, whether as direct employees or as independent contractors under our supervision, will be properly classified in accordance with all governing statutes, ordinances, and regulations.

Foso Construction, LLC maintains strict oversight procedures to ensure accurate worker classification, adherence to prevailing wage and reporting requirements, and compliance with all obligations associated with public works projects. This commitment reflects our company's dedication to integrity, accountability, and lawful business practices.

Foso Construction LLC
6002 N Michigan Rd
Indianapolis, IN 46228



DRUG AND ALCOHOL POLICY

Foso Construction recognizes that the use of drugs, while on or off work, is an illegal activity.

Foso Construction further recognizes that such usage of drugs negatively impacts productivity, may increase absenteeism and tardiness, impairs abilities, increases the likelihood of accidents, and impacts judgment and reliability. Such actions impact the profitability of our company and impair growth. Our Company recognizes an obligation to its associates, associates' family members, customers, and the public at large to take reasonable pro-active steps to assure safety in the workplace, safety in the services we provide and safety in the distribution of such services. Therefore, Foso Construction affirms its Drug and Alcohol Policy along with its testing policies.

The following situations are strictly prohibited:

1. Reporting for work under the influence of intoxicants, illegal drugs, or controlled substances.
2. Reporting back to work from break or lunch/dinner period under the influence of intoxicants, illegal drugs or controlled substances.
3. Operating Company vehicle or equipment while under the influence of intoxicants, illegal drugs or controlled substances.
4. The use, manufacture, possession, distribution, trafficking of intoxicants, illegal drugs or controlled substances in any manner during work hours, while on the job, on Company property, or in Company vehicles.
5. Any other use, possession or trafficking of intoxicants, illegal drugs, or controlled substances in any manner which is detrimental to the Company.

Any Associate in violation of the above issues will be subject to disciplinary action up to and including termination.

DRUG AND ALCOHOL TESTING PROVISIONS AND TYPES OF TESTS

Foso Construction recognizes that alcohol and drug abuse in the workplace has become a major concern. We believe that by reducing drug and alcohol use, we will improve the safety, health, and productivity of our associates. The purpose of the Company's alcohol and drug testing policy is to provide a safe and healthy workplace for all associates while being in compliance with Federal and State regulations.

Foso Construction is part of the Coalition for Construction Safety. All associates are required to pass a pre-employment drug screening and obtain a CCS card in order to begin working.

Potential new hires that do not pass their pre-employment drug screening will be required to participate in the SAP (Substance Abuse Professional) program, complete the program successfully, and obtain a CCS card in order to begin working.

All Associates are subject to random drug and alcohol testing. Failure to submit to such testing will result in immediate termination.

As a company committed to a drug-free workplace, Foso Construction reserves the right to utilize drug and alcohol testing for the following but is not limited to:

1. Pre-Employment Testing
2. Post Accident/Injury Testing
3. Return to Duty Testing (Accident & Lay-Off)
4. Reasonable Cause Testing
5. Random Testing
6. Annual Testing

Any Associate who is taking a prescribed medication needs to notify his/her supervisor prior to starting work or entering the company work site. The Supervisor will at that point decide if the prescription medication will cause a safety concern.

AIA® Document A310™ – 2010

Bid Bond

CONTRACTOR:

(Name, legal status and address)

FOSO Construction
6002 Michigan Ave.
Indianapolis, IN 46228

SURETY:

(Name, legal status and principal place of business)

The Gray Casualty & Surety Company
1625 West Causeway Approach
Mandeville, LA 70471

This document has important legal consequences. Consultation with an attorney is encouraged with respect to its completion or modification.

Any singular reference to Contractor, Surety, Owner or other party shall be considered plural where applicable.

OWNER:

(Name, legal status and address)

City of South Bend
227 W. Jefferson
South Bend, IN 46601

BOND AMOUNT: Five Percent of Bid (5%)

PROJECT:

(Name, location or address, and Project number, if any)

Roof and Skylight Replacement
The Hope Building



Project Number, if any:

The Contractor and Surety are bound to the Owner in the amount set forth above, for the payment of which the Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, as provided herein. The conditions of this Bond are such that if the Owner accepts the bid of the Contractor within the time specified in the bid documents, or within such time period as may be agreed to by the Owner and Contractor, and the Contractor either (1) enters into a contract with the Owner in accordance with the terms of such bid, and gives such bond or bonds as may be specified in the bidding or Contract Documents, with a surety admitted in the jurisdiction of the Project and otherwise acceptable to the Owner, for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof; or (2) pays to the Owner the difference, not to exceed the amount of this Bond, between the amount specified in said bid and such larger amount for which the Owner may in good faith contract with another party to perform the work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect. The Surety hereby waives any notice of an agreement between the Owner and Contractor to extend the time in which the Owner may accept the bid. Waiver of notice by the Surety shall not apply to any extension exceeding sixty (60) days in the aggregate beyond the time for acceptance of bids specified in the bid documents, and the Owner and Contractor shall obtain the Surety's consent for an extension beyond sixty (60) days.

