

8/13/2015 12:08:34 PM

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

DM-1412 (REV. 06/02)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print):

CONTRACT NO.
11A2328

PAGE
1 of 1

A. ITEM NO.	B. CO-RTE, PM/DESC./EA/CU	C. Contract Term	E. Flying Schedule	F. Flight Charges (Unit Charge)	G. Photography Charges (Unit Charge)	H. Photography Sub-Total	I. TOTAL 2015/2017
1	IMP-78/86, R9.2/R12.1, 23.8/24.3, Construction update, EA 167893, 1100000084	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
2	SD-5, PM R37.4/R47.5, Construction update, EA's 2T1721, 1100020362, 251711, 11000000758; 2T2111, 114000059	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
3	SD-15/78, R10.5/R31.5, 14.2/R16.5, Construction update, EA 2T0953, 1100000454	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
4	SD-805, PM 4.4/13.8, Construction update, EA 2T1823, 1100020051	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
5	SD-805, PM 21.6/27.7, Construction update EA 2T2003, 1100020191	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
6	SD-76, PM 12.1/R17.8, Construction update EA 257143, 1100020489	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
7	SD-15, PM R3.8/R6.1 Construction update EA 2T1303, 1100000456	24 Months	1 time a month	\$ 280.00	\$ 200.00	\$ 4800.00	\$ 11,520.00
8	SD-11/905, PM 0.0/1.6, R9.9/R10.7, Construction update, EA 056323, 1100020519	24 Months	Quarterly	\$ 280.00	\$ 200.00	\$ 1600.00	\$ 3,840.00
9	SD-905, 6.4/6.5, Wahi Hudson Mitigation Site, EA 288803, 1100000351	2 Years	2 times per year	\$ 280.00	\$ 200.00	\$ 800.00	\$ 1,920.00
10	SD-5, Dean Mitigation Site, EA 2T1711, 1100000758	2 Years	1 time per year	\$ 280.00	\$ 200.00	\$ 400.00	\$ 960.00
11	SD-5, Hallmark West and East, EA 2T2111, 11140000759	2 Years	1 time per year	\$ 280.00	\$ 200.00	\$ 400.00	\$ 960.00
12	SD-56, Deer Canyon Mitigation Site, EA 2T1721, 1100020362	2 Years	1 time per year	\$ 280.00	\$ 200.00	\$ 400.00	\$ 960.00
13	IMP-111, Off Site, Mitigation Site, EA 167883, 1100000083	2 Years	1 time per year	\$ 280.00	\$ 200.00	\$ 400.00	\$ 960.00
						TOTAL THIS BID PROPOSAL	\$ 90,240.00

- 1) IN CASE OF DISCREPANCY BETWEEN THE UNIT PRICE AND TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.
- 2) JOBS ARE ADDED OR SUBTRACTED AS PROJECTS ARE STARTED OR COMPLETED. MONTHLY AND OR YEARLY FLIGHTS MAY BECOME EVERY OTHER MONTH OR YEAR. ALL FLIGHTS MUST OCCUR BETWEEN THE HOURS OF 10:00 AM AND 2:00 PM, UNLESS OTHERWISE SPECIFIED IN REQUEST.
- 3) FLIGHT AND PHOTOGRAPHY CHARGES ARE UNIT PRICED (NOT PRICED PER HOUR OR PER PHOTO.)
- 4) PHOTOGRAPHY UNIT CHARGE INCLUDES, BUT ARE NOT LIMITED TO, CAMERA EQUIPMENT, SHOOTING, PROCESSING, TRANFERRING ELECTRONIC IMAGES TO A DVD OR CD, POSTAL CHARGES, AND ALL APPLICABLE TAXES.
- 5) FLIGHT UNIT CHARGE INCLUDES, BUT IS NOT LIMITED TO, PLANE, PILOT, PHOTOGRAPHER, FUEL AND MILEAGE, AND ALL APPLICABLE TAXES.

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>West Coast Aerial Photography Inc</i>	2. Telephone Number <i>(818) 788-5056</i>	2a. Fax Number <i>(818) 995-7298</i>
2b. Email Address <i>mark@photopilot.com</i>		
3. Address <i>13351 -D Riverside Drive, # 259, Sherman Oaks, California 91423</i>		

Indicate your organization type:

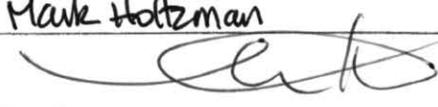
4. <input type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input checked="" type="checkbox"/> Corporation
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Indicate the applicable employee and/or corporation number:

7. Federal Employee ID No. (FEIN) <i>26-3080734</i>	8. California Corporation No. <i>3125085</i>
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Indicate applicable license and/or certification information: *N/A*

9. Contractor's State Licensing Board Number	10. PUC License Number <i>CAL-T-</i>
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11. Bidder' Name (Print) <i>Mark Holtzman</i>	12. Title <i>President</i>
13. Signature 	14. Date <i>August 18, 2015</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>CA SB Microbusiness 1003225</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: _____

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

STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION
SUBCONTRACTING PROVISIONS/LIST
Form ADM 1511 (REV. 4/14)

ATTACHMENT 2

List all subcontractors that will be used in this Agreement. All subcontractors listed below must be used in accordance with the Agreement. This includes, if applicable, compliance with the subcontracting provisions and any Disabled Veteran Business Enterprise (DVBE), Small Business (SB), Micro-Business, and Disadvantaged Business Enterprises (DBE) subcontractors. Attach a copy of the quote on the letterhead of the Certified SB, DVBE, or DBE subcontractor to this form. The quote will serve as written confirmation that the Certified SB, DVBE, or DBE is participating in the contract. If none, bidder to write "NONE" in this space.

NAME	BUSINESS ADDRESS	DESCRIPTION OF PORTION OF WORK WHICH WILL BE DONE BY EACH CONTRACTOR*
NONE		