

REFERENCES

The bidder must list three (3) references, listing firm name, address, telephone number and contact person to whom they have provided similar equipment, material, or services for a period of not less than six (6) months.

COMPANY NAME:	DUPAGE COUNTY
ADDRESS:	421 N COUNTY FARM RD
	WHEATON, IL 60187
CONTACT PERSON:	DAVID WATKINS
TELEPHONE NUMBER:	630-407-6469

COMPANY NAME:	C.E.D.A
ADDRESS:	567 WEAT LAKE ST SUITE 1200 CHICAGO, IL 60661
CONTACT PERSON:	JAMES THOMAS
TELEPHONE NUMBER:	312-995-2023

COMPANY NAME:	DEL MAR BUILDERS
ADDRESS:	905 W 175 ST SUITE 2SW HOMEWOOD, IL 60430
CONTACT PERSON:	RYAN DEYOUNG
TELEPHONE NUMBER:	708-774-1711

Type text here

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES

LIHEAP FURNACE VOUCHER PROGRAM

AGREEMENT OF INTENT

I, PIOTR BLASZCZYK (contractor) am submitting my firm to be considered for LIHEAP FURNACE VOUCHER PROGRAM 2024 with the DuPage County.

I, PIOTR BLASZCZYK (contractor) acknowledge my firm upon notice of award for LIHEAP FURNACE VOUCHER PROGRAM 2024 with the DuPage County will use the contracts provided in this Request for Qualification ("RFQ").

Signature on File

Contractor

Date

10/25/23

ETHICS STATEMENT / AGREEMENT

Prior to the approval of any purchase, it will be the responsibility of the program director to determine if:

1. The expenditure is budgeted.
2. The funds are available for expenditure.
3. The expenditure is allowable under the grant.
4. The expenditure is necessary to the program.

DuPage County Community Services (DCCS) funds will not be utilized to purchase goods and/or services for employees and/or their families even if reimbursement is received for such goods and/or services. Goods and services purchases with DCCS funds are to be used solely for the benefit of the agency and its programs. The use of agency goods and services for personal use by agency employees or board members is not allowed under any circumstances. All purchased items are to be received by authorized employees who indicate which items were received, attach a copy of the purchase order to the invoice, and forward it to the Program Director for approval of payment. Payment is then made as described in the "Cash Disbursement Section".

I have read the above statement, agree with the statement, and will abide by the guidelines set forth with this statement for the duration of my contract/employment with DuPage County Department of Community LIHEAP FURNACE VOUCHER PROGRAM.

Signature on File

Contractor's Signature

Date

10/25/23

PIOTR BLASZCZYK

Print Name

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES

INDEMNITY CLAUSE AGREEMENT

The Contractor shall, at all times, to the extent permitted by law, fully indemnify, hold harmless, and defend the County and its officers, agents, and employees from and against any and all claims and demands, actions, causes of action, and cost and fees of any character whatsoever made by anyone whomsoever on account of or in any way growing out of the performance of this contract by the Contractor and its employees, or because of any act or omission, neglect or misconduct of the Contractor, its employees and agents or its subcontractors including, but not limited to, any claims that may be made by the employees themselves for injuries to their person or property or otherwise, and any claims that may be made by the employees themselves or by the Illinois Department of Labor for the Contractor's violation of the Illinois Prevailing Wage Act (820 ILCS 130/1 et seq.).

Such indemnity shall not be limited by reason of the enumeration of any insurance coverage or bond herein provided.

Nothing contained herein shall be construed as prohibiting the County, its officers, agents, or its employees, from defending through the selection and use of their own agents, attorneys and experts, any claims, actions or suits brought against them. The Contractor shall likewise be liable for the cost, fees and expenses incurred in the County's or the Contractor's defense of any such claims, actions, or suits.

The Contractor shall be responsible for any damages incurred as a result of its errors, omissions or negligent acts and for any losses or costs to repair or remedy construction as a result of its errors, omissions or negligent acts.

