

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

**BID PROPOSAL**

**ATTACHMENT 1**

ADM-1412 (REV. 06/06)

CONTRACTOR'S NAME (Please Print): Crosstown Electrical & Data, Inc.

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE Per Unit of Measure	TOTAL Estimated Quantity X Unit Price
	<u>Replace</u>	<u>Caltrans Furnished</u>	<u>Pole Type</u> as described in Exhibit A, Scope of Work		
1	25	EA.	TYPE 15	1,400 <sup>00</sup>	35,000 <sup>00</sup>
2	20	EA.	TYPE 15 SB	1,400 <sup>00</sup>	28,000 <sup>00</sup>
3	1	EA.	Type 17	1,400 <sup>00</sup>	1,400 <sup>00</sup>
4	5	EA.	TYPE 19	1,400 <sup>00</sup>	7,000 <sup>00</sup>
5	10	EA.	TYPE 21	1,400 <sup>00</sup>	14,000 <sup>00</sup>
6	2	EA.	TYPE 26	1,900 <sup>00</sup>	3,800 <sup>00</sup>
7	2	EA.	TYPE 29	1,900 <sup>00</sup>	3,800 <sup>00</sup>
8	15	EA.	TYPE 30	1,400 <sup>00</sup>	21,000 <sup>00</sup>
9	5	EA.	TYPE 31	1,400 <sup>00</sup>	7,000 <sup>00</sup>
10	5	EA.	TYPE 32	1,400 <sup>00</sup>	7,000 <sup>00</sup>
11	1	EA.	TYPE 60	2,800 <sup>00</sup>	2,800 <sup>00</sup>
12	2	EA.	TYPE 30' CCTV	1,400 <sup>00</sup>	2,800 <sup>00</sup>
13	2	EA.	TYPE 35' CCTV	1,400 <sup>00</sup>	2,800 <sup>00</sup>
14	2	EA.	TYPE 40' CCTV	1,400 <sup>00</sup>	2,800 <sup>00</sup>
15	1	EA.	WOODEN POLE 40'	1,400 <sup>00</sup>	1,400 <sup>00</sup>
16	1	EA.	WOODEN POLE 70'	1,400 <sup>00</sup>	1,400 <sup>00</sup>

Total this Page \$ 142,000<sup>00</sup>

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*Crosstown Electrical + Data, Inc.*

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Per Unit of Measure)	TOTAL (Estimated Quantity X Estimated Price)
<b>Remove and Replace Concrete Foundation and Mortar Cap as described in Exhibit A, Scope of Work</b>					
17	10	EA.	24"X42 Type 1A Foundation	1,400 <sup>00</sup>	14,000 <sup>00</sup>
18	20	EA.	30"X60" Type 15 Pole Foundation	2,200 <sup>00</sup>	44,000 <sup>00</sup>
19	20	EA.	36"X72" Type 15SB Pole Foundation	2,400 <sup>00</sup>	48,000 <sup>00</sup>
20	2	EA.	36"X102" Type 16 and 17 Signal Pole Foundation	3,500 <sup>00</sup>	7,000 <sup>00</sup>
21	2	EA.	36"x132" Type 19 Signal Pole Foundation	5,000 <sup>00</sup>	10,000 <sup>00</sup>
22	5	EA.	30"x60" Type 21 Pole Foundation	2,200 <sup>00</sup>	11,000 <sup>00</sup>
23	2	EA.	36"x132" Type 24 Signal Pole Foundation	4,000 <sup>00</sup>	8,000 <sup>00</sup>
24	2	EA.	42"x144" Type 26, 28 and 29 Signal Pole Foundation	5,000 <sup>00</sup>	10,000 <sup>00</sup>
25	10	EA.	30"x60" Type 30, 31 and 32 Pole foundation	2,200 <sup>00</sup>	22,000 <sup>00</sup>
26	1	EA.	42"x156" Type 60 and 61 Signal Pole Foundation	5,800 <sup>00</sup>	5,800 <sup>00</sup>
27	2	EA.	30"x90" Type 30' CCTV Pole Foundation	3,200 <sup>00</sup>	6,400 <sup>00</sup>
28	2	EA.	30"x96" Type 35' CCTV Pole Foundation	3,400 <sup>00</sup>	6,800 <sup>00</sup>
29	2	EA.	30"x102" Type 45' CCTV Pole Foundation	3,900 <sup>00</sup>	7,800 <sup>00</sup>
30	5	EA.	Type 3 BF Service Cabinet Foundation	1,000 <sup>00</sup>	5,000 <sup>00</sup>
31	5	EA.	Type 3 CF Service Cabinet Foundation	1,000 <sup>00</sup>	5,000 <sup>00</sup>
32	2	EA.	Type 332 Signal Cabinet Foundation per 2010 Standard Plans	1,800 <sup>00</sup>	3,600 <sup>00</sup>
33	5	EA.	Type 334 Signal Cabinet Foundation per 2010 Standard Plans	1,800 <sup>00</sup>	9,000 <sup>00</sup>

