

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

**BID PROPOSAL**

ADM-1412 (REV. 06/06)

**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):						CONTRACT NO.: 32A0224	
ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Price per Unit of Measure)	TOTAL (Estimated Quantity X Unit Price)		
1	450	Per Hour	General maintenance and repair in accordance with Exhibit A, Scope of Work	\$ 125.00	\$ 56,250.00		
2	24	Each	24 Lifts require an Annual Preventative Maintenance, Inspection and Certification service, in accordance with Exhibit A, Scope of Work.	\$ 350.00	\$ 8,400.00		
Subtotal of lines 1 and 2							
3	N/A	10% of Subtotal for lines 1 and 2	Projected Parts/Materials in accordance with Exhibit A, Scope of Work. This is an estimate and not a guarantee of the amount spent for this line item. Total cost of parts/materials shall not exceed this amount.	10% of Subtotal above	\$ 6,465.80		
				<b>TOTAL THIS PROPOSAL</b>	<b>\$ 71,123.80</b>		

(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 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 AllCal Equipment Services	2. Telephone Number (209)649-4530	2a. Fax Number (209)464-2314
2b. Email Address    dyates@allcales.com		
3. Address 3724 South Highway 99 Stockton, CA 95215		
Indicate your organization type:		
4. <input type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input checked="" type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN)    68-0333904	8. California Corporation No.	
Indicate applicable license and/or certification information:		
9. Contractor's State Licensing Board Number                    809454 class D/61 C21	10. PUC License Number CAL-T- 1000033556	
11. Bidder' Name (Print) David Yates	12. Title Regional Sales Manager	
13. Signature <i>David Yates</i>	14. Date 1/14/16	
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 type="checkbox"/> No <input checked="" type="checkbox"/>	b. Disabled Veteran Business Enterprise    Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
If yes, enter certification number: _____	If yes, enter your service code below: _____	
<b>NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".</b>		
Date application was submitted to OSDS, if an application is pending: _____		