

PLEASURE DRIVEWAY and PARK DISTRICT of PEORIA, ILLINOIS

Planning, Design and Construction Division • 1314 N. Park Road Peoria, IL 61604 • Phone (309) 686-3386 • Fax (309) 686-3383

September 1, 2105

Request For Quotes

Kinsey Memorial Roof Repairs- Glen Oak Park

The Peoria Park District is soliciting written quotes for the repair of the roof and wood decking of the Kinsey Memorial Shelter located near the Prospect/McClure entrance of Glen Oak Park, as discussed in the following descriptions. All work must conform to all NRCA standards, applicable local, state, and national building codes.

Please note that the prevailing rate of wage including benefits for the Peoria area shall be paid for each craft or type of worker needed to execute this project or perform this work as required by the State of Illinois Department of Labor.

Contractor is responsible for verifying all measurements for materials for necessary repair work. Quotes will be due on Tuesday, September 15, 2015 by 2:30 p.m. at the Planning, Design and Construction Division office located in Bradley Park.

A. Description of Work: The intent of this project is to prolong the life of this tile roof system through the following measures. Immediately notify the Owner's Representative of any other existing conditions which require attention and provide a recommended corrective action and cost to remediate.

- a. <u>Existing tile:</u> All existing tile shall be removed and properly stored by Contractor. Any breakage due to mishandling or improper storage are the responsibility of the Contractor. Contractor shall provide for 100 sq. ft. of replacement tile within their quote.
- b. <u>Decking:</u> Wood decking shall be inspected for rot. Rotted decking shall be replaced with decking equivalent to existing. All decking, both new and existing, shall be painted to match existing. Off-site, legal disposal of all waste materials is the responsibility of the Contractor.
- c. <u>Drip Edge:</u> New copper drip edge shall be fabricated and installed at eave edges to promote positive drainage. New drip edge shall extend by a minimum of ¾" beyond the roof.
- d. Flashing: Copper flashings shall be reused. All joints shall be cleaned and recaulked.
- e. <u>Ice and Water Shield:</u> High Temperature Ice and Water Shield shall be applied to all decking.

PEORIA PARK BOARD

TIMOTHY J. CASSIDY

WARREN E. RAYFORD

NANCY L. SNOWDEN

KELLY A. CUMMINGS

President
ROBERT L. JOHNSON, SR.

Trustee
. JACQUELINE J. PETTY

Trustee

LY A. CUMMINGS Trustee

Trustee

Trustee

MATTHEW P. RYAN Trustee

- f. Tile: Existing tile shall be reinstalled. Unused tile shall be arranged for drop-off with the Peoria Park District.
- g. Contractor shall provide a minimum 2-year warranty for all work.

B. Administrative Requirements

Submitted with quote:

- 1. <u>EEO Certification</u> A completed Certificate of Equal Employment Opportunity Compliance (form attached) must be submitted with quotes.
- 2. Workforce Profile A completed Workforce Profile (form attached) must be submitted.
- 3. <u>Sexual Harassment Policy</u> A sexual harassment policy must be submitted for approval. Sample attached.
- 4. <u>W-9 Taxpayer Identification Form:</u> Bidder must complete and sign the form included in this package. Failure to do so will disqualify your bid or proposal.
- 5. <u>Substance Abuse Prevention Program Certification</u> Submit provided form with appropriate section completed. If Part B of the form is completed, your company's Substance Abuse Policy must be submitted for approval.

Required forms after Award is made before work can begin:

1. <u>Insurance Requirements:</u> A Certificate of Insurance and Endorsement with a minimum of one million (\$1,000,000) of liability coverage, naming the Peoria Park District as Additional Insured, will be required, before work begins. Verification that all employees who will be working at the site are currently covered by Workers Compensation Insurance will also be required. See Attachment A-6.

Forms to be submitted with project closeout and pay requests:

- Certified Payroll A certified payroll form must accompany all requests for payment. A sample form is attached, but contractor may use own form.
- 2. <u>Weekly Workforce Reports</u> Contractor shall submit completed Weekly Workforce Report (forms attached) for each week until project is complete

Please contact me if you have any questions or concerns.

Sincerely.

