

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

ADM-1412 (REV. 06/06)

ATTACHMENT 1

CONTRACTOR'S NAME <i>(Please Print)</i> :				
<i>Coral Construction Company</i>				
ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	TOTAL (In Figures)
1	1	Job	Alameda County Attenuator removal, disposal, and installation Westbound State Route 580 off-ramp to Coolidge Avenue As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
2	1	Job	Alameda County Attenuator removal, disposal, and installation Westbound State Route 580 off-ramp to Beaumont Avenue/14 th Avenue/Bruce approaching Park Boulevard. As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
3	1	Job	Alameda County Attenuator removal, disposal, and installation Eastbound State Route 580 off-ramp to Grand Avenue/MacArthur Boulevard As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
4	1	Job	Alameda County Attenuator removal, disposal, and installation Eastbound State Route 92 off-ramp to Hesperian Boulevard, Post Mile 5.631 As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
5	1	Job	Alameda County Attenuator removal, disposal, and installation Eastbound State Route 92 off-ramp to southbound State Route 880, Post Mile 6.392 As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
6	1	Job	Alameda County Attenuator removal, disposal, and installation Northbound State Route 238 off-ramp (Flyover) to southbound State Route 880 Post Mile 16.033 As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
7	1	Job	Alameda County Attenuator removal, disposal, and installation Eastbound 580 off-ramp to State Route 680, Post Mile 20.961 - Replace existing Compressor, Type Crash Cushion with SMART Cushion. Save and Store compressor type attenuator in the Livermore Maintenance Yard. As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
TOTAL THIS SHEET				\$ <i>350,000.00</i>

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ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	TOTAL (In Figures)
8	1	Job	Alameda County Attenuator removal, disposal, and installation Northbound 880 at Warren overcrossing on RHS, Post Mile 2.45 As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
9	1	Job	Alameda County Attenuator removal, disposal, and installation Southbound 880 connector to southbound 238 at the overcrossing on RHS Post Mile 16.7 As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
10	1	Job	Alameda County Attenuator removal, disposal, and installation Southbound 880 connector to southbound 238 just prior to overcrossing on LHS (CM define LHS) Post Mile 16.7 As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
11	1	Job	Alameda County Attenuator removal, disposal, and installation Southbound 880 Jackson Street/westbound State Route 92 off-ramp, Post Mile 16.825 As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
12	1	Job	Contra Costa County Attenuator removal, disposal, and installation Northbound State Route 680 Diablo Road off-ramp As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
13	1	Job	Contra Costa County Attenuator removal, disposal, and installation Southbound State Route 680 Diablo Road off-ramp As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
14	1	Job	Contra Costa County Attenuator removal, disposal, and installation Southbound State Route 680 Treat Boulevard off-ramp As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
15	1	Job	Contra Costa County Attenuator removal, disposal, and installation Southbound State Route 680 Crow Canyon Road off-ramp As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
16	1	Job	Contra Costa County Attenuator removal, disposal, and installation Eastbound State Route 580 Canal Street off-ramp As described in the Scope of Work, Exhibit A.	\$ 50,000. ⁰⁰
TOTAL THIS SHEET				\$ 450,000. ⁰⁰

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Coral Construction Company

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	TOTAL (In Figures)
17	1	Job	Contra Costa County Attenuator removal, disposal, and installation Eastbound State Route 24 to northbound and southbound 680 Gore Point As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
18	1	Job	Contra Costa County Attenuator removal, disposal, and installation Eastbound State Route 24 Ygnacio Valley Road off-ramp As described in the Scope of Work, Exhibit A.	\$ <i>50,000.00</i>
19	Materials: Contractor will be reimbursed for the actual cost of parts, materials/supplies purchased to be consumed or installed at the work site in performance of this Agreement (including applicable sales tax), without additional allowance for markup. Original signed receipts for parts, materials/supplies must be submitted to obtain reimbursement. No photocopies of invoices will be accepted.		10% of total bid price (Items 1 – 18)	\$ <i>90,000.00</i>
				TOTAL THIS SHEET \$ <i>190,000.00</i>
				TOTAL THIS PROPOSAL (Pages 1 – 3) \$ <i>990,000.00</i>

- (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 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. 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 <i>Coral Construction Company</i>	2. Telephone Number <i>(503) 682-2252</i>	2a. Fax Number <i>(503) 682-0110</i>
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2b. Email Address *johnweisner@coralconstruction.com*

3. Address
PO BOX 347, Wilsonville, OR 97070

Indicate your organization type:

4. <input type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input checked="" type="checkbox"/> Corporation
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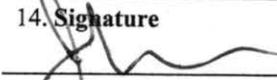
Indicate the applicable employee and/or corporation number:

7. Federal Employee ID No. (FEIN) <i>93-0731516</i>	8. California Corporation No. <i>980060</i>
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Indicate applicable license and/or certification information:

9. Contractor's State Licensing Board Number <i>332441 A</i>	10. PUC License Number CAL-T- <i>N/A</i>	11. Required Class A <i>General Engineering</i>
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12. Bidder' Name (Print) <i>John H. Weisner</i>	13. Title <i>Pres.</i>
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14. Signature 	15. Date <i>6-15-15</i>
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16. 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: _____
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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: _____

17. 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.

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, SB/NVSA, DVBE): _____ 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, DVBE or None)	Work performed or goods provided for this contract	Corresponding % of bid price	Good Standing?	51% Rental?
TITAN DVBE GENE TUCKER 530-246-7836 530-246-7837 fax	PO Box 492336 REDDING, CA 96049 titandvbe@juno.com	1249460	Traffic Control	26%	Yes	No

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

ATTACHMENT 9
Invitation for Bid Number

QUOTES FROM SB OR DVBE SUBCONTRACTORS

Bidder shall attach copies of **SB OR DVBE SUBCONTRACTORS** quotes (on SB or DVBE's letterhead) from any SB or DVBE subcontractors listed in the form GSPD-05-105. Refer to instructions in IFB Section D), Items 1 C and 2 A 2).



P.O. BOX 492336 Redding Ca. 96049

SBE/DVBE REF# 1249460 Lic# 913725 DIR#1000006513

CDOT # 04-A4672

Bid Date 06/16/2015

Bid item # 2 TRAFFIC CONTROL

2 man lane closure: Includes cones, 1 truck, 2 crew, advanced signs, beacons, arrow board. 1 mile 1 way. Additional miles @ \$50.00 (includes cones, signs, barricades etc, fuel)

8hr shift= \$1350.00

10hr shift= \$1730.00

12 hr shift= \$2110.00

Rate does not include TMA

Additional lane/ ramp/ otherway= \$100.00 (includes arrow board, cones, signs, necessary barricades, beacons)

24 hr traffic is subject to additional fuel charge

Type III truck mounted Attenuator (bare rental) \$400.00 day \$1250.00 week \$3000.00 month

Attenuator Truck With Operator (Contractor is Responsible For Fuel)

8 Hr Shift = \$950.00 Overtime Billed at \$ 115.00 per Hr

Additional Flaggers- 8 hr shift \$650.00 over time billed at \$95.00 per man hr

All Night Work is billed an additional \$3.50 per man hr

Signatory to Northern California Laborers

Bid Item # 3 PORTABLE CHANGEABLE MESSAGE BOARDS

\$1200.00 a month, \$550.00 week, \$300.00 a day, \$200 Delivery Charge Per Board.

There will be no retention held on Traffic Control. There MUST be a 2 week notice before start of work. If this project falls in a per diem area, contractor will be charged an additional \$24.00 per day per man. Traffic control bid item based on a minimum of 5 consecutive days. Anything less than 3 days will be charged an additional fee of \$500 per crew. **Items not specifically included are considered to be excluded.** All bid items are subject to a formal contract or PO suitable to both parties prior to any work starting. All bid items are subject to availability at the time of project start date. Titan DVBE Ref#1249460. Please call William Schroyer/ Gene Tucker with questions 530-246-7836.

Eugene Tucker Titan DVBE
Traffic Control Supervisor
Cell # 530-949-4358

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: Titan DVBE Inc DVBE Ref. Number: 1249460
Description (materials/supplies/services/equipment proposed): Traffic Control
Solicitation/Contract Number: 04-A4672 SCPRS Ref. 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)
<u>William Schroyer</u>		<u>6/15/15</u>
(Printed Name of DV Owner/Manager)	(Signature of DV Owner/Manager)	(Date Signed)

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

Firm/Principal Phone: 530-246-7836 Address: Po Box 492336, Redding, CA 96049

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)
<u>William Schroyer</u>		<u>6/15/15</u>
(Address of Owner)	(Telephone)	(Tax Identification Number of Owner)
<u>Po Box 492336, Redding, CA 96049</u>	<u>530-246-7836</u>	<u>90-0157667</u>

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)
_____	_____	_____