The County does not waive its defenses or immunities under the Local Government and Governmental Employees Tort Immunity Act, 745 ILCS 10/1 et seq. by reason of indemnification or insurance.

Healthy Air Heating & Air, Inc.

10/25/23

Name of Company
Signature on File

Date

0
Contractor Signature

10/25/23

Date

Energy Coordinator

Date

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES
SAFETY DATA SHEETS

All vendors, contractors, and/or suppliers must present Safety Data Sheets (SDS) in the printed format of their choice. Each form should include the following minimum information:

- Name and/or product number.
- Name and address of manufacturer.
- Description of hazardous material contained in the product.
- Effects of the hazardous material.
- Telephone number of manufacturer where additional information can be obtained.

SDS are required for any materials containing potentially hazardous substances. All labor vendors, suppliers, and/or contractor must provide SDS to their work crew employees and to DuPage County Department of Community Development. Upon Contract Award, labor vendors, suppliers, and/or contractors must also assure DuPage County Community Development, in writing, that their work crew employees have received the SDS.

I, PIOTR BLASZCZYK (print name) agree to guidelines/stipulations and agree to provide said SDS to DuPage County Department of Community Services LIHEAP FURNACE VOUCHER PROGRAM.

Signature on File

Contractors' Signature

Date

10/25/23

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES

LIHEAP FURNACE VOUCHER PROGRAM

AGREEMENT TO WORK FOR BID PRICES

I, PIOTR BLASZCZYK (contractor) agree to work for the prices that have been agreed upon by the DuPage County Community Services LIHEAP FURNACE VOUCHER PROGRAM and current contractors. I have been given a catalog of the prices and have submitted all of the required paperwork.

Energy Coordinator, DCCSWP

Date

Signature on File

10/25/23

Contractor

Date

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES

LIHEAP FURNACE VOUCHER PROGRAM

UNACCEPTABLE WORK STATEMENT

Work deemed unacceptable by the final inspector will affect job payment. Contractor understands that payment for work is dependent on whether the work order successfully passes final inspection and that a call-back work order is placed in a pending payment status. No work order will be partially paid for until all work has passed final inspection.

Signature on File

Signature

Date

10/25/23

DUPAGE COUNTY DEPARTMENT OF COMMUNITY SERVICES

LIHEAP FURNACE VOUCHER PROGRAM

MINORITY, SMALL BUSINESS, WOMEN-OWNED BUSINESSES STATEMENT

Minority, Small Business, and Women-Owned Businesses will be given references for purchases whenever possible. Information will be made available to these firms to encourage their participation in agency's functions. When contractor for goods and services, preference will be given to contractors who subcontract with small business, minority-owned firms, and women-owned business enterprises.

Signature on File

Signature U

10/25/23

Date

EMERGENCY CONTACT INFORMATION:

EMERGENCY CONTACT INFORMATION	
NAME	PIOTR BLASZCZYK
CONTACT	PRESIDENT
ADDRESS	124 N Bloomingdale Rd
CITY ST ZIP	Bloomington, IL 60108
EMERGENCY PHONE NO.	630-927-2211
EMAIL	healthyairheatingandair@gmail.com



COVER LETTER

DuPage LIHEAP

I appreciate the opportunity to submit our bid for the 2024 DuPage Liheap Program to you.

I am excited at the prospect of working with the DuPage LIHEAP program to assist so many homeowners in the DuPage community for Emergency Heating Services saving them energy costs.

We have had what I feel is a long and successful working relationship with DuPage County services for many years providing exactly the services offered in this bid. We have and will always strive for 100% customer satisfaction going over and beyond for the customer from customer service, the work and any follow up. We attempt to be available, responsive and responsible for all aspects of what this bid requires of us.

We are always open to suggestions on how we can do better from any office paperwork, scheduling, work aspects or anything to make a better or smoother working relationship.

