

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

BID PROPOSAL

ADM-1412 (REV. 06/06)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print):

Brazos Urethane, Inc.

ITEM NO.	Item	Lump Sum (In Figures)
1	Foam spray insulation services as described in the Standard Agreement 213, Exhibit A Scope of Work.	\$54,476.00
2	Special Conditions: Equipment, materials, to be reimbursed at actual cost (including applicable sales tax) without additional allowance for mark-ups, as pre-approved by the Caltrans Contract Manager, per Exhibit A, Section 7. (Total actual reimbursements may not exceed this fixed amount.)	\$2,000.00 (Fixed amount for bidding purposes only)
IN CASE OF DISCREPANCY BETWEEN THE UNIT PRICE AND THE TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.		\$54,476.00
SUBTOTAL AMOUNT (without line #2) TOTAL (add lines 1-3)		\$56,476.00

ATTACHMENT 4
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 Brazos Urethane, Inc.	2. Telephone Number (559) 275-4040	2a. Fax Number (559) 275-4020
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2b. Email Address c.opel@brazosurethane.com

3. Address
4331 W. Santa Ana Ave., Fresno, CA 93722

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) 74-2466058 8. California Corporation No. FC26252

Indicate applicable license and/or certification information:

9. Contractor's State Licensing Board Number 982578 10. PUC License Number CAL-T-

11. Bidder' Name (Print)
Howard W. Scoggins III

12. Title
President

13. Signature
Howard W. Scoggins III

14. Date
5/27/2016

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: _____
- 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: _____

16. 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.