

PROFESSIONAL SERVICE CONTRACT TRANSMITTAL RECORD

CONTRACT PO NUMBER 2821497
 STANDARD PO NUMBER
 CHANGE ORDER # 4

Insurance Requirement

ACCOUNTS PAYABLE WILL HOLD UP ALL CONTRACT PAYMENTS UNTIL ALL INSURANCE CERTIFICATES/POLICIES REQUIRED UNDER THE CONTRACT HAVE BEEN RECEIVED. CONTRACTORS SHOULD BE MADE AWARE OF THIS REQUIREMENT.

TYPE OF CONTRACT: (Check One) <input type="checkbox"/> CONSTRUCTION/DEMOLITION <input type="checkbox"/> LEASE <input type="checkbox"/> DEED <input checked="" type="checkbox"/> PROFESSIONAL SERVICES <input type="checkbox"/> PERSONAL SERVICES	DEPARTMENT HEAD'S SIGNATURE 	DEPARTMENT DEPARTMENT OF ADMINISTRATIVE HEARINGS
FUNDING SOURCE (Percent) FEDERAL % STATE % CITY 100% OTHER %	DEPARTMENT CONTACT PERSON LADONNA REAVES	PHONE NO. (313) 224-6609
CONTRACTOR'S NAME: PIE MANAGEMENT, LLC		DATE PREPARED DECEMBER 11, 2014
CONTRACTOR'S ADDRESS: 719 GRISWOLD, SUITE #820 DETROIT, MI 48226	ENGINEER'S ESTIMATE <input type="checkbox"/> CONTRACT <input type="checkbox"/> CHANGE <input checked="" type="checkbox"/> <i>mbs</i> TOTAL CONTRACT AMOUNT \$5,000,000 TOTAL CPO AMOUNT \$5,000,000 CHANGE AMOUNT \$187,000 <i>mbs 0</i>	
PHONE NO. 313 424-1228	<input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL	
FEDERAL EMPLOYER/SOCIAL SECURITY NUMBER: 30-0024055		MINORITY FIRM <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
PURPOSE OF CONTRACT: TO PROVIDE COMPUTER SERVICES, CODING AND ANALYSIS		
CHARGE ACCOUNT: 1000- 450010 - 617400 - 11159 - 000000 - EP516		

TIME & DATE IN	APPROVER MUST ALSO MAKE APPROPRIATE NOTES IN ORACLE PURCHASE ORDER	TIME & DATE IN
	REQUESTING DEPARTMENT ADMINISTRATIVE HEARINGS AUTHORIZED DEPARTMENT REPRESENTATIVE	
DEC 12 2014	BUDGET <input checked="" type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL BUDGET DIRECTOR OR DEPUTY	DEC 17 2014 15 JAN - 8 AM 11: 27 FINANCE DEPARTMENT PURCHASING DIVISION
	GRANT MANAGEMENT SECTION <input type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL GRANT ACCOUNTANT	
DEC 18 2014	FINANCE DEPARTMENT <input checked="" type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL FINANCE DIRECTOR OR DEPUTY	12/18/14
	LAW DEPARTMENT <input checked="" type="checkbox"/> RECOMMEND APPROVAL <input type="checkbox"/> RECOMMEND DENIAL CORPORATION COUNSEL	1/8/15
	PURCHASING DIVISION PURCHASING DIRECTOR	2/25/15
CITY COUNCIL APPROVAL JCC REFERENCE: PAGE _____ DATE _____		

FRC Approval

FEB 23 2015

FEB 03 2015

CITY OF DETROIT
AMENDMENT TO AGREEMENT NO. 4
TO
CONTRACT NO. 2821497

THIS AMENDMENT AGREEMENT NO. 4 is entered into by and between the City of Detroit, a Michigan municipal corporation, acting by and through its Administrative Hearings (name of department) Department ("City"), and PIE Management, LLC, a Michigan Corporation, with its principal place of business located at 719 Griswold, Suite #820, Detroit, MI 48226 ("Contractor").

WHEREAS, the *City* has engaged the *Contractor* to provide certain services ("Services") to the City; and

WHEREAS, the *City* and the *Contractor* have entered into a *Contract* reflecting the terms and conditions governing the subject engagement; and

WHEREAS, Article 17 of the *Contract* permits the parties to amend the *Contract* by mutual agreement; and

WHEREAS, it is the mutual desire of the parties to enter into this *Amendment* to amend the *Contract* to extend the term of the *Contract* and to provide increased compensation to pay for *Services* performed pursuant to the extension of the *Contract*.