I thank you for your time and consideration of Healthy Air Heating and Air, Inc. for BID#23-124-WEX.

Respectfully,

Piotr Blaszczyk

Signature on File

President Healthy Air Heating & Air, Inc.

HEALTHYAIR

Heating and Air, Inc.

Energy and Weatherization Experts

FIRM QUALIFICATIONS

A) To summarize our firms qualifications would include:

1) All employee's knowledgeable in weatherization work, practices, procedures to complete the work

2) Office centrally located in DuPage county to respond to all areas quickly, with warehouse/storage space designed to house materials and equipment for Weatherization services. We have at least 4-7 employee's dedicated to Weatherization work so we can run multiple jobs simultaneously to complete work in a timely manner.

B) We have myself the owner whom oversees every job and a very experienced lead tech on all jobs at all times to ensure all work items are completed properly according to IHWAP standards.

C) What differentiates our company from any others would be our vast years of experience working Weatherization programs for DuPage and Cook Counties and being able to adapt on the fly with new product and procedures they have implemented over the years to enhance the homeowners energy efficiency. I would say we are one of the premier if not the premier company for Weatherization work in the entire Chicagoland area. Based on our employees, office staff, financial stability, responsiveness, communication, full transparency and leadership.

D) Relevant experience would include DuPage Weatherization work for the past 5 of 6 years, Cook County Weatherization work for 10 years, never failing to complete a contract or jobs assigned in the timeframe allotted.

E) (SEE ATTACHED) Company documentation to include: IL Corporation in Good Standing, Tax ID, Certifications, Village registrations, etc.

F) References:

1) DuPage County MECH/LIHEAP/Weatherization: David Watkins Weatherization Program Coordinator - 630-407-6469 David.Watkins@dupageco.org

2) Cook County LIHEAP/Weatherization: Brad Wiesneth LIHEAP Program Coordinator - 312-448-1479 bwiesneth@ceda.org.net

3) DuPage County MECH/LIHEAP/Weatherization: Estefania Fabris Weatherization Staff- 630-407-6469 Estefania.Fabris@dupageco.org

4) BMO Harris Bank: Personal Banking 191 E Lake St Bloomingdale, IL 60108 - 630-980-8700

5) Munch Supply: Accounting - 301 Ferraro Dr New Lenox, IL 60451 - 815-723-1111

6) NuComfort Supply: Jim Hochschild 630-534-4900 500 Windy Point Dr Glendale Heights, IL 60139

Respectfully,

Piotr Blaszczyk

President Healthy Air Heating & Air, Inc.

124 N Bloomingdale Rd Bloomingdale, IL 60108 P: 630-980-4575 F: 630-980-5577 E: healthyairheatingandair@gmail.com



KEY QUALIFICATIONS

Healthy Air Heating & Air, Inc. has a proven background in Weatherization services for 10+ years and key personal with extensive experience to satisfy all scope of work assigned by DuPage County for the Weatherization Program.

Our team includes:

- 1) Piotr Blaszczyk 21 years experience - President and active person in all aspects of Weatherization assignments
- 2) Anna Blaszczyk 21 years experience- Treasurer: Payroll, billing, invoicing, accounts payable & receivable, time cards, banking
- 3) Richard Kuhn 21 years experience - Office Manager: Work orders, paperwork, village registrations, association processing, scheduling, re-work, invoicing, customer service.
- 4) Ryszard Litwin 20 years experience - Lead technician/foreman: Weatherization standard practices, insulation, foam, electrical, plumbing, ASHRAE fans, general construction, windows, doors
- 5) Pawel Lukacz 20 years experience - Weatherization technician: Weatherization standard practices, insulation, foam, minor electrical, minor plumbing, tile, ASHRAE fans, general construction, windows, doors
- 6) Ricardo Roa 5 years experience - Weatherization technician: Weatherization standard practices, insulation, foam, minor electrical, ASHRAE fans, general construction, windows, doors

Healthy Air Heating & Air Inc. is a family owned and operated company with all officers and employees in communication daily with each other on jobs on hand, in progress and completed for smooth transferring of information from start to finish of all work assigned. Every person plays a key role to the overall success of the customer satisfaction on every job and we are always striving to improve in all areas and personal to achieve the greatest satisfaction for the program we are working on.

