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	2. Telephone Number	2a. Fax Number
Bess Testlab, Inc	(408) 988-0101	(408) 988-0103

2b. Email Address joseph@besstestlab.com

3. Address
2463 Tripaldi Way Hayward, CA 94545

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) 77-0410687 | 8. California Corporation No. C1932310

Indicate the Department of Industrial Relations information:
9. Contractor Registration Number 1000007058

Indicate applicable license and/or certification information:

10. Contractor's State Licensing Board Number	11. PUC License Number CAL-T-
817532	
12. Bidder' Name (Print)	13. Title
Jose Bohorquez	President
14. **Signature**	15. Date
	11/21/2016

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 ☑ No ☐
If yes, enter certification number:
38052

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: _____

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. 03/07)

ATTACHMENT 1

CONTRACTOR'S NAME (Please Print): BESS TESTLAB, INC.

ITEM NO.	ESTIMATED QUANTITY	UNIT OF MEASURE	ITEM	UNIT PRICE (In Figures)	TOTAL (In Figures)
A 1	600	Per Hole	Vacuum extraction (Pothole) first six feet	$625.00	$375,000.00
A 2	300	Each Additional Linear Foot after 6 feet	Vacuum extraction (Pothole) each linear foot after six feet	$45.00	$13,500.00
B	10	Per Hole	Probing the horizontal and vertical location	$21.00	$210.00
C	300	Per Location	Electronic detection and determination of the horizontal and vertical location	$21.00	$6,300.00
D 1	30	Per Day	Lane Closure – Shoulder Closure Only	$325.00	$9,750.00
D 2	30	Per Day	Lane Closure – Conventional Highway/Freeway with Lane Closure	$1,950.00	$58,500.00
D 3	30	Per Day	Lane Closure – Local Street – One Lane	$400.00	$12,000.00
D 4	30	Per Day	Lane Closure – Local Street – Two Lanes	$1,200.00	$36,000.00
D 5	150	Per Flagger/Per Day	Flagging for Lane Closures as Needed	$350.00	$52,500.00
E	Special Provisions as defined in Exhibit A, Paragraph #12, the following will be reimbursed • Encroachment Permits for Cities and Counties • Additional Insurance as Required by the Railroads • Flagger and Permit Requirements for Railroads • Traffic Control – sign board only • Overtime • Police time • Backhoe (prior approval required) • Substitute commercial grade backfill material for backfill or compaction • Restore site, placing asphalt concrete, Portland cement concrete or other material • Commercial grade Portland cement concrete to replace the existing sidewalk, curb or gutter • Place and compact hot asphalt concrete produced from commercial quality asphalt and aggregates equal to or better than the existing pavement as required or with a cold material produced from commercial quality asphalts and aggregates			Actual Costs	$25,000.00
				TOTAL THIS PROPOSAL	$588,760.00

* Contractor will be reimbursed for the actual cost of these specified items in performance of this Agreement (including applicable sales tax), without additional allowance for markup.

(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) ANY BID MAY BE REJECTED IF IT IS UNREASONABLE AS TO PRICE.UNREASONABLENESS OF PRICE INCLUDES NOT ONLY THE TOTAL PRICE OF THE BID, BUT PRICES FOR INDIVIDUAL LINE ITEMS AS WELL.

State of California—Department of General Services, Procurement Division
GSPD-05-105 (REV 08/09)

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):** MB, SB **or None** ☐ (If "None", go to Item #2)

   b. Will subcontractors be used for this contract? **Yes** [X] **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?
Cal-Vet Services Attn: Wayne Weber P: (408) 499-0068 F: (408) 931-6111	679 San Miguel Avenue Santa Clara, CA 95050 wayne@calvetdvbe.com	DVBE	Traffic Control	3%	YES	NO
					☐	☐
					☐	☐

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

CAL★VET
Construction Services
DVBE

CAL-VET SERVICES, INC.
4850 Bannock Cir.
San Jose, Ca. 95130
(408) 499-0068 Office
(408) 931-6111 Fax

Certified DVBE & SBE No. 1791297
DIR # 1000010671
Contractor's License No. 894938
Classifications: C-31
Signatory to the Laborers Union

Contract: 03A2500 — **Working Days: NA**

Description: Underground Locating — **Dist. 3 County**

Bid Date: 11/22/16

Contact: Wayne Weber (408) 477-6850 for information pertaining to this quote

Item #	Item Code	Item Description	Qty.	Bid Price
	120100	**To: Perform traffic control per Hour Mon-Fri (4 hour Min)**	1	**$315.00 per Hour**
	120100			
	128660			

Attn. Brawley

Invitation For Bid
IFB Number 03A2500

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: CALVET

DVBE Reference Number: 1791297

Description (materials/supplies/services/equipment proposed):

Solicitation/Contract Number: 03A2500

SCPRS Reference 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):

Brent Hair — (Printed Name of DV Owner/Manager) — (Signature of DV Owner/Manager) — 11-21-16 (Date Signed)

Wayne Weber — (Printed Name of DV Owner/Manager) — (Signature of DV Owner/Manager) — 11-21-16 (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):

Brent Hair — (Printed Name) — (Signature) — 11-21-16 (Date Signed)

10360 Manfre Lane Morgan Hill — (Address of Owner) — 408 499-0068 (Telephone) — 27-0564908 (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)