

ATTACHMENT 1

Bid #2 REMOVE Bid #1

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION
BID PROPOSAL
ADM-1412 (REV. 2/2013)

CONTRACTOR'S NAME (Please Print):				CONTRACT NO. 03A2364	
ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (In Figures)	TOTAL (In Figures)
1	600 hours	Per Hour	Labor (includes all tools, equipment, incidentals and overhead necessary to provide service as described in the "Scope of Work", Exhibit A	\$75/hr	45,000.00
2	Projected parts/Materials/Supplies* (Contractor will be reimbursed for the actual cost without additional allowance for mark up)				4,500.00
*Calculate 10% of Item Number 1 above and enter amount here					
				TOTAL THIS PROPOSAL	49,500.00

- (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.
- (3) ANY MODIFICATION OR CHANGE THIS BID PROPOSAL SHEET WILL BE GROUNDS TO REJECT THE PROPOSAL.
- (4) EACH LINE ITEM MUST BE BID. PLEASE DO NOT LEAVE ANY UNIT PRICE COLUMN BLANK OR THIS BID PROPOSAL SHEET WILL BE DISQUALIFIED FROM COMPETITION FOR THE CONTRACT AWARD.

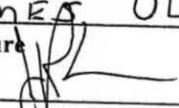
ATTACHMENT 4

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. I have read and understand the DVBE participation requirements and have included documentation demonstrating that I have met the participation goals.
- D. 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.
- E. 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 <u>JAMES ULM</u>		2. Telephone Number <u>209) 274-4816</u>	2a. Fax Number <u>209) 274 6766</u>
2b. Email Address <u>ROADRUNNER500@ATT.NET</u>			
3. Address <u>500 ROBIN COURT IONE, CA 95640</u>			
Indicate your organization type:			
<input checked="" type="checkbox"/> Sole Proprietorship		<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:			
7. Federal Employee ID No. (FEIN) <u>N/A</u>		8. California Corporation No. <u>N/A</u>	
Indicate applicable license and/or certification information:			
9. Contractor's State Licensing Board Number <u>C-10</u>		10. PUC License Number CAL-T- <u>N/A</u>	
11. Bidder' Name (Print) <u>JAMES ULM</u>		12. Title <u>OWNER</u>	
13. Signature 		14. Date <u>10-6-15</u>	
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 checked="" type="checkbox"/> No <input type="checkbox"/>	
If yes, enter certification number: <u>44189</u>		If yes, enter your service code below: <u>44189</u>	
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: <u>N/A</u>			
16. Are you a Non-Small Business committing to the use of 25% Certified Small Business Subcontractor Participation? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
If Yes, complete and return the Bidder Declaration form, GSPD-05-105 with your bid.			

BIDDER DECLARATION

1. Prime bidder information (Review attached Bidder Declaration Instructions prior to completion of this form):

a. Identify current California certification(s) ~~(MB, SB, SB/NVSA, DVBE)~~: _____ or None ___ (If "None", go to Item #2)

b. Will subcontractors be used for this contract? Yes ___ No (If yes, indicate the distinct element of work your firm will perform in this contract e.g., list the proposed products produced by your firm, state if your firm owns the transportation vehicles that will deliver the products to the State, identify which solicited services your firm will perform, etc.). Use additional sheets, as necessary.

c. If you are a California certified DVBE: (1) Are you a broker or agent? Yes ___ No
(2) If the contract includes equipment rental, does your company own at least 51% of the equipment provided in this contract (quantity and value)? Yes ___ No ___ N/A

2. If no subcontractors will be used, skip to certification below. Otherwise, list all subcontractors for this contract. (Attach additional pages if necessary):

Subcontractor Name, Contact Person, Phone Number & Fax Number	Subcontractor Address & Email Address	CA Certification (MB, SB, DVBE or None)	Work performed or goods provided for this contract	Corresponding % of bid price	Good Standing?	51% Rental?
<u>NO SUBS</u>						

CERTIFICATION: By signing the bid response, I certify under penalty of perjury that the information provided is true and correct.

ATTACHMENT 7

QUOTES FROM SB OR DVBE SUBCONTRACTORS

Bidder shall attach copies of SB OR DVBE SUBCONTRACTORS quotes from any SB or DVBE subcontractors listed in the form GSPD-05-105. Refer to instructions in RFP Section D, Items 1A and 2C.

Prime is SB, DVBE