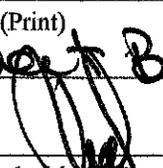


ATTACHMENT 4
 BID/BIDDER CERTIFICATION SHEET

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. 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 BF Contracting Engineering	2. Telephone Number 810 935-9014	2a. Fax Number 844 300-6843
2b. Email Address rbridges22@gmail.com		
3. Address 2202 S. Figueroa St #323 Los Angeles, Ca. 90007		
Indicate your organization type:		
4. <input checked="" type="checkbox"/> Sole Proprietorship	5. <input type="checkbox"/> Partnership	6. <input type="checkbox"/> Corporation
Indicate the applicable employee and/or corporation number:		
7. Federal Employee ID No. (FEIN) 95-3066414	8. California Corporation No.	
Indicate the Department of Industrial Relations information:		
9. Contractor Registration Number 1000040226		
Indicate applicable license and/or certification information:		
10. Contractor's State Licensing Board Number 327049	11. PUC License Number CAL-T-	
12. Bidder Name (Print) Robert Bridges	13. Title owner	
14. Signature 	15. Date 10/31/16	
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 If yes, enter certification number: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	b. Disabled Veteran Business Enterprise If yes, enter your service code below: _____
<p>NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".</p> <p>Date application was submitted to OSDS, if an application is pending: _____</p>		
17. Are you a Non-Small Business committing to the use of 25% Certified Small Business Subcontractor Participation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		

If Yes, complete and return the Bidder Declaration form, GSPD-05-105 with your bid.

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	3,800	Per Hour	One (1) Supervisor and two (2) Laborers, one (1) operated 15-foot Cargo dump bed truck with tarpaulin cover as identified in Exhibit A, Scope of Work	\$ 228.00	\$ 866,400.00
2	40	Per Hour	Additional truck: one (1) operated 15-foot Cargo dump bed truck with tarpaulin cover as identified in Exhibit A, Scope of Work	\$ 80.00	\$ 3,200.00
3	40	Per Hour	Additional Laborer	\$ 76.00	\$ 3,040.00
4	<p>Reimbursement Disposal Fee: Contractor will be reimbursed for the cost of disposal of the debris at actual cost to the Contractor with no additional markup. The original invoice and dump site disposal receipt form the disposal facility shall be submitted to the Caltrans Contract Manager or designee, for reimbursement on a monthly basis.</p>				\$17,900.00 (Add this amount to the total below)
				TOTAL THIS PROPOSAL	\$ 872,640.00

(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.

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: United Synergy Corporation dba USC Supply DVBE Ref. Number: 1568820

Description (materials/supplies/services/equipment proposed): PPE & SAFETY EQUIPMENT

Solicitation/Contract Number: 07A4128 SCPRS Ref. Number: _____

(FOR STATE USE ONLY)

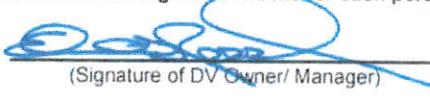
SECTION 2

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):

Edmond Rossovich _____  10/28/2016
(Printed Name of DV Owner/Manager) (Signature of DV Owner/ Manager) (Date Signed)

(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: _____
(if more than one firm, list on extra sheets.) (Print or Type Name)

Firm/Principal Phone: _____ Address: _____

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)

(Address of Owner) (Telephone) (Tax Identification Number of Owner)

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)

ATTACHMENT 2

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): None 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?
United Synergy Corp. dba USC Supply Ed Rossovich 530-273-1639 Fax 951-922-5523	12305 Locksley Ca. Arbourn, Ca. 95602 projects@uscsupply.com 1568820	SA/DVBE	Safety and PPE Equipment.	3%	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rfcal Contracting Robert Bridges 310-935-9017	10880 Wilshire Bl Los Angeles, Ca. 90025 bridges22@comcast.com	1795315	Bookkeeping, office management, insurance	25%	<input checked="" type="checkbox"/>	<input type="checkbox"/>
STERICYCLE Inc. 11855 White Rocked Sacramento Ca 95742 916-351-0980 916-457-7657	11855 White Rocked Ranchero Cordova Ca. Met. Alho Stericycle.com	none	Hazardous Substance Removal. OSHA Compliance Report	8%	<input checked="" 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.



12305 Locksley Lane
Auburn, CA 95602

Toll Free 1.844.823.3823
Office 530.273.1639
Fax 530.273.1740

DIR# 1000029205
www.uscsupply.net
projects@uscsupply.net

Name / Address

BF Contracting Engineering
2202 S. Figueroa St #323
Los Angeles, CA 90007

Ship To

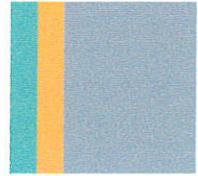
BF Contracting Engineering
2202 S. Figueroa St #323
Los Angeles, CA 90007

Estimate

Date	Terms	Estimate #	Project
10/28/2016		2016-1072	07A4128

ITEM #	DESCRIPTION	QTY	U/M	RATE	TOTAL
	TYVEK COVERALL HOOD & BOOT X-LARGE	150	ea	9.625	1,443.75T
	TYVEK COVERALL HOOD & BOOT LARGE	150	ea	9.625	1,443.75T
	3M FACE SHIELD COVER 6000 SERIES RESPIRATOR (25/pkg)	150	Box	51.43253	7,714.88T
	3M RESPIRATOR CLEANING WIPES (100/box)	25	Box	58.59	1,464.75T
	CROSSFIRE KP6 SAFETY GLASSES CLEAR 3464	150	ea	6.00	900.00T
	CROSSFIRE KP6 SAFETY GLASSES SMOKE 3441	150	ea	6.00	900.00T
	ATG G-TEK MAXIFLEX ULTIMATE NITRILE-COATED GLOVES LG	250	pr	5.504	1,376.00T
	ATG G-TEK MAXIFLEX ULTIMATE NITRILE-COATED GLOVES XL	250	pr	5.504	1,376.00T
	GLOVES LEATHER LG	150	Pkg	9.0768	1,361.52T
	GLOVES LEATHER XL	150	Pkg	9.0768	1,361.52T
	LG LIME ULTRA COOL SAFETY VEST W/ ZIPPER CL2	50	ea	25.584	1,279.20T
	XL LIME ULTRA COOL SAFETY VEST W/ ZIPPER CL2	50	ea	25.584	1,279.20T
	EAR PLUGS CORDED BELL FOAM PLUGS DEVIATOR NRR 33	1,000	pr	0.2304	230.40T
	HARD HAT FULL BRIM RATCHET WHITE	25	ea	28.80	720.00T
	CL32 CLEANUP BAGS / 16 bags/roll, 2rolls/case	100	CASE	16.25	1,625.00T
	INBOUND FREIGHT CHARGES TO BE DETERMINED	1	ea	0.00	0.00
				Subtotal	\$24,475.97
				Sales Tax ...	\$2,202.84
				Total	\$26,678.81

BFCAL Contracting
10880 Wilshire Blvd, Ste 1101
Los Angeles, Ca. 90025
Phone (310) 935-9014



October 31, 2016

BID CONFORMATION

PROJECT: 07A4128, Homeless Rubbish Removal

Bid to furnish all labor for Bookkeeping, Office Management, Insurance, and Payroll.

Total Bid Price ----- \$ 220,000.00

If you have any questions please don't hesitate to contact me on my cell at 310-935-9014 or email
rbridges22@gmail.com

Thank You,

Robert Bridges, Project Manager BFCAL Contracting

