STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

ADM-1412 (REV. 11/2015)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print):

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Price Per Unit of Measure)	TOTAL (Estimated Quantity X Unit Price)
1	10,200	Hourly	*All work in accordance with **Exhibit A, Scope of Work.**	$ 80.00	$ 816,000
2	400	Hourly	Overtime in accordance with **Exhibit A, Scope of Work, Section 10, Item A - C**	$ 100.00	$ 40,000
3	NA	Actual Cost	**Maximum expenditures for moving materials in accordance with **Exhibit A, Scope of Work, Section 7**	$5,000.00	$5,000.00
				TOTAL THIS PROPOSAL (ITEM NO. 1-3)	$ 861,000

(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.

(3) **A BID MAY BE REJECTED IF IT IS CONDITIONAL, INCOMPLETE, OR IF IT CONTAINS ANY ALTERATIONS OF FORM OR OTHER IRREGULARITIES OF ANY KIND.**

*Hourly rate is for two (2) workers and one (1) commercial moving vehicle with a lift.

** Contractor will be reimbursed for the actual costs as noted in Item No. 3 (including applicable sales tax) without additional allowance for markup. These costs are to be substantiated by a copy of the appropriately signed invoice verifying the actual costs, as set forth in Exhibit B.

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	2. Telephone Number	2a. Fax Number
GDS Moving & Installation INC.	916)285-5475	916)922-8000

2b. Email Address gabriel@gdsmoving.com / esmeralda@gdsmoving.com

3. Address
4391 Pell Drive suite A Sacramento, CA. 95838

Indicate your organization type:
4. ☐ Sole Proprietorship | 5. ☐ Partnership | 6. ☒ Corporation

Indicate the applicable employee and/or corporation number:
7. Federal Employee ID No. (FEIN) 80-0917464 | 8. California Corporation No. C3639113

Indicate applicable license and/or certification information:
9. Contractor's State Licensing Board Number 994460 | 10. PUC License Number CAL-T- MTR 0191338

11. Bidder' Name (Print) Gabriel Guerero, Jr. | 12. Title CEO

13. **Signature** | 14. Date 5/3/16

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 ☒ No ☐
If yes, enter certification number: 1753882
b. Disabled Veteran Business Enterprise Yes ☐ No ☐
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: _____