STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

ADM-1412 (REV. 06/06)

ATTACHMENT 1

FERREIRA CONSTRUCTION CO. INC. dba. FERREIRA COASTAL CONSTRUCTION

CONTRACTOR'S NAME (Please Print):

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Price Per Unit of Measure)	TOTAL (Unit Price X Estimated Quantity)
1	6	Each	4 ft high x up to 4 ft wide, 11 gauge, 2" - weave chain link Gate	$ 1505.00	$ 9,030.00
2	10	Each	6 ft high x up to 4 ft wide, 11 gauge, 2" - weave chain link Gate	$ 1559.00	$ 15,590.00
3	10,000	Linear Feet (LF)	6 ft x 11 gauge - 2" weave chain link Fence	$ 24.00	$ 240,000.00
4	400	LF	Up to 4 ft, 11 gauge chain link Fence	$ 23.50	$ 9,400.00
5	400	LF	5 ft, 11 gauge chain link Fence	$ 29.90	$ 9,560.00
6	300	LF	8 ft 9 gauge black vinyl coated 1" weave chain link Fence	$ 57.50	$ 17,250.00
7	300	LF	6 ft 11 gauge black vinyl coated 1" weave chain link Fence installed	$ 55.25	$ 16,575.00
8	3,000	LF	Barbwire Fence installed (up to standard five (5) strands of wire)	$ 8.00	$ 24,000.00
9	Materials/ Hardware as-needed: Contractor shall be reimbursed for actual costs of parts or materials/hardware purchased (including sales tax) without additional allowance for mark-up. Costs for materials/hardware must be substantiated by a copy of the receipt and evidence of payment and shall not exceed 10% of the total Contract amount.			**Calculate 10% of Item Numbers 1 thru 8 above and enter amount here**	$ 34,140.50
				TOTAL THIS PROPOSAL (Item Numbers 1 thru 9)	$ 375,545.50

(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.

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	2. Telephone Number	2a. Fax Number
FERREIRA CONSTRUCTION CO. INC.	909) 606-5900	909) 606-7711

2b. Email Address KRALEIGH@FERREIRACONSTRUCTION.COM

3. Address
15188 VISTA DEL RIO AVE - CHINO, CA 91710

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) 22-3734957	8. California Corporation No. C3548901

Indicate applicable license and/or certification information:

9. Contractor's State Licensing Board Number 985180 A, C-10, C-13	10. PUC License Number CAL-T-
11. Bidder' Name (Print) BRANDON PENSICK	12. Title V.P. OF CALIFORNIA OPERATIONS
13. **Signature**	14. Date 2-15-2016

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 ☐ No ☒
If yes, enter certification number: _____

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: _____

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.

ATTACHMENT 2

State of California—Department of General Services, Procurement Division
GSPD-05-105 (REV 08/09)

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):** _____ **or None** [X] (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.

   _____

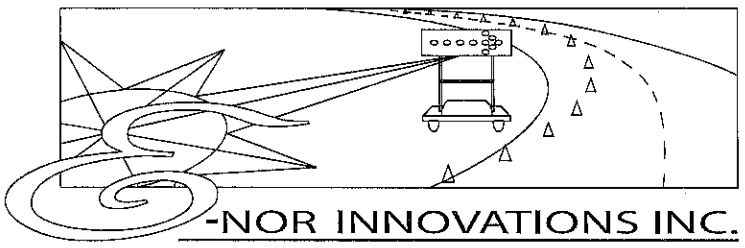
   _____

   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, NVSA, DVBE or None)	Work performed or goods provided for this contract	Corresponding % of bid price	Good Standing?	51% Rental?
E-NOR INNOVATION INC KENNY JONES 310-513-6209 310-513-6299	16213 ILLINOIS PARAMOUNT, CA 90723 KENNY@ENORTRAFFIC.COM	DVBE 37084	TRAFFIC CONTROL RENTAL + SALES	3%	[X]	[ ]
					[ ]	[ ]
					[ ]	[ ]

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



E-NOR INNOVATIONS INC.

DVBE/SBE CERTIFIED CO. LIC. #931953

16213 Illinois Ave. Paramount, CA 90723 *DVBE/SBE# 37084*
(310)513-6209 Ph 310-513-6299 Fax *UDBE/DBE/MBE/SBE#37718*
Public Works DIR#1000007079

Date: 2/11/16 **To:** Bidding Estimator
PROJECT NUMBER: Caltrans #11-A2432:
Bid Date: 2/16/16 **BID TIME:2:15PM**

