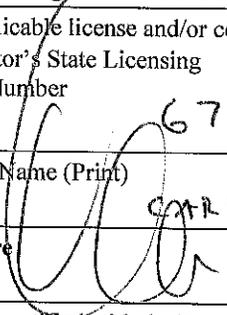


**ATTACHMENT 7
 BID/BIDDER CERTIFICATION SHEET**

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 GRAFFI PROTECTIVE COATINGS, INC.	2. Telephone Number (323) 464-4472	2a. Fax Number (323) 656-3579
2b. Email Address GPCLA@MSN.COM		
3. Address 419 N. LARCHMONT BLVD. #264 LOS ANGELES CA 90004		
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) 95-4348423		8. California Corporation No. 1802084
Indicate the Department of Industrial Relations information:		
9. Contractor Registration Number 1000009570		
Indicate applicable license and/or certification information:		
10. Contractor's State Licensing Board Number 672447		11. PUC License Number CAL-T- N/A
12. Bidder's Name (Print) CARLA LENTHOFF		13. Title PRESIDENT
14. Signature 		15. Date 10/7/16
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 Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		b. Disabled Veteran Business Enterprise Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
If yes, enter certification number: 1081220		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: _____

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.

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION
BID PROPOSAL
 ADM-1412 (REV. 11/2015)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print):

GRAFFITI PROTECTIVE COATINGS, INC.

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (Price Per Unit of Measure)	TOTAL (Estimated Quantity X Unit Price)
1	2,300,000	Square Foot	Graffiti Abatement per Standard Agreement STD 213, Exhibit A, Scope of Work	0.34	782,000
2	20,000	Square Foot	Graffiti Abatement (where full protection is required) per Standard Agreement STD 213, Exhibit A, Scope of Work	0.34	6,800
3	300	Hour	Traffic Control	110.00	33,000
				TOTAL THIS PROPOSAL	821,800.00

- (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.
- (3) ANY ALTERATIONS, MODIFICATIONS, OR CHANGES TO THIS BID PROPOSAL SHEET BY THE PROPOSER MAY BE GROUNDS FOR BID REJECTION.
- (4) EACH LINE MUST BE BID. DO NOT LEAVE ANY UNIT PRICE COLUMN BLANK OR THIS BID WILL BE DISQUALIFIED FROM COMPETITION FOR CONTRACT AWARD.

BIDDER DECLARATION

1. Prime bidder information (Review attached Bidder Declaration Instructions prior to completion of this form):

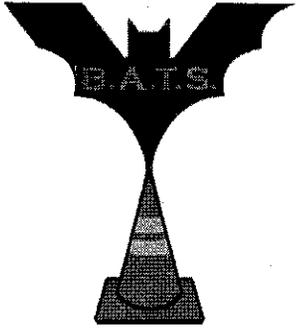
- a. Identify current California certification(s) (MB, SB, NVSA, DVBE): SB or None (If "None," go to Item #2)
- b. Will subcontractors be used for this contract? Yes No (If yes, indicate the distinct element of work your firm will perform in this contract e.g., list the proposed products produced by 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.
GRAFFITI ABATEMENT SERVICES

- 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?
(116) BAY AREA TRAFFIC SOLUTIONS ADAM FREELAND 44-9580 FAX (510) 657-2544	44800 SHOUSFAZAL DR FREMONT, CA 94538 AFREELAND@G0BATS.NET	NONE	TRAFFIC CONTROL AS NEEDED	4%	<input checked="" type="checkbox"/>	<input type="checkbox"/> N/A
BROOKS COMPANY PATRICK McDONOUGH (800) 959-6560 (800) 959-4107 FAX	90 Box 5697 ALBUQU CA 95604 PATRICK@BROOKSCO.COM	DVBE	MATERIALS AND SUPPLIES	4%	<input checked="" type="checkbox"/>	<input type="checkbox"/> N/A
					<input type="checkbox"/>	

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



BAY AREA TRAFFIC SOLUTIONS

44800 Industrial Drive
Fremont, CA 94538

Quote #: 1256.3

Senior Estimator Adam Freeland (916) 544-9580
10/5/2016

MINORITY BUSINESS
MBE # 37233
CA License # 917034

Graffiti Removal Traffic Control Quote
Caltrans District 4, (SF Santa Clara, and San Mateo Counties)
ATTN: Barry at G.P.C. (213) 591 1153

Traffic Control: Flagging \$1,275.00 /4-8HR
Includes 2 men, truck, cones and signs per caltrans standard plan T13 \$875.00 /0-4HR
Does not include rumble strips. Add \$300/shift for rumble strips
Does not include light towers. Add \$170/shift for Light Tower (required for night work)
Includes 8 hours on site time (Monday thru Friday)

Traffic Control: Lane Closure with attenuator \$875.00 /4-8HR
Includes 3 men, 2 trucks, cones, signs and arrow board (1) \$1,275.00 /0-4HR
Includes 8 hours on site time (Monday thru Friday)
Add \$70.00 for each additional arrow board

Additional Traffic Control Tech (does not include additional truck) \$700.00 /0-8HR
Impact attenuator Vehicle with Driver \$875.00 /0-8HR
Pilot Car With Driver \$775.00 /0-8HR

Overtime is \$100.00 per hour per man
Daily minimum per crew charge is \$875.00, after 4 hours, the 8 hour rate will be applied
Time begins When the first cone or sign is set, and ends when the last cone or sign is removed
Cancelations with less than 4 hour notice will be billed at the daily minimum rate
Travel Time and Mobilization is included in the above quoted prices
Multiply above rates by 1.4 for Saturday work
Multiply above rates by 1.7 for Sunday and Union Holiday work

Optional Equipment

P.C.M.S. (Portable Changeable Message Sign)
Day: \$190.00 Week: \$550.00 Month: \$1,100.00 Delivery or Removal: \$100.00

In Line Crash Cushions, TL-2 or TL-3
(call for price and availability)

Name: _____

Date: _____

Title: _____

PO #: _____

Signature: _____

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: BROOKS COMPANY DVBE Ref. Number: 2255
Description (materials/supplies/services/equipment proposed): PAINT AND SUPPLIES
Solicitation/Contract Number: 04A5009 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):

M. Golden [Signature] 10-5-16
(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)