NOW THEREFORE, in consideration of the foregoing, and the benefits to accrue to the parties and to the public from this *Amendment*, the parties agree that this *Contract* is amended as follows:

I. PURPOSE OF AMENDMENT 4

1.01 The purpose of this *Amendment* is to extend the contract period to June 30, 2015.

**IV. EFFECT OF AMENDED TERMS
ON THE REMAINING PROVISIONS
OF THE CONTRACT**

4.01 With the exception of the provisions of the *Contract* specifically contained in the *Amendment*, all other terms, conditions and covenants contained in the *Contract* shall remain in full force and effect as set forth in the *Contract*.

V. PAYMENT AUTHORIZATION

5.01 The Finance Director of the *City* shall not authorize any payment pursuant to this *Amendment* until the *Amendment* has been approved by resolution of the *Detroit City Council*, all appropriate departmental approvals have been obtained and this *Amendment* has been executed by the Purchasing Director for the *City*.

SIGNATURE PAGE

IN WITNESS WHEREOF, The City and the Contractor, by and through their duly authorized officers and representatives, have executed this Contract as of the dates of their respective signatures:

WITNESSES:

1. [Signature]
(Signature)
Saula Rice
(Print Name)

2. [Signature]
(Signature)
Marquita J. Tharpe
(Print Name)

CONTRACTOR:

By: [Signature]
(Signature)
William A. Phillips
(Print Name)

Its: PRESIDENT + C.E.O.
(Title)

WITNESSES:

1. [Signature]
(Signature)
Ladonna Reaves
(Print Name)

2. [Signature]
(Signature)
Mica Smith
(Print Name)

CITY OF DETROIT:

By: [Signature]
(Signature)
Miriam Planks Smart
(Print Name)

Its: Director
(Title)

THIS CONTRACT WAS APPROVED BY LAW DEPARTMENT BY THE CITY COUNCIL ON PURSUANT TO §7.5-206 OF THE CHARTER OF THE CITY OF DETROIT

FEB 03 2015

[Signature] 2/25/15 [Signature] 1-8-15
Purchasing Director Date Corporation Counsel Date

THIS CONTRACT IS NOT VALID OR AUTHORIZED UNTIL APPROVED BY RESOLUTION OF THE CITY COUNCIL AND SIGNED BY THE PURCHASING DIRECTOR.

CITY ACKNOWLEDGMENT

STATE OF Michigan)
)SS.
COUNTY OF Wayne)

The foregoing contract was acknowledged before me the 11th day of December,
2014, by Miriam Blanks-Smart, Esq,
(name of person who signed the contract)
the Director,
(title of person who signed the contract as it appears on the contract)
of Department of Administrative Hearings,
(complete name of the City department)
on behalf of the City.

Mica Smith

Notary Public, County of Wayne

State of Michigan

My commission expires: April 27, 2018

MICA SMITH
Notary Public, State of Michigan
County of Wayne
My Commission Expires 4-27-18
Acting In the County of Wayne

LIMITED LIABILITY COMPANY

CERTIFICATE OF AUTHORITY

I, William A. Phillips, a Manager or Member of
(name of manager)

P.I.E. Management, L.L.C., a limited liability company (the "Company"), **DO HEREBY**
(name of company)

CERTIFY that I am a Manager or Member of the Company who has the authority to act as an agent of the Company in executing this Certificate of Authority. I further certify that the following individuals are Managers or Members of the Company who have the authority to execute and commit the Company to the conditions, obligations, stipulations and undertakings contained in the foregoing Contract between the City and the Company:

William A. Phillips

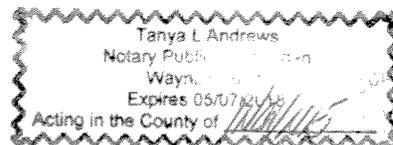
FURTHER, I CERTIFY that all necessary approvals by the Managers or Members of the Company have been obtained with respect to the execution of said Contract.

IN WITNESS THEREOF, I have set my hand this 9TH day of DECEMBER, 20 17.
COMPANY SEAL
(if any)

William A. Phillips

Manager or Member

PLEASE NOTE THAT THE PERSON WHO SIGNS THE CONTRACT ON BEHALF OF YOUR LIMITED LIABILITY COMPANY MUST BE ONE OF THE INDIVIDUALS LISTED ABOVE AS A PERSON AUTHORIZED TO EXECUTE CONTRACTS IN THE NAME OF AND ON BEHALF OF THE LIMITED LIABILITY COMPANY.