ITEM	DESCRIPTION	COST
TRAFFIC CONTROL: **2MEN/TRUCK/(1- LANES, 1 DIRECTION 2 RAMPS)** (350 CONES, 3 ARROWBOARDS, 4 C30,8 AWS,2 BEACONS,8 RAMP CLOSED, 15 DETOUR ROUTES PORTABLE ADVANCE WARNING SIGNS FOR 2 ON RAMPS		
PER DAY.....SIGNAL LANE/SHOULDER CLOSURE.....8HR SHIFT.....		$1,460
PER DAY.....SIGNAL LANE/SHOULDER CLOSURE.....10HRS SHIFT.....		$1,840
ADDITIONAL LANE CLOSURE/ON OFF / RAMP	ADD	$ 75
1MAN/ATTENUATOR TRUCK		
PER DAY.....	8HR SHIFT	$ 980
PER DAY.....	10HRS SHIFT	$1,196
2MEN/FLAGMAN CREW/W RUMBLE STRIPS		
PER DAY.....	8HR SHIFT	$1,460
PER DAY.....	10HRS SHIFT	$1,840
1MAN/PILOT CAR		
PER DAY.....	8HR SHIFT	$ 892
PER DAY.....	10HRS SHIFT	$1,108
CMS UNITS	**DAILY $200EA, WEEKLY $400 EA, MONTHLY $1,000EA**	
ARROWBOARD	**DAILY $40EA, WEEKLY $400EA, MONTHLY $400EA,**	
DELIVERY	**EACH**	**$100**
PICK UP	**EACH**	**$100**

ALL PROVISIONS: WILL BE ADDED AS PART OF CONTRACT BEFORE PROCEEDING.

A. NO CONTRACT WILL BE SIGNED UNLESS ALL PROVISION ARE INCLUDED.
B. ADDITIONAL HOURS LABOR:
   OT PER MAN, PER HOUR $108
   DT PER MAN, PER HOUR $125
C. E-NOR INNOVATIONSINC. IS A UNION CONTRACTOR.
D. PAYMENT IS DUE WITHIN 30 DAYS FROM INVOICE DATE 1.5% MONTHLY FINANCE CHARGE AFTER 30 DAYS.

E. IF REQUIRED ADDITIONAL EQUIPMENT (I.E. CHANGEABLE MESSAE SIGN, ATENUATOR TRUCK) TO BE PROVIDED BY E-NOR INNOVATIONS INC AT ADDITIONAL CHARGES.

F. PRIME CONTRACTOR IS RESPONSIBLE TO OBTAIN ALL PERMITS RQUIRED FROM CITIES INVOLVED.

G. PRIME CONTRACTOR IS RESPONSIBLE TO COORDINATE AND PAY FOR HIGHWAY PATROL UNIT.

H. ADDITIONAL 31/2 PERCENT INCREASE ADDED EVERY YEAR ON JUNE 30TH. THIS PROPOSAL WILL BECOME PART OF ANY CONTRACT.

I. IF SPECIAL WORDING INSURANCE IS NEEDED THE AMOUNT TO BE PAID BY CONTRACTOR ALONG WITH WAIVERS OF SUBROGATION INSURANCE THE 3 % OF PAYROLL WILL BE CHARGED TO CONTRACTOR. IF NOTARY SERVICES ARE REQUIRED, PRIME CONTRACTOR IS RESPONSIBLE FOR THOSE CHARGES.

K. EXLUDES SPECIAL INSURANCE REQUIREMENTS. (I.E. INCREASED GENERAL LIABLITY FOR RAILROAD INSURANCE)

L. IF EQUIPMENT IS RENTED FOR SET UP ONLY, CONTRACTOR IS RESPONSIBLE FOR CLOSURE UNTIL E-NOR INNOVATIONS INC. PICKS UP CLOSURE.

M. ALL SIGN AND MARKER LOCATION / MARK-OUT TO BE DONE BY OTHERS AND MUST BE COMPLETED PRIOR TO E-NOR INNOVATIONS, INC. STARTING WORK. INC. IS NOT RESPONSIBLE FOR DAMAGE TO UNDERGROUND FACILITIES, NOT SHOWN ON PLANS OR, NOT MARKED OUT BY OTHER AGENCIES. (IE. CALTRANS)

N. ALL CHANGE ORDER WORK MUST BE APPROVED BY AGENCY / OWNER PRIOR TO WORK BEING PERFORMED BY E-NOR INNOVATIONS INC.

O. CONTRACTOR WILL BE CHARGED FOR ENOR INNOVATIONS INC. EMPLOYEES STAFF FOR ALL CLASSES/TRAINING FOR PROJECT.

P. E-NOR INNOVATIONS INC. RESERVES RIGHT TO SUBCONTRACT WORK TO COMPLETE PROJECT.

Q. NO WORK WILL BE PERFORMED UNTIL THIS PROPOSAL IS SIGNED AND FAXED/MAILEDTO OUR LONG BEACH OFFICE.

R. E-NOR INNOVATION CHARGES PORTAL TO PORTAL.

S. E-NOR INNOVATIONS INC., IS A SUPPLIER OF NON-MANUFATURED ITEMS

T. K-RAIL, SALES OR RENTAL WITH INSTALLATION, IS AVAILABLE.

Should you have any questions, please contact me at (310) 513-6209. We look forward to working with you.

Sincerely,

Kenny Jones

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: E-nor Innovations Inc DVBE Reference Number: 37084

Description (materials/supplies/services/equipment proposed): traffic equipment labor, rent, Sale

Solicitation/Contract Number: 11-A2432 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):

(Printed Name of DV Owner/Manager)	(Signature of DV Owner/Manager)	(Date Signed)
Kenneth Jones	Kenneth J	2-11-16

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

Firm/Principal Phone: N/A Address: N/A

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)
Kenneth Jones	Kenneth J	2-11-16

(Address of Owner)	(Telephone)	(Tax Identification Number of Owner)
19206 Kemp, Carson, CA 90744	310-515-6209	22-3911057

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)