Total this Page \$ 223,400<sup>00</sup>

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**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):

*Crosstown Electrical + Data, Inc.*

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Per Unit of Measure)	TOTAL (Estimated Quantity X Estimated Price)
<b>Replace Caltrans Furnished Mast Arm and Laminar with Lamp as described in Exhibit A, Scope of Work</b>					
34	10	EA.	TYPE 6'	600 <sup>00</sup>	6,000 <sup>00</sup>
35	10	EA.	TYPE 8'	600 <sup>00</sup>	6,000 <sup>00</sup>
36	10	EA.	TYPE 12'	800 <sup>00</sup>	8,000 <sup>00</sup>
37	10	EA.	TYPE 15'	800 <sup>00</sup>	8,000 <sup>00</sup>
38	10	EA.	TYPE 20'	900 <sup>00</sup>	9,000 <sup>00</sup>
39	5	EA.	TYPE 40'	1,400 <sup>00</sup>	7,000 <sup>00</sup>
40	2	EA.	30' Signal Mast Arm	1,400 <sup>00</sup>	2,800 <sup>00</sup>
41	2	EA.	40' Signal Mast Arm	1,600 <sup>00</sup>	3,200 <sup>00</sup>
42	2	EA.	45' Signal Mast Arm	1,700 <sup>00</sup>	3,400 <sup>00</sup>
43	2	EA.	50' Signal Mast Arm	1,800 <sup>00</sup>	3,600 <sup>00</sup>
44	2	EA.	60' Signal Mast Arm	2,000 <sup>00</sup>	4,000 <sup>00</sup>
45	2	EA.	65' Signal Mast Arm	2,500 <sup>00</sup>	5,000 <sup>00</sup>
46	100	EA.	ALL TYPES OF LUMINAR	100 <sup>00</sup>	10,000 <sup>00</sup>
47	25	EA.	ALL TYPES OF LAMPS	50 <sup>00</sup>	1,250 <sup>00</sup>
<b>Caltrans Furnished Metal Base and Concrete Pull Boxes as describe in Exhibit A, Scope of Work</b>					
48	2	EA.	18" Break Away Type Base	500 <sup>00</sup>	1,000 <sup>00</sup>
49	5	EA.	Concrete or Anti Theft Pull Box Installation	850 <sup>00</sup>	4,250 <sup>00</sup>
				Total this page	\$ 82,500 <sup>00</sup>

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

**BID PROPOSAL**

M-1412 (REV. 06/06)

**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Per Unit of Measure)	TOTAL (Estimated Quantity X Estimated Price)
<b>Contractor Furnished Materials as described in Exhibit A, Scope of Work</b>					
50	150	FEET	1-1/2" Rigid Metal Conduit	4 <sup>00</sup>	600 <sup>00</sup>
51	100	EA.	Couplings and Bushings	5 <sup>00</sup>	500 <sup>00</sup>
52	50	EA.	Metal Reinforced Cages	850 <sup>00</sup>	42,500 <sup>00</sup>
53	10	Yards	Concrete for Anti Theft Pull Box Installation	200 <sup>00</sup>	2,000 <sup>00</sup>
<b>Contractor-Subcontractor Furnished Traffic Control as described in Exhibit A, Scope of Work</b>					
54	300	Per Hour	On Ramp and Off Ramp Closures	140 <sup>00</sup>	42,000
55	125	Per Hour	Lane Closures on Conventional Roadways	140 <sup>00</sup>	17,500
56	150	Per Hour	Freeway Mainline Lane Closures	140 <sup>00</sup>	21,000

- (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) PLEASE DO NOT ALTER, MODIFY OR CHANGE THIS BID PROPOSAL SHEET. ANY ALTERATIONS, MODIFICATIONS, OR CHANGES TO THIS BID PROPOSAL SHEET WILL BE GROUNDS TO REJECT THE BID.
- (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 CONTRACT AWARD.