Detroit City Council
Legislative Policy Division

TO: Purchasing Division Staff
FROM: David Teeter
DATE: February 3, 2015

RE: **PURCHASING ITEMS APPROVED BY THE CITY COUNCIL**

The following are contracts that were considered by the City Council at the *Adjourned Session of Thursday, January 29, 2015*.

*The following contracts, purchase orders and other matters were reported to the City Council, by the indicated Standing Committee, at the Adjourned Session of January 29, 2015, and **APPROVED**.*

Reported by Internal Operations Committee

87068 Charles S. McEwen \$4,000 INSPECTOR GENERAL
Submitted in the List for January 27, 2015; Referred to the Adjourned Session
Correction submitted to the term and contract amount; Approved with ***WAIVER***.

Reported by Public Health and Safety Committee

2902527,Lease Boulevard Holdings (2875 W.Grand Blvd) \$2,727,752 POLICE
Walked on to Committee Meeting Jan. 26; Moved to New Business; Moved to Adjourned Session.

One contract was Reconsidered at the Session of February 3, 2015, that was approved at the Adjourned Session of January 29, 2015

2902527,Lease Boulevard Holdings (2875 W.Grand Blvd) \$2,727,752 POLICE
Request to Reconsider by Council Member Scott Benson; Reconsideration Approved;
Vote to consider the Contract **POSTPONED** 1 Week.

*The following contracts and purchase orders were reported to the City Council by the indicated Standing Committee, at the Regular Session of February 3, 2015 and **APPROVED***

Reported by the Budget, Finance and Audit Committee:

No Contracts Reported

*The following contracts and purchase orders were reported to the City Council by the indicated Standing Committee, at the Regular Session of February 3, 2015 and **APPROVED***

Reported by the Internal Operations Committee:

No Contracts Reported

Reported by the Neighborhood and Community Services Committee:

No Contracts Reported

Reported by the Planning and Economic Development Committee:

2892521,Amend. Corporate F.A.C.T.S. No. Increase to \$2,135,137 PLAN.&DEVELOPT.
Submitted in the List and Referred on January 27, 2015; Includes corrections submitted Jan. 30, 2015.

2899854 Detroit Economic Development Corp. \$255,000 PLAN.&DEVELOPT.
Submitted in the List and Referred on January 27, 2015; Approved with ***WAIVER***.

2899858 Detroit Economic Growth Corp. \$865,837 PLAN.&DEVELOPT.
Submitted in the List and Referred on January 27, 2015; Approved with ***WAIVER***.

Reported by the Public Health and Safety Committee:

2901177 Walker's Heating & Cooling \$149,861.61 TRANSPORTATION
Submitted in the List for the Week of December 15, 2014.

2897760 Automotive Media d/b/a IM Branded \$33,833 FIRE
Submitted in the List and Referred January 13, 2015.

2899374,Revenue Comerica Bank Corp. Est. Revenue not indicated POLICE
Submitted in the List and Referred January 13, 2015.

2900062 (MiDeal) – Motorola Solutions \$7,500,000 **QOL** POLICE
Submitted in the List and Referred January 13, 2015.

2899331 CTT Equipment \$147,200 TRANSPORTATION
Submitted in the List and Referred October 28, 2014; Approved November 12, 2014 for \$135,200;
Correction to Cost, for \$147,200, Referred January 13, 2015.

Purchasing Division
Contracts and Purchase Orders Received, Considered at Regular Session
of February 3, 2015

Page 3

*The following contracts and purchase orders were reported to the City Council by the indicated Standing Committee, at the Regular Session of February 3, 2015 and **APPROVED***

Reported by the Public Health and Safety Committee: *continued*

2901820	Crestline Specialties	\$54,000	TRANSPORTATION
	Submitted in the List and Referred January 20, 2015.		
2821497,Ext.	PIE Management (IT services)	No +\$ to \$5,000,000	ADMIN.HEARINGS
	Submitted in the List and Referred January 20, 2015.		
2900137	Detroit Building Authority	\$240,000	AIRPORT
	Submitted in the List and Referred January 20, 2015.		
2900804	Booth Research Group (Promotion Exams)	\$226,000	POLICE
	Submitted in the List and Referred January 20, 2015.		
86955	Tiffany Perry (Victims Assist.Advocate)	\$36,400	POLICE
	Submitted in the List and Referred January 20, 2015.		
2901724	AIS Construction Equipment	\$165,200	PUBLIC WORKS
	Submitted in the List and Referred January 20, 2015.		