Mary Harden Planner II

PEORIA PARK BOARD

Trustee



QUOTE FORM

PEORIA PARK DISTRICT Kinsey Memorial Roof Repairs

ITEM	COST
BASE QUOTE: All labor, materials and equipment necessary	\$
for the Kinsey Memorial Roof repairs as described in Request	
for Quote dated September 1, 2015.	

THE UNDERSIGNED CERTIFIES THAT THIS QUOTATION IS IN ACCORDANCE WITH PEORIA PARK DISTRICT SPECIFICATIONS.

QUOTE SUBMITTED BY:		
Company Name		
Address	City	State Zip
Telephone Number	Fax Numb	per
Signature	Title	Date

PEORIA PARK BOARD

TIMOTHY J. CASSIDY President WARREN E. RAYFORD Trustee NANCY L. SNOWDEN Trustee KELLY A. CUMMINGS Trustee

ROBERT L. JOHNSON, SR. Trustee

JACQUELINE J. PETTY Trustee MATTHEW P. RYAN Trustee



Peoria Park District Certificate of Equal Employment Opportunity Compliance for

Office Use Only:
Approved: _____
Date: _____

Contractors and Vendors

Disclosure of the information requested in this form is required by the Peoria Park District. Failure to properly complete and sign this form will result in it being returned unprocessed thereby resulting in a delay or denial of eligibility to bid.

As part of the Company's commitment to equal employment opportunity practices, this company does the following:

- Recruits, trains, upgrades, promotes and disciplines persons without regard to race, color, sex, religion, national origin, veteran status, age, mental or physical ability.
- Notifies all recruitment sources that all qualified applicants will be considered for employment without regard to race, color, sex, religion, national origin, veteran status, age, mental or physical ability.
- When advertising is used, specifies that all qualified applicants will be considered for employment without regard to race, color, sex, religion, national origin, veteran status, age, mental or physical ability.
- Notifies all labor organizations which furnish this company with any skilled or non-skilled labor of the Company's
 responsibility to comply with the equal employment opportunity requirements required in all contracts by the
 Peoria Park District.
- Notifies all of its sub-contractors of their obligation to comply with the equal employment opportunity requirements required in all contracts by the Peoria Park District.
- Has an affirmative action program that assures the company's fair employment practices are understood and carried out by all of its managerial, administrative and supervisory personnel.

Is the Company a minority/woman owned business (MB	E/WBE)?YESNO
The Company does not discriminate against any employenational origin, veteran status, age, mental or physical about the company of the compan	ees or applicants for employment because of race, color, religion, sex, bility.
The Company does not maintain segregated facilities for because of habit, local custom, or otherwise.	any of its employees on the basis of race, religion, color, national origin,
	es with all statements listed above as part of the Company's commitment ny further agrees that it has completed the attached Workforce Profile
Company Name	Company Address
Signature of Company Official	Name / Title
Telephone Number & Fax Number	Email Address

WORK FORCE PROFILE - FULL TIME ONLY

Job Classifications	Tota Emple		Blac	ck	Hispa	anic	Nativ Americ		Asia	an	Vete	ran	Disal	oled
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
1. Officials, Managers, Supervisors														
2. Professionals														
3. Technicians														
4. Sales														
5. Office/Clerical														
6. White Collar Trainees:														
7. Skilled Crafts:														
7. Skined Craits.														
8. Apprentices:														
9. On-the-job Trainees:														
J														
10. Semi-skilled														
11. Service Workers														
12. Unskilled														
TOTALS														

PLEASE BE ADVISED!

Every party to a public contract and every party bidding on public contracts are required to have a written sexual harassment policy that contains:

- (1) a definition of sexual harassment under state law:
- (2) a description of sexual harassment utilizing examples;
- (3) a formalized complaint procedure;
- (4) a statement of victims rights;
- (5) directions on how to contact the Illinois Department of Human Rights **Illinois companies.**Out-of-State companies must include directions on how to contact the enforcement agency within their state. Companies that issue a standard policy for all business locations must prepare an addendum providing directions on how to contact the appropriate enforcement agency.
- (6) a recitation that there cannot be any retaliation against employees who elect to file charges.

