

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION  
**BID PROPOSAL**  
ADM-1412 (REV. 06/06)

**ATTACHMENT 1**

CONTRACTOR'S NAME (Please Print):

STEVENS CREEK QUARRY INC.

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (In Figures)	TOTAL (In Figures)
1	200	Truckload	5-Axel End Dump As described in Exhibit A, Scope of Work	\$ 210 <sup>00</sup>	\$ 42,000 <sup>00</sup>
2	200	Truckload	3-Axel Super Dump As described in Exhibit A, Scope of Work	\$ 210 <sup>00</sup>	\$ 42,000 <sup>00</sup>
				TOTAL THIS PROPOSAL	\$ 84,000 <sup>00</sup>

(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.

FACILITY ADDRESS

SUNNYVALE PLANT 501 CARL RD SUNNYVALE 94089 22.9 MILES

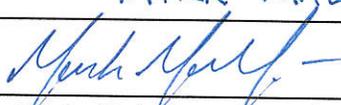
CUPERTINO PLANT 12100 STEVENS CANYON RD CUPERTINO 95014 27.8 MILES

**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 <b>STEVENS CREEK QUARRY INC.</b>	2. Telephone Number <b>(408) 253-2512</b>	2a. Fax Number <b>(408) 253-7621</b>
2b. Email Address <b>M.MALLIN@SCQINC.COM</b>		
3. Address <b>12100 STEVENS CANYON RD, CUPERTINO CA 95014</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>94-1302297</b>	8. California Corporation No.	
Indicate applicable license and/or certification information:		
9. Contractor's State Licensing Board Number <b>155744</b>	10. PUC License Number CAL-T-	
11. Bidder' Name (Print) <b>MARK MALLIN</b>	12. Title <b>SALES MANAGER</b>	
13. Signature 	14. Date <b>1-5-16</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 type="checkbox"/> No <input checked="" type="checkbox"/>		
If yes, enter certification number: _____		
b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
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: _____		