*The following contracts were **REFERRED** on February 3, 2015 to the indicated Standing Committee for consideration and report to the City Council.*

Referred to Budget, Finance and Audit Committee

No Contracts Referred

Referred to Internal Operations Committee

No Contracts Referred

Referred to Neighborhood and Community Services Committee

No Contracts Referred

*The following contracts were **REFERRED** on February 3, 2015 to the indicated Standing Committee for consideration and report to the City Council.*

Referred to Planning and Economic Development Committee

2893571,Ext.	Det.Rescue Mission Ministries	PLANNING & DEVELOPMT.
2893809,Ext.	Cass Comm. Social Services	PLANNING & DEVELOPMT.
2893819,Ext.	Operation Get Down	PLANNING & DEVELOPMT.

Referred to Public Health and Safety Committee

No Contracts Referred

The following items have been HELD for review, discussion or report to the Standing Committees.

Internal Operations Committee

2877416,Chg.	Computech Corporation	+ \$1,015,562.67 to \$2,700,562.67	HUM.RESOURCE
Submitted in the List and Referred January 13, 2015; Questions from CM Cushingberry			
2877420,Chg.	FutureNet Group	+ \$1,117,011.10 to \$2,802,011.10	HUM.RESOURCE
Submitted in the List and Referred January 13, 2015; Questions from CM Cushingberry			
2903277	American Society of Employers	\$10,270	HUMAN RESOURCES
Submitted in the List and Referred January 27, 2015.			
2903278	Magnet Consulting	\$373,830	HUMAN RESOURCES
Submitted in the List and Referred January 20, 2015.			
2903279	Polaris Assessment Systems	\$227,997	HUMAN RESOURCES
Submitted in the List and Referred January 20, 2015.			
2903280	Right Management	\$405,000	HUMAN RESOURCES
Submitted in the List and Referred January 20, 2015.			

Public Health and Safety Committee

2901532	Detroit Building Authority (St. Maint.Build.)	\$4,500,000	PUBLIC WORKS
Submitted in the List and Referred January 13, 2015; Question about new construction.			

City Council Contract Agenda Items Review Checklist

Reviewer:

Date Received:

Date: December 11, 2014 Department: Department of Administrative Hearings Division: Administration

Dept Head/Contact Person: Miriam Blanks-Smart Phone No.: 313 224-2044

Description: To provide professional resources. Contract No.: 2821497 PO Type: Prof Svc - CPO Est. Value: \$ _____

Contract Term (if applicable): October 1, 2014 to June 30, 2015

Funding: City 100% State _____% Federal _____% Other: _____%
(Documentation must be furnished by the Dept. if anything other than City funding)

Recommended Supplier: PIE Management, LLC Required Date: **October 1, 2014**

1. Is the product or service ESSENTIAL to department operations? Yes No

If "Yes" please explain why: This is an ITS Contract and the resources are being utilized by the Dept. of Administrative Hearings' projects which need to time to transition to a new agreement

Consequence of not buying: Projects and progress will cease. Not technical support agency system

2. Was the product or service competitively bid? Yes No
(Request copies of bid tabulation/evaluation score sheets as needed)

If the answer to #2 is "NO" explain why there was no competition: _____

3. Was a Co-Operative Agreement Considered? Yes No Co-Operative Name: _____
If answer to #3 is "No" explain why a Co-Op was not considered: _____

4. Were savings achieved?
 Yes Amount \$ _____ No
Were additional savings requested? (10%) Yes No

5. Does the supplier currently provide other goods and services to the City? Yes No
If yes please list: _____

6. The business being awarded is EXENSTION OF EXISTING CONTRACT
If #6 is a renewal provide justification for renewal: Continue support of projects in progress is still needed

If #6 is a increase/decrease does this represent:

Variance in unit price only (Current unit price \$ _____ Suggest Unit Price \$ _____)
 Change in amount/volume of the good or service to be used (no change in unit price)

7. Is this good/service used by other departments? Yes No
If "yes" can this req/par be combined other department requirements? Yes No

8. Is this a service that can be performed by City employees? Yes No
Is this a service that City employees can be trained to do? Yes No

NOTES:

PLACE ON CITY COUNCIL AGENDA

REJECT AND NOTIFY DEPARTMENT DIRECTOR:

SIGNED: Miriam Blanks Smart DATE: December 11, 2014

INFORMATION PROVIDED BY: Miriam Blanks-Smart

TITLE: Director

PHONE NO. 313 224-2044

CITY OF DETROIT

ACCOUNTS RECEIVABLE CLEARANCE APPLICATION
2 WOODWARD AVENUE, SUITE 105, COLEMAN A YOUNG MUNICIPAL CENTER
REVENUE COLLECTIONS UNIT (313) 224-4087 FAX 224-4238 RevenueCollections@CityofDetroit.gov