Recommendation: Your sexual harassment policy should be drafted in language easy to understand and any revisions should be reviewed by legal counsel. A copy of your policy should be posted in a prominent and accessible location to assure all employees will be notified of the company's position.

<u>In order to conduct business with the THE PEORIA PARK DISTRICT, you must have a written</u> sexual harassment policy that conforms to the new ACT.

FAILURE TO DO SO WILL DISQUALIFY YOU AS AN ELIGIBLE VENDOR!!! Please be advised, effective July 1, 1993, Governor Jim Edgar established under Executive Order Number 7 (Public Act 87-1257) that every party to a public contract and every party bidding on a public contract within the State of Illinois must have a written policy statement prohibiting sexual harassment. The following model policy statement is a draft copy provided for use in formulating your company's policy statement

SEXUAL HARASSMENT POLICY STATEMENT

It is the responsibility of each individual employee to refrain from sexual harassment and it is the right of each individual employee to work in an environment free from sexual harassment.

DEFINITION OF SEXUAL HARASSMENT

According to the Illinois Human Rights Act, sexual harassment is defined as:

Any unwelcome sexual advances or requests for sexual favors or any conduct of a sexual nature when

- 1. submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment;
- 2. submission to or rejection of such conduct by an individual is used as the basis for employment decision(s) affecting such individual; or
- 3. such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment.

The courts have determined that sexual harassment is a form of discrimination under Title VII of the U.S. Civil Rights act of 1964, as amended in 1991. One such example is a case where a qualified individual is denied employment opportunities and benefits that are, instead, awarded to individual 🔂 wits (voluntarily or under nces or sexual favors. it) ordel to receiv Another example is where an ivià nwelcome/ ual conduc n el ployment opportunity. must si Other conduct commonly con red be sexu a

- ⇒ Verbal: Sexual innuendoes, suggestive comments, insults, humor and jokes about sex, anatomy or gender-specific traits, sexual propositions, threats, repeated requests for dates, or statement about other employees, even outside of their presence, of a sexual nature.
- Non-Verbal: Suggestive or insulting sounds (whistling), leering, obscene gestures, sexually suggestive bodily gestures, "catcalls", "smacking" or "kissing" noises.
- ⇒ Visual: Posters, signs, pin-ups, slogans of a sexual nature.
- ⇒ Physical: Touching, unwelcome hugging or kissing, pinching, brushing the body, coerced sexual intercourse or actual assault.

Sexual harassment most frequently involves a man harassing a woman. However, it can also involve a woman harassing a man or harassment between members of the same gender.

The most severe and overt forms of sexual harassment are easier to determine; however, some sexual harassment is more subtle and depends to some extent on individual perception and interpretation. The trend in the courts is to assess sexual harassment by a standard of what would offend a "reasonable woman" or a "reasonable man", depending upon the gender of the alleged victim.

An example of the most subtle form of sexual harassment is the use of endearments. The use of terms such as "honey", "darling", and "sweetheart" is objectionable to many women who believe that these terms undermine their authority and their ability to deal with men on an equal and professional level.

Another example is the use of a compliment that could potentially be interpreted as sexual in nature. Below are three statements that might be made about the appearance of a woman in the workplace:

Sexual Harassment Model Policy Statement Page 2

- ⇒ "That's an attractive dress you have on."
- ⇒ "That's an attractive dress. It really looks good on you."
- ⇒ "That's an attractive dress. You really fill it out well."

The first statement appears to be simply a compliment. The last is most likely to be perceived as sexual harassment depending on individual perceptions and values. To avoid the possibility of offending an employee, it is best to follow a course of conduct above reproach, or to err on the side of caution.

RESPONSIBILITY OF INDIVIDUAL EMPLOYEES

Each individual employee has the responsibility to refrain from sexual harassment in the workplace. An individual employee who harasses a fellow worker is, of course, liable for his or her individual conduct. The harassing employee will be subject to disciplinary action up to and including discharge in accordance with company/organization policy or a collective bargaining agreement, as appropriate.

RESPONSIBILITY OF SUPERVISORY PERSONNEL

Each supervisor is responsible for maintaining a workplace free of sexual harassment. This is accomplished by promoting a professional environment and by dealing with sexual harassment as with all other forms of employee misconduct.