If this Bond is issued in connection with a subcontractor's bid to a Contractor, the term Contractor in this Bond shall be deemed to be Subcontractor and the term Owner shall be deemed to be Contractor.

When this Bond has been furnished to comply with a statutory or other legal requirement in the location of the Project, any provision in this Bond conflicting with said statutory or legal requirement shall be deemed deleted herefrom and provisions conforming to such statutory or other legal requirement shall be deemed incorporated herein. When so furnished, the intent is that this Bond shall be construed as a statutory bond and not as a common law bond.

Signed and sealed this 13th day of October 2025

| | | |
|---|---------------------------------|---|
| (Witness) | (Principal) | (Seal) |
|  | (Title) Shannon Henman | |
| (Witness) | (Surety) | (Seal) |
| | Shannon Henman Attorney-in-Fact |  |
| | (Title) | |

Init.

**THE GRAY INSURANCE COMPANY
THE GRAY CASUALTY & SURETY COMPANY**

GENERAL POWER OF ATTORNEY

Bond Number: **Principal:** City of South Bend

Project: Roof and Skylight Replacement at The Hope Building

KNOW ALL BY THESE PRESENTS, THAT The Gray Insurance Company and The Gray Casualty & Surety Company, corporations duly organized and existing under the laws of Louisiana, and having their principal offices in Metairie, Louisiana, do hereby make, constitute, and appoint: **Shannon Henman, Patrick Hitchingham, and K. O'Malley of Jackson, Michigan jointly and severally** on behalf of each of the Companies named above its true and lawful Attorney(s)-in-Fact, to make, execute, seal and deliver, for and on its behalf and as its deed, bonds, or other writings obligatory in the nature of a bond, as surety, contracts of suretyship as are or may be required or permitted by law, regulation, contract or otherwise, provided that no bond or undertaking or contract of suretyship executed under this authority shall exceed the amount of \$25,000,000.00.

This Power of Attorney is granted and is signed by facsimile under and by the authority of the following Resolutions adopted by the Boards of Directors of both The Gray Insurance Company and The Gray Casualty & Surety Company at meetings duly called and held on the 26th day of June, 2003.

"RESOLVED, that the President, Executive Vice President, any Vice President, or the Secretary be and each or any of them hereby is authorized to execute a power of Attorney qualifying the attorney named in the given Power of Attorney to execute on behalf of the Company bonds, undertakings, and all contracts of surety, and that each or any of them is hereby authorized to attest to the execution of such Power of Attorney, and to attach the seal of the Company; and it is

FURTHER RESOLVED, that the signature of such officers and the seal of the Company may be affixed to any such Power of Attorney or to any certificate relating thereto by facsimile, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be binding upon the Company now and in the future when so affixed with regard to any bond, undertaking or contract of surety to which it is attached.

IN WITNESS WHEREOF, The Gray Insurance Company and The Gray Casualty & Surety Company have caused their official seals to be hereinto affixed, and these presents to be signed by their authorized officers this 4th day of November, 2022.



By:

Michael T. Gray

Michael T. Gray
President
The Gray Insurance Company

Cullen S. Piske

Cullen S. Piske
President
The Gray Casualty & Surety Company



State of Louisiana

ss:

Parish of Jefferson

On this 4th day of November, 2022, before me, a Notary Public, personally appeared Michael T. Gray, President of The Gray Insurance Company, and Cullen S. Piske, President of The Gray Casualty & Surety Company, personally known to me, being duly sworn, acknowledged that they signed the above Power of Attorney and affixed the seals of the companies as officers of, and acknowledged said instrument to be the voluntary act and deed, of their companies.



Leigh Anne Henican
Notary Public
Notary ID No. 92653
Orleans Parish, Louisiana

Leigh Anne Henican

Leigh Anne Henican
Notary Public, Parish of Orleans State of Louisiana
My Commission is for Life

I, Mark S. Manguno, Secretary of The Gray Insurance Company, do hereby certify that the above and forgoing is a true and correct copy of a Power of Attorney given by the companies, which is still in full force and effect. IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Company this 13th day of October, 2025.