SECTION A BUSINESS LICENSE BUDGET CITY COUNCIL DDT OPW FINANCE FIRE HEALTH
HUMAN RIGHTS LIA MAYOR DINGLOSMAN PLANNING & DEVELOPMENT POLICE PURCHASING
RECREATION WATER & SEWAGE OTHER
LEVELS OF DEPARTMENT PURCHASING 2 WOODWARD SUITE 105 DETROIT
DATE 1/23/15 CONTACT PERSON YULIANA GAINES
PHONE NUMBER 313-224-4612 FAX NUMBER 313-622-1160 EMAIL GAINES.Y@DETROIT.MI.GOV
CONTRACT AMOUNT \$ 5000.00

SECTION B: CORPORATION LICENSE TYPE
CORPORATION NAME
ADDRESS CITY STATE ZIP OWN LEASE
CITY PERSONAL PROPERTY NUMBER FID / EIN NUMBER
OTHER CITY OWNED PROPERTY PARCELS
CONTACT PERSON PHONE NUMBER EMAIL ADDRESS

SECTION C: PARTNERSHIP LICENSE TYPE
PARTNER'S NAME
BUSINESS ADDRESS CITY STATE ZIP OWN LEASE
CITY PERSONAL PROPERTY NUMBER FID / EIN NUMBER
ADDRESS PHONE NUMBER
HOME ADDRESS CITY STATE ZIP OWN LEASE
DRIVER'S LICENSE # OTHER CITY OWNED PROPERTY PARCELS

B PARTNER'S NAME PHONE NUMBER
HOME ADDRESS CITY STATE ZIP OWN LEASE
DRIVER'S LICENSE # OTHER CITY OWNED PROPERTY PARCELS
CONTACT PERSON PHONE NUMBER EMAIL ADDRESS

SECTION D: SOLE PROPRIETORSHIP / LLC LICENSE TYPE
BUSINESS NAME P I E MANAGEMENT, LLC
BUSINESS ADDRESS 719 GERRARD, SUITE 800 CITY STATE ZIP DETROIT MI 48206 OWN LEASE
CITY PERSONAL PROPERTY NUMBER 04-99043960 FID / EIN NUMBER
OWNER'S NAME W.P.H. PHILLIPS DRIVER'S LICENSE # P-412-867-061-551 PHONE NUMBER 313-627-7877
HOME ADDRESS 1946 PARKSIDE CITY STATE ZIP DETROIT MI 48201 OWN LEASE
OTHER CITY OWNED PROPERTY PARCELS 229 SEVILLE RD DETROIT MI 48202
EMAIL ADDRESS W.P.H. PHILLIPS @ PIE MANAGEMENT.COM

SECTION E: PERSONAL SERVICES
NAME ADDRESS
CITY STATE ZIP
PHONE NUMBER DRIVER'S LICENSE #
OTHER PROPERTY ADDRESSES OWNED IN WITHIN DETROIT
SOCIAL SECURITY NUMBER EMAIL ADDRESS

FOR TREASURY COLLECTION USE ONLY:
APPROVED DENIED DENIED WITH ATTACHMENTS
Kymette Smith DATE JAN 23 2015 TIME 10:40 AM
AUG 30 2015

REVENUE COLLECTIONS
APPROVED
CONTRACT CLEARANCES

MAY 15 2014



REQUEST FOR INCOME TAX CLEARANCE

REQUESTING DEPARTMENT/DIVISION: IT Department
E-MAIL ADDRESS: gainsy@detroitmi.gov

CONTACT NAME: Yolanda Gains PHONE: _____ FAX: _____
Type of Clearance: New Renewal (Please submit 30 days prior to submitting bid or expiration date)

To: City of Detroit Part: Individual or
Income Tax Division Company Name P.I.E. Management, L.L.C.
Coleman A. Young Municipal Center Address 719 Griswold
2 Woodward Avenue, Ste. 512 Suite 820
Detroit, MI 48226 City Detroit
Phone: (313) 224-3328 or 224-3329 State MI Zip Code 48226
Fax: (313) 224-4588 Telephone 313-967-7871 Fax # 313-967-7876
E-mail Address wphillips@piemanagement.com

B. Name of Chief Financial Officer/Authorized Contact Person (include address if different from above)
William A. Phillips Telephone # 313-967-7871
Fax # 313-967-7876

Employer Identification or Social Security Number
30-0024055 382-96-2463 Spouse Social Security Number
378-84-2429

Nature of Contract Temporary Technical Resources, BID CONTRACT AMOUNT (if known):
Consulting Services and IT Solutions Labor: \$ 55,000,000 Material: \$ _____
Contract # (if known) 48420

C. ALL QUESTIONS MUST BE ANSWERED TO EXPEDITE APPROVAL PROCESS. ANY QUESTION NOT ANSWERED MAY RESULT IN A DENIAL OF INCOME TAX CLEARANCE.