The courts have found companies/organizations as well as supervisors can be held liable for damages related to sexual harassment by a manager, supervisor, employee, or third party (an individual who is not an employee but does business with a company/organization, such as a contractor, customer, sales representative, or repair person).

\maintain a tam evel (vi d discipline, or on the Liability is based either on a com vganizati sponsibility # ny/org za supervisor acting as an agent of e com l. As sucl pervisors r st /jet quickly d responsibly, not only to v/organizati/ minimize their own liability, but a o that the cor 1a

RESOLUTION OUTSIDE THE COMPANY/ORGANIZATION

It is hoped that most sexual harassment complaints and incidents can be resolved within a company/organization. However, an employee has the right to contact the Illinois Department of Human Rights (IDHR) or the U.S. Equal Employment Opportunity Commission (EEOC) about filing a formal complaint. An IDHR complaint must be filed within 180 days of the alleged incident(s) unless it is a continuing offense. A complaint with EEOC must be filed within 300 days.

Illinois Department of Human Rights

(217) 785-5100 - Springfield

(217) 785-5125 - TDD Springfield

(312) 814-6200 - Chicago

(312) 263-1579 - TDD Chicago

Illinois Human Rights Commission

(217) 785-4350 - Springfield

(217) 785-5125 – TDD Springfield

(312) 814-6269 - Chicago

(312) 814-4760 - TDD Chicago

U.S. Equal Employment Opportunity Commission

(312) 353-2613 - Chicago District Office

(800) 669-4000 - Toll Free Within State of Illinois

(800) 669-6820 - TDD Chicago

An employee who is suddenly transferred to a lower paying job or passed for promotion, after filing a complaint with IDHR or EEOC, may file a retaliation charge, also due 180 days (IDHR) or 300 days (EEOC) from the alleged retaliation.

An employee who has been physically harassed or threatened while on the job may also have grounds for criminal charges of assault and battery.

FALSE AND FRIVOLOUS COMPLAINTS

False and frivolous charges refer to cases where the accuser is using a sexual complaint to accomplish some end other than stopping sexual harassment. It does not refer to charges made in good faith which cannot be proven. Given the seriousness of the consequences for the accused, a false and frivolous charge is a severe offense that can itself result in disciplinary action.



Request for Taxpayer Identification Number and Certification

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

	10101140 0011100		
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line bla	nk.	·
page 2.	2 Business name/disregarded entity name, if different from above		
uo s	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or Corporation S Corporation Partnership single-member LLC	Trust/estate	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)
発売	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=parti	nership) ►	· · · · · · · · · · · · · · · · · · ·
Print or type c Instruction	Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate be the tax classification of the single-member owner.	ox in the line above for	Exemption from FATCA reporting code (if any)
F 등	Other (see instructions) ▶		(Applies to accounts maintained outside the U.S.)
ecific	5 Address (number, street, and apt. or suite no.)	Requester's name	and address (optional)
See S p	6 City, state, and ZIP code		
	7 List account number(s) here (optional)	'	
Par	Taxpayer Identification Number (TIN)		
	our TIN in the appropriate box. The TIN provided must match the name given on line 1 to		ecurity number
reside entitie	withholding. For individuals, this is generally your social security number (SSN). However talien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For ot, it is your employer identification number (EIN). If you do not have a number, see <i>How to</i>	her get a	
IIIN or	page 3.	or	
	f the account is in more than one name, see the instructions for line 1 and the chart on pa	age 4 for Employe	er identification number
guidelines on whose number to enter.			
Part	II Certification	· · · · ·	
Under	penalties of perjury, I certify that:		
1. The	number shown on this form is my correct taxpayer identification number (or I am waiting	for a number to be i	issued to me); and
Ser	not subject to backup withholding because: (a) I am exempt from backup withholding, or vice (IRS) that I am subject to backup withholding as a result of a failure to report all interestinger subject to backup withholding; and		
3. I ar	a U.S. citizen or other U.S. person (defined below); and		
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA repo	rting is correct.	
becau interes genera	cation instructions. You must cross out item 2 above if you have been notified by the IR: e you have failed to report all interest and dividends on your tax return. For real estate trate paid, acquisition or abandonment of secured property, cancellation of debt, contribution lly, payments other than interest and dividends, you are not required to sign the certifications on page 3.	ansactions, item 2 dons to an individual re	oes not apply. For mortgage tirement arrangement (IRA), and
Sign Here	Signature of U.S. person ▶	Date ►	