TOTAL THIS PROPOSAL  
(Add totals of Pages 1,2,3, &4)

\$ 574,000

**ATTACHMENT 7**  
**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 <b>CROSSTOWN ELECTRICAL &amp; DATA, Inc.</b>	2. Telephone Number <b>(626) 813-6693</b>	2a. Fax Number <b>626 869-0192</b>
2b. Email Address <b>dave@crosstowndata.com</b>		
3. Address <b>5463 Diaz St., Irwindale, CA 91706</b>		

Indicate your organization type:

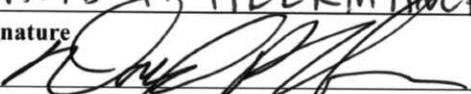
4. <input type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input checked="" type="checkbox"/> Corporation
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Indicate the applicable employee and/or corporation number:

7. Federal Employee ID No. (FEIN) <b>22-3611877</b>	8. California Corporation No. <b>2122963</b>
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Indicate applicable license and/or certification information:

9. Contractor's State Licensing Board Number <b>C10 - 756309</b>	10. PUC License Number CAL-T- <b>N/A</b>
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11. Bidder's Name (Print) <b>DAVID R. HEERMANCE</b>	12. Title <b>PRESIDENT</b>
13. Signature 	14. Date <b>8/17/15</b>

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"/>
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If yes, enter certification number:           **36901**                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: \_\_\_\_\_

16. Are you a Non-Small Business committing to the use of 25% Certified Small Business Subcontractor Participation?  
 Yes  No

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, NVSA, DVBE): SB 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.  
Crosstown will perform all work and owns their own transportation, except for Traffic Control
- c. If you are a California certified DVBE: (1) Are you a broker or agent? Yes  No   
N/A (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, NVSA, DVBE or None)	Work performed or goods provided for this contract	Corresponding % of bid price	Good Standing?	51% Rental?
Maneri Traffic Control Johnny Maneri 951-695-5104 951-695-5105	47423 Rainbow Cyn Temecula, CA 92592 maria.maneri@yahoo.com	DBE, SB	Traffic Control	14.02%	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

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

**ATTACHMENT 4**  
**Invitation for Bid No. 07A3881**

**QUOTES FROM SB OR DVBE SUBCONTRACTORS**

Bidder shall attach copies of **SB OR DVBE SUBCONTRACTORS** quotes (on SB or DVBE's letterhead) from any SB or DVBE subcontractors listed in the form GSPD-05-105. Refer to instructions in IFB Section D), Items 1 C and 2 A 2).

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**CERTIFIED DVBE SUMMARY**  
 DES-OE-0102.5 (REV 3/2008)

DISTRICT-COUNTY-ROUTE: \_\_\_\_\_  
 CONTRACT NO.: 07A3881  
 TOTAL BID: 574,000.<sup>00</sup>  
 BID OPENING DATE: 8-18-15  
 BIDDER'S NAME: CROSSTOWN ELECTRICAL + DATA, Inc.  
 DVBE PRIME CONTRACTOR CERTIFICATION <sup>1</sup> 1788728

Bid Item Number	Description of Work to Be Subcontracted to DVBE or Materials to Be Supplied by DVBE <sup>2</sup>	For Caltrans Only	DVBE (Name, Telephone No., and Certification No.)	\$ Amount
52	Steel cages - material only		Sigtel, Inc. 8170 Monroe Ave. Stanton, CA 92680 714-947-0122 #1788728	38,068.25 x 60% \$22,840. <sup>95</sup>

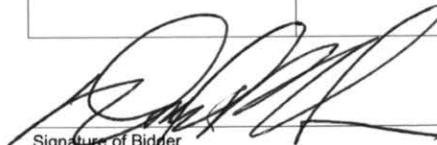
Names of first tier DVBE subcontractors and their items of work listed must be consistent with the names and items of work in the Subcontractor List (Pub Cont Code § 4100 et seq.) submitted with the bid. Identify second and lower tier subcontractors on this form.