Mark S. Manguno

I, Leigh Anne Henican, Secretary of The Gray Casualty & Surety Company, do hereby certify that the above and forgoing is a true and correct copy of a Power of Attorney given by the companies, which is still in full force and effect. IN WITNESS WHEREOF, I have set my hand and affixed the seals of the Company this 13th day of October, 2025.

Leigh Anne Henican



UNDERWRITING LIMITATION b/: \$13,470,000

SURETY LICENSES c,f/: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: Delaware

GRANITE RE, INC.

(NAIC #26310)

BUSINESS ADDRESS: 14001 Quailbrook Drive, Oklahoma City, OK 73134

PHONE: (405) 752-2600

UNDERWRITING LIMITATION b/: \$6,691,000

SURETY LICENSES c,f/: AL, AZ, AR, CA, CO, CT, DE, DC, FL, GA, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: Minnesota

Granite State Insurance Company

(NAIC #23809)

BUSINESS ADDRESS: 1271 AVENUE OF THE AMERICAS, 37TH FLOOR, NEW YORK, NY 10020 - 1304

PHONE: (212) 770-7000

UNDERWRITING LIMITATION b/: \$2,948,000

SURETY LICENSES c,f/: AL, AK, AZ, AR, CA, CO, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: Illinois

GRAY CASUALTY & SURETY COMPANY (THE)

(NAIC #10671)

BUSINESS ADDRESS: P.O. Box 6202, Metairie, LA 70009 - 6202

PHONE: (504) 888-7790

UNDERWRITING LIMITATION b/: \$12,702,000

SURETY LICENSES c,f/: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: Louisiana

GRAY INSURANCE COMPANY (THE)

(NAIC #36307)

BUSINESS ADDRESS: P.O. BOX 6202, METAIRIE, LA 70009 - 6202

PHONE: (504) 888-7790

UNDERWRITING LIMITATION b/: \$25,529,000

SURETY LICENSES c,f/: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: Louisiana

Great American Alliance Insurance Company

(NAIC #26832)

BUSINESS ADDRESS: 301 E. FOURTH STREET, CINCINNATI, OH 45202

PHONE: (513) 369-5000

UNDERWRITING LIMITATION b/: \$3,195,000

SURETY LICENSES c,f/: AL, AK, AS, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: Ohio

Great American Insurance Company

(NAIC #16691)

BUSINESS ADDRESS: 301 E. FOURTH STREET, CINCINNATI, OH 45202

PHONE: (513) 369-5000

UNDERWRITING LIMITATION b/: \$325,330,000

SURETY LICENSES c,f/: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, GU, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, PR, RI, SC, SD, TN, TX, UT, VT, VA, VI, WA, WV, WI, WY

INCORPORATED IN: Ohio

GREAT AMERICAN INSURANCE COMPANY OF NEW YORK

(NAIC #22136)

BUSINESS ADDRESS: 301 E. FOURTH STREET, CINCINNATI, OH 45202

PHONE: (513) 369-5000

UNDERWRITING LIMITATION b/: \$26,763,000

SURETY LICENSES c,f/: AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

INCORPORATED IN: New York



October 14, 2025

To Whom It May Concern,

Subject: Membership and Apprenticeship Program Compliance with the Midwest Carpenters Union

This letter serves as official confirmation that Foso Construction, Inc. is a proud and active member of the Midwest Carpenters Regional Council. Our company and staff are committed to upholding the highest standards of craftsmanship, professionalism, and safety as outlined by the union's policies and training requirements.

As a signatory contractor, Foso Construction and its workforce fully participate in and abide by the Midwest Carpenters Apprenticeship and Training Program. This program is an accredited, structured, multi-year system designed to develop skilled, knowledgeable, and safety-conscious carpenters.

The apprenticeship program combines on-the-job training under experienced journeymen with classroom instruction provided through certified training centers. The curriculum emphasizes:

- Blueprint reading and layout
- Framing and interior systems
- Concrete formwork and finishing
- Exterior and interior finish carpentry
- Scaffolding and rigging safety
- Use of tools, materials, and technology
- OSHA-compliant jobsite safety practices
- Leadership and jobsite communication skills

Through this training, apprentices gain hands-on experience while learning to meet industry standards for quality and efficiency. Upon program completion, participants earn journeyman status, representing both mastery of their trade and dedication to union excellence.

Foso Construction is committed to supporting the continued education, safety, and advancement of our team members, in alignment with the goals and values of the Midwest Carpenters Union.