We hold monthly training on a variety of items as new requirements arise and review existing practices so we all stay sharp to achieve the goal.

One point we pride ourself on is any customer complaint is taken seriously and immediate action is taken to resolve even the smallest complaint at any time in the warranty period. We feel we go above and beyond what is expected in this area as we are always trying to make our program employer look good to the customer at all times.

Our vehicles are professional grade, lettered with company information, all employees wear company clothing and we provide all necessary PPE for employees always trying to keep them and the customers safe at all times.

Respectfully,

Piotr Blaszczyk

President Healthy Air Heating & Air, Inc.

124 N Bloomingdale Rd Bloomingdale, IL 60108 P: 630-980-4575 F: 630-980-5577 E: healthyairheatingandair@gmail.com



PROJECT UNDERSTANDING

Healthy Air Heating & Air, Inc. has great interest in working with DuPage County Weatherization Program to continue helping those who qualify for the program to make their homes better and more energy efficient. We have devoted over a decade of company time, resources, training, lives to the Weatherization program for DuPage & Cook County combined and if this is a small way we can make our community better we could not be prouder to do so.

We have set up internal custom systems for scheduling, invoicing, templates, communication lists, vendors, space to accommodate providing Weatherization services and feel we are in the best position to fulfill any size contract we can be awarded to do. We have been able to coordinate seamlessly with DuPage & Cook Counties our scheduling of jobs, in progress and completion with our Grand List Spreadsheet and email communications with director, assessors, inspectors and staff. Making sure we are all on the same page working together to meet the clients goal is of top priority at all times.

- A) Our ongoing management is working directly each day with all persons involved in the Weatherization program to stay on schedule, schedule new work, take care of any call backs, and stay on top of any new training or procedures that employees need to know to do their jobs in the best way possible.
- B) Our performance metrics has met all awarded contracts in full every year and have even gone over and beyond to pick up other contractors jobs that had fallen behind. We have been and will always be able to adapt to the ups and jobs of program job flow as to stay on track to completion. The better we are informed of whats coming the better we can be prepared to meet the goal in the desired time frame, I will say the only (X) factor is association approvals can be tricky and sometimes lengthy but even there, feel we have a great system to gain association approval faster than most any company out there.
- C) Incident Report: (SEE ATTACHED SAMPLE INCIDENT REPORT FORM)
- D) Incident Process Procedure:
 - 1) Immediately make an incident report internally with any and all parties involved
 - 2) Submit report to owner of Healthy Air Heating & Air, Inc.
 - 3) Inform DuPage County of the nature of the incident and potential issues from the incident and inform them if this will handled internally or will require additional outside assistance from the proper services.
 - 4) All parties will be keep abreast of all reviews and actions taken to resolve the incident until its conclusion.

Respectfully,

Piotr Blaszczyk

President Healthy Air Heating & Air, Inc.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/4/2023

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 Kaiser/North Shore Insurance 1400 Sunset Ave Ste #1 Waukegan, Illinois 60087	Phone: (847)623-0300 Fax: (847)623-0988	CONTACT NAME: Joanne Gray PHONE (A/C, No, Ext): (847)367-1400 FAX (A/C, No): E-MAIL ADDRESS: joanne@jtonge.com
INSURED HEALTHY AIR HEATING & AIR INC 124 N Bloomingdale Road BLOOMINGDALE, IL 60108		INSURER(S) AFFORDING COVERAGE INSURER A: Travelers Property Casualty Company Of America INSURER B: Acuity, A Mutual Insurance Company INSURER C: INSURER D: INSURER E: INSURER F:

