

IN BID BOOK

DISTRICT-COUNTY-ROUTE: 04 - SOL - 80,113 ^{S5}

CONTRACT NO.: 04-3E5004

Second Bidder

TOTAL BID: _____

BID OPENING DATE: 1/28/14

BIDDER'S NAME: CARLINO CONSTRUCTION CORP

DVBE PRIME CONTRACTOR CERTIFICATION¹ 45271

| Bid Item Number | Description of Work to Be Subcontracted to DVBE or Materials to Be Supplied by DVBE ² | For Caltrans Only | DVBE (Name, Telephone No., and Certification No.) | \$ Amount |
|------------------------------|--|-------------------|---|-----------|
| <p>DVBE BIDDING AS PRIME</p> | | | | |

Names of first tier DVBE subcontractors and their items of work listed must be consistent with the names and items of work in the Subcontractor List (Pub Cont Code § 4100 et seq.) submitted with the bid. Identify second and lower tier subcontractors on this form.

| | |
|---|---------------------|
| <p>Total Claimed Participation</p> | \$ _____ |
| | <p><u>100</u> %</p> |

- DVBE prime contractors must enter their DVBE reference number or their DBA name as listed with Department of General Services (DVBE prime contractors are credited with 100 percent DVBE participation and need not complete the above table).
- If 100% of an item is not performed or supplied by the DVBEs, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE.

Submit to:

MSC 43
 OFFICE ENGINEER
 DEPARTMENT OF TRANSPORTATION
 1727 30TH STREET
 SACRAMENTO, CA 95816-7005

MC 1/28/14
 Signature of Bidder Date

619-434-9200
 (Area Code) Telephone Number

ALEX CARLINO
 Contact Person (Type or Print)

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CERTIFIED SMALL BUSINESS LISTING FOR THE NON-SMALL BUSINESS PREFERENCE

DES-OE-0102.8 (REV 2/2011)

BIDDER NAME CARLINO CONSTRUCTION CORP.

CONTRACT NO. 04 - 3E5004

List the description of work, name, telephone number, certification number, and dollar amount of each certified small business who will be employed on this project. Failure to provide this information may be cause for denial of the non-small business subcontractor preference. Attach additional sheets if necessary.

Submit to:

MSC 43
OFFICE ENGINEER
DEPARTMENT OF TRANSPORTATION
1727 30TH STREET
SACRAMENTO, CA 95816-7005

| Bid Item Number | Description of Work, Service, or Materials | Certified Small Business (Name, Telephone No., and Certification No.) | \$ Amount |
|-----------------|--|---|-----------|
| | | | |

SBE BIDDING AS PRIME

ALEX CARLINO
Person to Contact (Please Type or Print)

\$ _____

619-434-9200
(Area Code) Telephone Number

Total Claimed Participation

100 % of Contract

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