Check One LLC Individual Corporation Partnership Estate & Trust

INDIVIDUALS ANSWER QUESTIONS 1,2,3,4.

- Have you filed joint returns with spouse during the last seven (7) years? (If yes, include spouse SSN above) Yes No
- Are you a student, and/or claimed as a dependent on someone else's tax return? Yes No
- Were you employed during the last seven (7) years? Yes No
- Were you a resident of Detroit during the last seven (7) years? Yes No

CORPORATIONS AND PARTNERSHIPS ANSWER QUESTIONS 5,6,7.

- Is the company a new business in Detroit? If yes, attach Employer Registration (Form DSS-4). Yes No
- Will the company have employees working in Detroit? Yes No
- Will the company use sub-contractors or independent contractors in Detroit? Yes No

D. FOR INCOME TAX USE ONLY

Has the contractor complied with the LUCHENA JENNINGS Income Tax Ordinance?
 Yes No Signature: INCOME TAX INVESTIGATOR Date: MAY 20 2014 Expires: MAY 20 2015
 Yes No Signature _____ Date _____ Expires _____
 Yes No Signature _____ Date _____ Expires _____

VISIT OUR WEBSITE FOR INFORMATION AND TAX FORMS AT: www.detroitmi.gov

NOTE: An approved Income Tax Certificate may be used in multiple city wide departments that require a bid. Please e-mail your completed request form (preferably in pdf format) to: IncomeTaxClearance@detroitmi.gov

PURCHASING DIVISION VENDOR CLEARANCE REQUEST

Submit to: Revenue Collections
 Purchasing Vendor
 1012 Coleman A. Young Municipal Center
 Detroit, MI 48226
 (313) 224 - 4087 (Telephone)
 (313) 224 - 4238 (Fax)

Nature of Contract Temporary Technical Resources, Consulting Services and IT Solutions
 Contract Amount \$5,000,000

Business Type: () Corp () Partnership () Sole Proprietorship () Personal Services L.L.C.

Business Name P.I.E. Management, L.L.C.

Business Address 719 Griswold, Suite 820, Detroit, MI 48226

Ward/Item # _____

F.I.D. NO. 30-0024055

City Personal Property I.D. # 04-990439.60

Owner(s) Name William A. Phillips, President & C.E.O.

Owner(s) SS# 382-96-2463

Contact Person William A. Phillips

Phone Number 313-967-7871

Fax Number 313-967-7876

Owner(s) Home Address 829 Seville Row, Detroit, MI 48202 () Lease Own

Please do not write below this line for department use only.

<u>Real Property</u>	<u>Special Assessment</u>	<u>Personal Property</u>	<u>Other Receivable</u>
<input checked="" type="checkbox"/> Approved			

**REVENUE COLLECTIONS
APPROVED
CONTRACT CLEARANCES**

Comments: _____

Please mail, fax or drop off this Vendor Request Form to the Revenue Collection Unit at the address indicated above. You will be responsible for keeping the clearance and submitting a photocopy to Purchasing with your bid package.

[Handwritten Signature]
 Signature (City of Detroit)

AUG 15 2014
 Date

JAN 15 2015
 Expiration Date

COVENANT OF EQUAL OPPORTUNITY
(Application for Clearance – Terms Enforced After Contract is Awarded)

I, being duly authorized representative of the P.I.E. Management, L.L.C., (hereinafter "Contractor"), do hereby enter into a Covenant of Equal Opportunity (hereinafter "Covenant") with the City of Detroit, ("hereinafter" City); obligating the Contractor and all sub-contractors not to discriminate against any employee or applicant for employment, training, education, or apprenticeship connected directly or indirectly with the performance of the contract, with respect to his or her hire, promotion, job assignment, tenure, terms, conditions or privileges of employment because of race, color, religious beliefs, public benefit status, national origin, age, marital status, disability, sex, sexual orientation, or gender identity or expression.