COVERAGES

CERTIFICATE NUMBER: 2854

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 INSURED	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"/> PROJECT <input type="checkbox"/> LOG OTHER:	<input checked="" type="checkbox"/>		Y	RIP-004W902144	3/20/2023	3/20/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			Y	BA-004W902899	3/20/2023	3/20/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTIONS			Y	ZC 4484	3/20/2023	3/20/2024	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
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	Y	UB-004W702889	3/20/2023	3/20/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

THE COUNTY OF DUPAGE IS ADDITIONAL INSURED ON A PRIMARY AND NON CONTRIBUTORY BASIS WITH A WAIVER OF SUBROGATION
WORK COMP WAIVER WC000313
GENERAL LIABILITY PRIMARY CB-1488
GENERAL LIABILITY WAIVER CB7457

CERTIFICATE HOLDER

Holder's Nature of Interest: Additional Insured

DUPAGE COUNTY

BUILDING & ZONING DEPARTMENT
421 N. COUNTY FARM ROAD
WHEATON, IL 60187**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

Signature on File



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulis, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

HEALTHY AIR HEATING & AIR, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 03, 2000, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set
my hand and cause to be affixed the Great Seal of
the State of Illinois, this 12TH
day of APRIL A.D. 2023 .

Alexi Giannoulis

SECRETARY OF STATE

ORIGINAL

2021 EE Installer Annual Recertification under 83 IL Adm. Code 462

ILLINOIS COMMERCE COMMISSION

Section 462.70(a):

1. Please provide the name of the company/entity as it appears in the most recent Commission order granting the certificate to install energy efficient measures.

Company Name¹: Healthy Air Heating & Air, Inc.

MAR 06 2023

ICC Docket # for certification¹ 18-0489

ILLINOIS COMMERCE COMMISSION
CHIEF CLERK'S OFFICE

Section 462.70(c)(4):

2. Please provide the name, telephone number, email address and mailing address of at least one person designated by the certificate holder to address questions pertaining to the Recertification Report.

Name: Piotr Blaszczyk

Mailing Address: 124 N Bloomingdale Rd Bloomingdale, IL 60108

Telephone Number: 630-980-4575

Email Address: healthyairheatingandair@gmail.com

Section 462.70(c)(3):

3. Please provide the total number of residential electric energy efficiency measures (regardless of utility rebate or incentive value) installed in calendar year 2022

"see confidential version"

4. Please provide the total number of commercial electric energy efficiency measures (regardless of utility rebate or incentive value) installed in calendar year 2022

"see confidential version"

¹ If you are unsure, you can search for the name and docket number at <https://www.icc.illinois.gov/utility/default.aspx?ats=28>. The docket number is 2 digits followed by a dash followed by four digits. The first two digits correspond to the year your application was received.

EE Installer Recertification Report: To be submitted annually by June 1

Section 462.70(c)(1) and (2):

Certificate Holder, Healthy Air Heating & Air, Inc. continues to maintain the required qualifications for the service authority granted in its certificate.

Certificate Holder Healthy Air Heating & Air, Inc. continues to comply with the requirements set forth in Illinois Adm. Code Part 462 and Sections 16-128(a) and 16-128B of the Public Utilities Act.

I certify that all the information provided in this annual report is true, correct, and complete to the best of my knowledge, information, and belief.

Signature on File

Signature

Piotr Blaszczyk

Name

President

Position Held

630-927-2211

Contact Phone #

If a notarized signature is required and obtaining such notarization is not possible, please note that under Section 200.130 as amended 6/17/19, verification by certification under Section 1-109 of the Code of Civil Procedure, 735 ILCS 5/1-109, is authorized for Commission documents in lieu of swearing before a notary. The following language is used to verify by certification:

Under penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be information and belief and as to such matters the undersigned certifies as aforesaid that he verily believes the same to be true.

Signature on File

[signature]