

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.	\$ 125.00	\$ 3000.00
				Subtotal of lines 1 and 2	\$ 59,250.00
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	\$ 5925.00
(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.				TOTAL THIS PROPOSAL	\$ 65,175.00
(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 <i>Autolift Services Inc.</i>	2. Telephone Number <i>714 816-9890</i>	2a. Fax Number <i>714 816-9899</i>
2b. Email Address <i>autoliftservices@sbcglobal.net</i>		
3. Address <i>10764 Los Vaqueros Circle, Los Alamitos, CA 90720</i>		
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) <i>75-3056929</i>	8. California Corporation No. <i>2375438</i>	
Indicate applicable license and/or certification information:		
9. Contractor's State Licensing Board Number <i>826743</i>	10. PUC License Number CAL-T- <i>DIR#</i> <i>1000011699</i>	
11. Bidder's Name (Print) <i>Robin Woodson</i>	12. Title <i>CFO, Secretary</i>	
13. Signature 	14. Date <i>2/1/16</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>36256</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: _____		