STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

ADM-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 Qty x Unit Price = Total)
1	104	Weekly	Contractor shall supply all labor, tools, materials, equipment, disposal, transportation and incidentals necessary to provide **Weekly Landscape Maintenance Services** at the three (3) Caltrans Maintenance Stations in Los Angeles County, as described in Exhibit A, Scope of Work.	$200.00	$20,800.00
				TOTAL THIS PROPOSAL	$20,800.00

(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) EACH LINE ITEM MUST BE BID. DO NOT LEAVE ANY UNIT PRICE COLUMN BLANK OR THIS BID PROPOSAL SHEET WILL BE DISQUALIFIED FROM COMPETITION FOR CONTRACT AWARD.

(4) ALL COSTS AND FEES ASSOCIATED WITH DISPOSAL FEES SHALL BE IN ACCORDANCE WITH THE BID PROPOSAL, ATTACHMENT 1, AND NO ADDITIONAL FEES SHALL BE PAID TO THE CONTRACTOR

I Acknolged Addeum #1

Twenty thousand Eight hundred even

ATTACHMENT 3
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: Jim Parker
2. Telephone Number: 626 722-7092
2a. Fax Number: ( )
2b. Email: Parker.jim@hotmail.com
3. Address: 1431 Lafayette San Gabriel Ca 91776

Indicate your organization type:
4. ☒ Sole Proprietorship
5. ☐ Partnership
6. ☐ Corporation

Indicate the applicable employee and/or corporation number:
7. Federal Employee ID No. (FEIN): 567712043
8. California Corporation No.

Indicate applicable license and/or certification information:
9. Contractor's State Licensing Board Number: 1006288
10. PUC License Number CAL-T-
11. Required

12. Bidder' Name (Print): Jim Parker
13. Title: Owner
14. **Signature**:
15. Date: 9-5-15

16. 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 ☒ No ☐
If yes, enter certification number: 1800403
b. Disabled Veteran Business Enterprise Yes ☐ No ☐
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: _____