

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

ADM-1412 (REV. 06/06)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print):				Contract Number: 03A2314	
ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Price Per Unit of Measure)	TOTAL (Estimated Quantity x Unit Price)
1	104	1 Week	Weekly services to include: mowing lawns, edging, sweeping, blowing, leaf removal, weed control, application of herbicides, removal of dead shrubbery, and any debris created by landscape maintenance, per Exhibit A, Scope of Work.	\$ 231.00	\$ 24,024.00
2	24	1 Month	Monthly services to include: tree and shrubbery pruning to height measurements per Exhibit A, scope of work.	\$ 145.00	\$ 3,480.00
3	300	1 Hour	Labor items to be performed include, but not limited to: de-thatch and aerate lawns, repair sprinkler system, replace patches in lawn with new sod, changes in irrigation system, placement of new plants, per Attachment A, Scope of Work.	\$ 45.00	\$ 13,500.00
4	The Contractor will be reimbursed for the actual cost of materials/supplies purchased to be consumed or installed at the work site in performance of the Agreement (including applicable sales tax), without additional allowance for markup.				\$4,000.00
(1) THE ABOVE QUANTITIES ARE ESTIMATES ONLY AND ARE GIVEN AS A BASIS FOR COMPARISON OF BIDS. NO GUARANTEE IS MADE OR IMPLIED AS TO THE EXACT QUANTITY THAT WILL BE NEEDED. (2) IN CASE OF DISCREPANCY BETWEEN THE UNIT PRICE AND THE TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.				TOTAL THIS PROPOSAL	\$ 45,004.00

ATTACHMENT 4
BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the Bid/Bidder Certification Sheet. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with original signatures. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "**Bid Submittal - Do Not Open**".
- B. All required attachments are included with this certification sheet.
- C. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- D. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection

1. Company Name <i>Greenheart Landscaping</i>	2. Telephone Number <i>(916) 220-8930</i>	2a. Fax Number <i>()</i>
2b. Email Address <i>Sodlozi1@att.net</i>		
3. Address <i>2201 Francisco Drive, Suite 140-252, El Dorado Hills, CA 95762</i>		
Indicate your organization type:		
4. <input checked="" type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN) <i>900242515</i>	8. California Corporation No.	
Indicate applicable license and/or certification information:		
9. Contractor's State Licensing Board Number <i>C27853938</i>	10. PUC License Number CAL-T-	
11. Bidder' Name (Print) <i>Suzette Odlozi / Bennett</i>	12. Title <i>Owner</i>	
13. Signature 	14. Date <i>6-29-15</i>	
15. Are you certified with the Department of General Services, Office of Small Business and Disabled Veteran Business Enterprise Services (OSDS) as:		
a. Small Business Enterprise Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, enter certification number: <i>1785604</i>	If yes, enter your service code below: _____	
NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".		
Date application was submitted to OSDS, if an application is pending: _____		