I understand that it is my responsibility to ensure that all potential sub-contractors are reported to the City of Detroit Human Rights Department and have a current *Contract Specific* Clearance on file prior to working on any City of Detroit contract. I further understand that the City of Detroit reserves the rights to require additional information prior to, during, and at any time after the Clearance is issued.

Furthermore, I understand that this covenant is valid for the life of the contract and that a breach of this covenant shall be deemed a material breach of the contract and subject to damages in accordance with the City of Detroit Code, Ordinance No. 27-3-2, Section (e).

RFQ/PO No. _____

Printed Name of Contractor: P.I.E. Management, L.L.C.
(Type or Print Legibly)

Contractor Address: Detroit, Michigan, 48226
(City) (State) (Zip)

Contractor Phone/E-mail: 313-967-7871 / wphillips@piemanagement.com
(Phone) (E-mail)

Printed Name & Title of Authorized Representative: William A. Phillips, President & C.E.O.

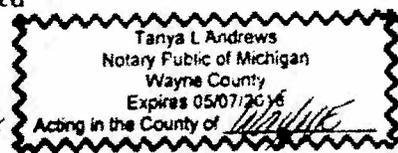
Signature of Authorized Representative: *William A. Phillips*

Date: 06/30/14

*** This document MUST be notarized ***

Signature of Notary: *Tanya L. Andrews*

Printed Name of Seal of Notary: Tanya L. Andrews



My Commission Expires: 5 1 7 1 2018

For Office Use Only:

Cov. Rec'd: 7/2/14 in _____ Department Name: Info. Tech. Servs.

Accepted by: *[Signature]* Rejected by: _____

Please email or fax Covenant and EOC to Director of Human Rights Department 1240 CAYMC at HumanRightsCL@detroitmi.gov or fax (313) 224-3434



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/2/2014

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 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 Long Insurance Services LLC 3031 W. Grand Boulevard Suite 529 Detroit MI 48202		CONTACT NAME: Mary Greenhill PHONE (A/C, Ho, Ext): (313) 873-0300 FAX (A/C, No): (313) 873-0363 E-Mail: mgreenhill@longinsuranceservices.com ADDRESS:	
INSURED PIE Management, LLC. 719 Griswold Suite 820 Detroit, MI 48226		INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES CERTIFICATE NUMBER: CL13112600384 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 SUBR INSR LTR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	GENERAL LIABILITY		PHPK802733	12/1/2014	12/1/2015	EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person)	\$ 5,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$ 1,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE	\$ 2,000,000	
A	AUTOMOBILE LIABILITY		PHPK802733	12/1/2014	12/1/2015	PRODUCTS - COM/PO/ AGG	\$ 2,000,000	
	<input type="checkbox"/> ANY AUTO					Professional Limit	\$ 3,000,000	
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per person)	\$
A	UMBRELLA LIAB	<input type="checkbox"/> OCCUR	PHUB366722	12/1/2014	12/1/2015	BODILY INJURY (Per accident)	\$	
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				PROPERTY DAMAGE (Per accident)	\$	
	DED	RETENTION \$					\$	
							EACH OCCURRENCE	\$ 3,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		PHPK802733	12/1/2014	12/1/2015	AGGREGATE	\$ 3,000,000	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input type="checkbox"/> N/A					\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
A	Professional Liab (E&O)		PHPK802733	12/1/2014	12/1/2015	E.L. DISEASE - POLICY LIMIT	\$	
						Per Occurrence	\$1,000,000	
						Aggregate	\$2,000,000	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Additional Insured as their interest may appear

CERTIFICATE HOLDER**CANCELLATION**

Additional Insured City of Detroit Coleman A. Young Municipal Center Detroit, MI 48226	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 William Long/ADMIN 

P.I.E. Management, LLC.

CITY OF DETROIT

Application for Employment

Equal Opportunity Employer

Personal Information

Name (Last Name First)		Social Security No.	
Present Address	City	State	Zip Code
Previous Address	City	State	Zip Code
Phone No.	Referred By		

Employment Desired

Position	Date you can start	Salary Desired
Are you employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, may we inquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ever applied to this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?

Education History

Name & Location of School	Years Attended	Did You Graduate?	Subjects Studied
High School			
College			
Trade, Business or Correspondence School			

General Information

Subjects of Special Study/Research Work or Special Training/Skills	
U.S. Military or Naval Service	Rank

Former Employers (List your last four employers in order, beginning with the first and ending with the last.)

Date Month and Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

References Give the names of threes persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Known
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Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damages that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) or other relevant federal and state laws."

Date:

Signature:

By signing your name above, you are binding yourself to the authorization.