General Instructions

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

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

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-INT (interest earned or paid)
- 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? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Form W-9 (Rev. 12-2014) Page **2**

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- · An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
 - 4. The type and amount of income that qualifies for the exemption from tax.
- 5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details), $\,$

- 3. The IRS tells the requester that you furnished an incorrect TIN.
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Form W-9 (Rev. 12-2014) Page **3**

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- $1-\!$ An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
 - 2-The United States or any of its agencies or instrumentalities
- $3-\!A$ state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- $4-\!\mbox{A}$ foreign government or any of its political subdivisions, agencies, or instrumentalities
 - 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- $7\!-\!\mathrm{A}$ futures commission merchant registered with the Commodity Futures Trading Commission
 - 8-A real estate investment trust
- $9-\!$ An entity registered at all times during the tax year under the Investment Company Act of 1940
 - 10-A common trust fund operated by a bank under section 584(a)
 - 11-A financial institution
- $12\!-\!A$ middleman known in the investment community as a nominee or custodian
 - 13-A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B-The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
 - G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of
- I-A common trust fund as defined in section 584(a)
- J-A bank as defined in section 581
- K-A broker
- L-A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Form W-9 (Rev. 12-2014) Page 4

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account
Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee' The actual owner'
Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*
For this type of account:	Give name and EIN of:
Disregarded entity not owned by an individual A valid trust, estate, or pension trust	The owner Legal entity ⁴
Normal dust, estate, or persion dust Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax- exempt organization	The organization
11. Partnership or multi-member LLC12. A broker or registered nominee	The partnership The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i) (B))	The trust

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 2. *Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039

For more information, see Publication 4535, Identity Theft Prevention and Victim

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Circle the minor's name and furnish the minor's SSN.



SUBSTANCE ABUSE PREVENTION PROGRAM CERTIFICATION

Project Name:		_
Location:		_
as defined in the Act, by experiorming work on a pub superseding collective bary program for the prevention	mployees of the Contractor and by e lic works project. The Contractor/So gaining agreement or makes the pub	Act 95-0635, prohibits the use of drugs and alcohol, mployees of all approved Subcontractors while abcontractor herewith certifies that it has a ic filing of its written substance abuse prevention byees who are not covered by a collective bargaining
	ng agreements that are in effect for a	contractor certifies that the contracting entity has l of its employees, and that deal with the subject
Contract	or/Subcontractor	-
Name of Authorized	Representative (type or print)	-
Title of Authorized	Representative (type or print)	_
Signature of A	uthorized Representative	Date
place, for all of its employ	ees not covered by a collective barga	contractor certifies that the contracting entity has in ining agreement that deals with the subject of the ts or exceeds the requirements of Public Act 95-0635
Contractor	/Subcontractor	
Name of Authorized	Representative (type or print)	_
Title of Authorized	Representative (type or print)	
Signature of Aut	horized Representative	 Date

CERTIFIED PAYROLL FORM (Contractor May Use Own Form)

NAME OF CONTRACTOR □	OR SUBCONTRACTOR \square	ő	ADD	ADDRESS						PROJECT OR CONTRACT NO.	NTRACT NO.
PAYROLL NO.	FOR WEEK ENDING		PRO	JECT AND	PROJECT AND LOCATION					TROSEC ON CO	
		}				GROSS		DEDUCTIONS			
AND SOCIAL SECURITY NUMBER	CLASSIFICATION	DATE		TOTAL				WITHHOLDING			NET WAGES
OF EMPLOYEE			HOURS WORKED EACH DAY	HOURS	S OF PAY	EARNED	FICA	TAX	OTHER	DEDUCTIONS	PAID PER WEEK
		0.Т.									
		S.									
		2									
		-									
		ST.		+							
		0.T.									
	****	ST.									
		0.T.				\					
		ST.									
		0.7.						 			
		ST.									
		0.Т.									
		ST.									
		0.Т.									
		ST.									
		0.Т.									
		ST.									
		0.Т.			in the second						
		ST		-							
		0.Т.									-
		ST.									