<b>Total Claimed Participation</b>	\$ 22,840. <sup>95</sup> 3.98 %
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- DVBE prime contractors must enter their DVBE reference number or their DBA name as listed with Department of General Services (DVBE prime contractors are credited with 100 percent DVBE participation and need not complete the above table).
- If 100% of an item is not performed or supplied by the DVBEs, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE.

Submit to:

MSC 43  
 OFFICE ENGINEER  
 DEPARTMENT OF TRANSPORTATION  
 1727 30TH STREET  
 SACRAMENTO, CA 95816-7005

  
 Signature of Bidder \_\_\_\_\_ Date 8-17-15  
626-813-6693  
 (Area Code) Telephone Number  
David P. Heerman  
 Contact Person (Type or Print)



STATE OF CALIFORNIA – DEPARTMENT OF GENERAL SERVICES PROCUREMENT DIVISION  
**DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS**

STD. 843 (Rev. 5/2006)

**Instructions:** The disabled veteran (DV) owner(s) and DV manager(s) of the Disabled Veteran Business Enterprise (DVBE) must complete this declaration when a DVBE contractor or subcontractor will provide materials, supplies, services or equipment [Military and Veterans Code Section 999.2]. Violations are misdemeanors and punishable by imprisonment or fine and violators are liable for civil penalties. All signatures are made under penalty of perjury.

**SECTION 1**

Name of certified DVBE: SIGTEL DVBE Reference Number: 1788728  
Description (materials/supplies/services/equipment proposed): STEEL CAGES  
Solicitation/Contract Number: 07A3881 SCPRS Reference Number: \_\_\_\_\_  
(FOR STATE USE ONLY)

**SECTION 2**

**APPLIES TO ALL DVBEs. Check only one box in Section 2 and provide original signatures.**

- I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code Section 999.2 (b), of materials, supplies, services or equipment listed above. Also, complete section 3 below if renting equipment.
- Pursuant to Military and Veterans Code Section 999.2 (f), I (we) declare that the DVBE is a broker or agent for the principal(s) listed below or on an attached sheet(s). (Pursuant to Military and Veterans Code 999.2 (e), State funds expended for equipment rented from equipment brokers pursuant to contracts awarded under this section shall not be credited toward the 3-percent DVBE participation goal.)

All DV owners and managers of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

ROBERT MORROW Robert A Morrow 8-17-15  
(Printed Name of DV Owner/Manager) (Signature of DV Owner/Manager) (Date Signed)  
\_\_\_\_\_  
(Printed Name of DV Owner/Manager) (Signature of DV Owner/Manager) (Date Signed)

Firm/Principal for whom the DVBE is acting as a broker or agent: \_\_\_\_\_  
(If more than one firm, list on extra sheets.) (Print or Type Name)

Firm/Principal Phone: \_\_\_\_\_ Address: \_\_\_\_\_

**SECTION 3**

**APPLIES TO ALL DVBEs THAT RENT EQUIPMENT AND DECLARE THE DVBE IS NOT A BROKER.**

- Pursuant to Military and Veterans Code Section 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or a DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with Military and Veterans Code Section 999 et. Seq
- The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented for use in the contract identified above. I (we), the DV owners of the equipment, have submitted to the administering agency my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in Military and Veterans Code 999.2, subsections (c) and (g). Failure by the disabled veteran equipment owner(s) to submit their personal federal tax return(s) to the administering agency as defined in Military and Veterans Code 999.2, subsections (c) and (g), will result in the DVBE being deemed an equipment broker.

Disabled Veteran Owner(s) of the DVBE (attach additional pages with signature blocks for each person to sign):

\_\_\_\_\_  
(Printed Name) (Signature) (Date Signed)  
\_\_\_\_\_  
(Address of Owner) (Telephone) (Tax Identification Number of Owner)

Disabled Veteran Manager(s) of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

\_\_\_\_\_  
(Printed Name of DV Manager) (Signature of DV Manager) (Date Signed)