

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**BID PROPOSAL**  
 ADM-1412 (REV. 11/2015)

**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):

*J. Mack Enterprises, INC.*

ITEM NO.	NO. UNITS OF EQUIP.	ITEM DESCRIPTION	ESTIMATED USE/UNIT	UNIT OF MEASURE	UNIT PRICE	ESTIMATED MOVES/ UNIT*	UNIT PRICE PER MOVE*	TOTAL
1	16	Agricultural Tractors	9 months, as described in Exhibit A, Scope of Work	Each	6200. <sup>00</sup>	32 possible moves	200. <sup>00</sup>	899,200

(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

\*ONE MOVE-IN PLUS ONE MOVE-OUT EQUALS ONE MOVE

TOTAL THIS PROPOSAL

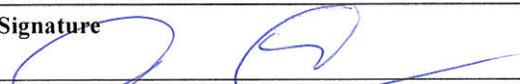
899,200.<sup>00</sup>

**ATTACHMENT 5**  
**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 <b>J. Mack Enterprises, Inc.</b>	2. Telephone Number <b>(559) 622-9911</b>	2a. Fax Number <b>(559) 622-9939</b>
2b. Email Address <b>Jesse @ jmackenterprises, inc.</b>		
3. Address <b>P.O. Box 7600, Visalia, CA 93290</b>		
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) <b>20-4748573</b>	8. California Corporation No. <b>2858035</b>	
Indicate applicable license and/or certification information:		
9. Contractor's State Licensing Board Number <b>877657</b>	10. PUC License Number <b>CAL-T-</b>	
11. Bidder's Name (Print) <b>Jesse McElree</b>	12. Title <b>President</b>	
13. Signature 	14. Date <b>1-11-16</b>	
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"/> If yes, enter certification number: <b>1731864</b>	b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, enter your service code below:	
<b>NOTE:</b> 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>		
If Yes, complete and return the Bidder Declaration form, GSPD-05-105 with your bid.		

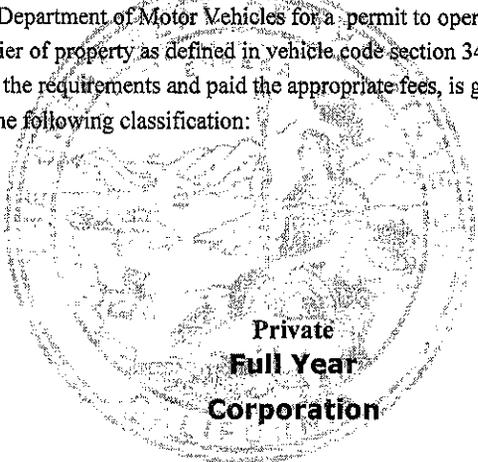
**DEPARTMENT OF MOTOR VEHICLES**

Registration Operations Division MS G875  
 P.O. BOX 932370 Sacramento, CA. 94232-3700  
 (916) 657-8153



04/13/2015

J MACK ENTERPRISES INC  
 PO BX 7600  
 VISALIA, CA 93290

 DEPARTMENT OF MOTOR VEHICLES A Public Service Agency		<h2>MOTOR CARRIER PERMIT</h2>	
DEPARTMENT OF MOTOR VEHICLES Registration Operations Division P.O. BOX 932370 Sacramento, CA. 94232-3700		<b>Valid From:</b> 05/01/2015	<b>Valid Through:</b> 04/30/2016
J MACK ENTERPRISES INC PO BX 7600 VISALIA, CA 93290		<b>CA#:</b> 0413478	
The carrier named on this permit, having made written application to the Department of Motor Vehicles for a permit to operate as a motor carrier of property as defined in vehicle code section 34601, and having met the requirements and paid the appropriate fees, is granted a permit of the following classification:		 <b>Private Full Year Corporation</b>	
Pmt Date: 04/09/2015	Office #: 154		
Account #: 605613	Tech ID: HN		
Sequence #: 0004	Amt Paid: \$35.00		

**!!!IMPORTANT REMINDERS!!!**

1. Your permit will expire at midnight on the 'Valid Through' date. If you do not receive a renewal notice 30 days prior to the expiration date, please submit an original application and check the "Renewal" box.
2. Your insurance must remain valid through the term of your permit or a suspension action could occur.
3. Changes to your fleet are not required to be reported until your renewal.
4. Changes to your business entity may require a new CA# and application for another Motor Carrier Permit.
5. If you decide to no longer operate as a motor carrier of property, you must submit a 'Voluntary Withdrawal' form.
6. For changes to the address, business name, officers, or authorized representative's name, please complete the 'Notice of Change' form. Changes during your renewal period may be submitted on your renewal application.
7. You may download forms from the Internet at [www.dmv.ca.gov](http://www.dmv.ca.gov) or receive further information by calling: (916) 657-8153.

California Relay Telephone Service for the deaf or hearing impaired from TDD Phones: 1-800-735-2929; from Voice Phones: 1-800-735-2922

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

Solicitation Number 03-A2371

**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): MB SB or None  (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?
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

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

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