Do no fill in any information below this line.

Remarks

Neatness		Character		
Personality		Ability		
Hired	For Dept	Position	Will Report	Salary Wages

Approved: 1. _____ 2. _____ 3. _____
 Employment Manager Department Head General Manager

CITY OF DETROIT
SLAVERY ERA RECORDS AND INSURANCE DISCLOSURE AFFIDAVIT

1. Name of Contractor: P.I.E. Management, L.L.C.

2. Address of Contractor: 719 Griswold, Suite 820, Detroit, MI 48226

3. Name of Predecessor Entities (if any): _____

4. Prior Affidavit submission? No Yes, on: _____
(Date of prior submission)

If "No", complete Items 5 and 6.

If "Yes", list date of prior submission above, go to Item 6 and execute this Affidavit.

5. Contractor was established in 2002 (year) and did not exist during the slavery era in the United States, is not a successor in interest to any entity that existed during such time, and therefore has no relevant records to search, or any pertinent information to disclose.

Contractor has searched their records and those of any predecessor entity, and has found no records that they or any predecessor(s) made any investments in, or derived profits from the slave industry or from slave holder insurance policies.

Contractor has found records that they or their predecessor(s) made investments in, or derived profits from, the slave industry or slave holder insurance policies. The nature of the investment, profits, or insurance policies, including the names of any slaves or slave holders, is disclosed in the attached document(s).

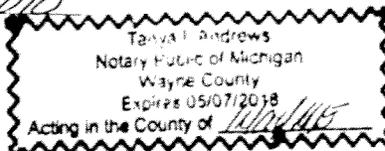
6. I declare that the representations made in this Affidavit are accurate to the best of my knowledge and are based upon a diligent search of records in the Contractor's possession or knowledge. All documentation attached to this Affidavit reflects full disclosure of all records that are required to be disclosed to the City of Detroit. I also acknowledge that any failure to conduct a diligent search, or to make a full and complete disclosure, shall render this contract voidable by the City of Detroit.

William A. Phillips (Printed Name) President & C.E.O. (Title)

William A. Phillips (Signature) June 30, 2014 (Date)

Subscribed and sworn to before me
this 30th day of June, 2014

Tanya I. Andrews
Notary Public, Wayne County, Michigan
My Commission expires: 5/7/2018





CITY OF DETROIT
FINANCE DEPARTMENT
PURCHASING DIVISION

COLEMAN A. YOUNG MUNICIPAL CENTER
2 WOODWARD AVE., SUITE 1008
DETROIT, MICHIGAN 48226
PHONE 313•224•4600
FAX 313•628•1160
WWW.DETROITMI.GOV

February 16, 2015

TO: HONORABLE CITY COUNCIL

Re: Contracts and Purchase Orders Scheduled to be considered at the Formal Session of January 20, 2015

Please be advised that the Contract submitted on Thursday, January 15, 2015 for the City Council Agenda January 120, 2015 as been amended as follows:

1. The contractor's **contract period** was submitted incorrectly to Purchasing by the Department. Please see the corrections below:

Submitted as: Page 1

ADMINISTRATIVE HEARINGS

2821497 100% City Funding – To Provide Customer Service for Municipal Court (Administrative Hearings) for Property Violation: Cashiering; Customer Service Representative; Court Clerks; Manage Offsite Storing of Court Files and provide Secured Armored Car Services of Cash Receipts - Contractor: Pie Management, LLC, Location: 719 Griswold, Suite #820, Detroit, MI 48226 – Contract Period: Upon City Council and FRC Approval through June 30, 2015 – No additional dollars required

This Amendment #4 is for extension of time. The previous contract was extended to September 30, 2014

Should read as: Page 1

ADMINISTRATIVE HEARINGS

2821497 100% City Funding – To Provide Customer Service for Municipal Court (Administrative Hearings) for Property Violation: Cashiering; Customer Service Representative; Court Clerks; Manage Offsite Storing of Court Files and provide Secured Armored Car Services of Cash Receipts - Contractor: Pie Management, LLC, Location: 719 Griswold, Suite #820, Detroit, MI 48226 – Contract Period: **October 1, 2014** through June 30, 2015 – No additional dollars required

This Amendment #4 is for extension of time. The previous contract was extended to September 30, 2014

Respectfully Submitted,

Boysie Jackson
Chief Procurement Officer
BJ/zh

BY COUNCIL MEMBER: _____

RESOLVED, that CPO# 2821497 referred to in the foregoing communication dated February 16, 2015, be hereby and is approved.