Sincerely,



Charles Garcia
President

Foso Construction LLC
6002 N Michigan Rd
Indianapolis, IN 46228



| Project Name | Location | GC | Contract Value | Scope of Work | Completion Date |
|---|--|-----|----------------|---|-----------------|
| Indiana Toll Road Corridor Repairs Phase 1 | 3200 Cassapolis St Elkahart, IN 46514 | N/A | \$495,440.50 | Various Locations/ Toll Repairs & Renovations | October, 2025 |
| Indiana Toll Road Corridor Branding & Repairs | 3200 Cassapolis St Elkahart, IN 46514 | N/A | \$241,104.00 | Various Locations/ Toll Repairs & Renovations | Dec., 2024 |
| Indiana Toll Road Roof Renovation | 3200 Cassapolis St Elkahart, IN 46514 | N/A | \$583,579.00 | Various Locations/ Roof Renovation & Replacement | January, 2024 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**BOARD OF PUBLIC WORKS
AGENDA ITEM REVIEW REQUEST FORM**

| | | | |
|----------|-------------------|-----------------|-------------|
| Date | <u>10/06/2025</u> | Department | <u>DPW</u> |
| Name | <u>Zach Hurst</u> | Phone Extension | <u>3057</u> |
| BPW Date | <u>10/14/2025</u> | | |

Review and Approval Required Prior to Submittal to Board

| | | | |
|--|--------------------------|---------------|-----------------------------|
| Diversity Compliance and Inclusion Officer | <input type="checkbox"/> | Officer Name | <u> </u> |
| BPW Attorney | <input type="checkbox"/> | Attorney Name | <u> </u> |
| Dept. Attorney | <input type="checkbox"/> | Attorney Name | <u> </u> |
| Purchasing | <input type="checkbox"/> | | <u> </u> |

Check the Appropriate Item Type – Required for All Submissions

| | | |
|---|--|---|
| <input type="checkbox"/> Professional Services Agreement | <input type="checkbox"/> Contract | <input type="checkbox"/> Proposal |
| <input type="checkbox"/> Open Market Contract | <input type="checkbox"/> Amendment/Addendum | <input type="checkbox"/> Special Purchase, QPA |
| <input type="checkbox"/> Bid Opening | <input type="checkbox"/> Bid Award | <input type="checkbox"/> Req. to Advertise <input type="checkbox"/> Title Sheet |
| <input checked="" type="checkbox"/> Quote Opening | <input checked="" type="checkbox"/> Quote Award | <input type="checkbox"/> Reject Bids/Quotes |
| <input type="checkbox"/> Proposal Opening | <input type="checkbox"/> C/O & PCA No. <u> </u> | <input type="checkbox"/> PCA |
| <input type="checkbox"/> Chg. Order, No. <u> </u> | <input type="checkbox"/> Traffic Control | <input type="checkbox"/> Resolution |
| <input type="checkbox"/> Other: <u> </u> | | <input type="checkbox"/> Ease./Encroach |

Required Information

| | | | |
|------------------------|---|----------------------------------|--|
| Company or Vendor Name | | | |
| New Vendor | <input type="checkbox"/> Yes <input type="checkbox"/> If Yes, Approved by Purchasing | | |
| | <input type="checkbox"/> No | | |
| MBE/WBE Contractor | <input type="checkbox"/> MBE <input type="checkbox"/> WBE | Completed E-Verify Form Attached | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Project Name | <u>The Hope Building Roof Replacement</u> | | |
| Project Number | <u>125-021BR2</u> | | |
| Funding Source | <u>River West DA TIF</u> | | |
| Account No. | <u>PR-00041683</u> | | |
| Amount | | | |
| Terms of Contract | <u>Lump Sum</u> | | |
| Purpose/Description | <u>Request to open and award quote to reroof the former Hope Ministries Building located on the 500 block of South Michigan Street.</u> | | |

For Change Orders Only

| | | | | |
|----------------------------|--------------------------|----------|--------------------------------|---|
| Amount of | <input type="checkbox"/> | Increase | \$ <u> </u> | |
| | <input type="checkbox"/> | Decrease | (\$ <u> </u>) | |
| Previous Amount | | | \$ <u> </u> | |
| | | Increase | <u> </u> | % <u> </u> |
| Current Percent of Change: | | Decrease | <u> </u> | (<u> </u>) % <u> </u> |
| New Amount | | | \$ <u> </u> | |
| | | Increase | <u> </u> | % <u> </u> |
| Total Percent of Change: | | Decrease | <u> </u> | (<u> </u>) % <u> </u> |
| Time Extension Amount: | | | <u> </u> | |
| New Completion Date: | | | <u> </u> | |