(Name of Signatory Party) (Trile)]		
do hereby state:		
(1) That I pay or supervise the payment of the persons employed by	DEMARKS:	
on the	(NEWPOLKS)	-
(Contractor of Subcontractor)		
that during the payroll period commencing on the		
day of and ending the day of		
all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will		
be made either directly or indirectly to or on behalf of said		
from the full		
(Contractor or Subcontractor)		
weekly wages earned by any person and that no deductions have been made eather directly or indirectly from the full wages		
earned by any person, other than permissible deductions authorized by law.	NAME AND TITLE	SIGNATURE
	THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 5	OVE STATEMENTS MAY SUBJECT THE CRIMINAL PROSECUTION. SEE SECTION 5
(2) That any payrolis otherwise under this contract required to be submitted for the above period are correct and complete;	(820 ILCS 130/5) OF THE PREVAILING WAGE ACT OF THE STATE OF ILLINOIS)F THE STATE OF ILLINOIS.
that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates mandated by the		
Illinois Prevailing Wage Act and that the classifications set forth therein for each laborer or mechanic conform with the work performed.		
(3)does remit/does not remit (circle correct statement) contributions to fringe benefit funds that are jointly	atement) contributions to frir	nge benefit funds that are jointly
(Contractor or Subcontractor)		
maintained and jointly governed by one or more employers and one or more labor organizations in accordance with the Federal Labor	labor organizations in accor	dance with the Federal Labor
agement Relations Act (LMRA).		
(4) If does <u>not</u> remit contributions to a tringe benefit fund that is jointly maintained and jointly governed	enetit tund that is jointly mai	intained and jointly governed
by one or more employers and one or more labor ergonizations in accordance	o with the IMDA but does	omit contributions to a fringe banefi
by one or more employers and one or more labor organizations in accordance with the LMRA, but does remit contributions to a fringe benef fund, the following information is required: (a) The worker's hourly fringe benefit rates:	e with the LMRA, but does i	remit contributions to a tringe benef
(b) The name and address of each fringe benefit fund:		
(c) The plan sponsor of each fringe benefit fund, if applicable:		

DATE.

PEORIA PARK DISTRICT

Weekly Workforce Report Instructions

This weekly workforce report must be completed and returned to the Peoria Park District project manager for each week that you are working on Peoria Park District property. You are to report only those employees that are actually working on the Peoria Park District project identified on this report. Do <u>not</u> report employees that are <u>not</u> working on the project identified on this report.

If you have further questions regarding this report, please contact the Owner's Project Manager.

I Trade & Hour Breakdown Table

- List the different trades (carpenter, laborer, plumber, etc.) and report the number of hours by race/gender for each trade;
- Total the hours for each trade on the right.

II New Hires by Race & Gender

• If additional employees are hired for the job, please record the number of employees hired by race/gender.

III Total Project Employee Breakdown

• Please track total hours by race/gender for the project if project lasts longer than a week.

Weekly Wor	rkforce Report	(Peoria Park	District Form)	Date:	w	/eek Ending:		
Contr	ractor/Subcontrac	tor Name:		Project:				
Trade & Hour Brea	akdown:							
TRADE	FEMALE HOURS	CAUCASIAN HOURS	AFRICAN- AMERICAN HOURS	HISPANIC, HOURS	NATIVE AMERICAN HOURS	ASIAN, PAC. ISLANDER, OTHER HOURS	TOTAL HOURS	
New Hires by Race	& Gender							
TRADE	CAUCASIAN	AFRICAN- AMERICAN	HISPANIC	NATIVE AMERICAN	ASIAN,PACIFIC ISLANDER, OTHER	MALE	FEMALE	
Total Project Empl	loyee Breakdown							
	CAUCASIAN	AFRICAN- AMERICAN	HISPANIC	NATIVE AMERICAN	ASIAN,PACIFIC ISLANDER, OTHER	MALE	FEMALE	