





STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE - COMMITMENT**  
 DES-OE-0102.10D (REV 12/2014)

CONTRACT NO: 06-0S9304

BID AMOUNT: \$ 79,109.00

BID OPENING DATE: 7/22/15

BIDDER'S NAME: TRAFIC LOOPS CRACKFILLING, INC.

DBE GOAL FROM CONTRACT %:

DBE PRIME CONTRACTOR CERTIFICATION <sup>1</sup> :	TOTAL NUMBER OF ALL SUBCONTRACTS (DBE & NON-DBE)	TOTAL VALUE OF ALL SUBCONTRACTS (DBE & NON-DBE)
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BID ITEM NO.	ITEM OF WORK AND DESCRIPTION OF SERVICES TO BE SUBCONTRACTED OR MATERIALS TO BE PROVIDED <sup>2</sup>	WORK CATEGORY CODES <sup>3</sup>	NAME OF DBEs (Must be certified on the date bids are opened. Include Caltrans' certification no., DBE address, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
7	Partial Furnish Central Control Units		Traffic Loops Crackfilling Inc.	79,109.00

Show all DBE firms being claimed for credit, regardless of tier. Attach written confirmation from each DBE shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

The names of the 1st tier DBE subcontractors and items of work must be consistent with the Subcontractor List (Pub Cont Code § 4100 et seq.).

<sup>1</sup>Each DBE prime contractor must enter its certification number and show all work to be performed by DBEs, including work performed by its own forces.

<sup>2</sup>If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

<sup>3</sup>Use Work Category Codes from the California Unified Certification Program database.

Total Claimed Participation \_\_\_\_\_ %

The bidder acknowledges that it is committed to use the DBEs shown on this form to meet the contract goal (49 CFR 26.53).

  
 Signature of Bidder  
7/23/15 (714) 520-4026  
 Date (Area Code) Tel. No.

MAI-LAN NGUYEN  
 Person to Contact (Please Type or Print)

[Back To Query Form](#)

**Search Returned 1 Records**

Fri Jul 24 13:15:56 PDT 2015

**Query Criteria**

Firm/DBA Name: traffic loops crackfilling

Firm Type: DBE

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<b>Firm ID</b>	38033
<b>Firm/DBA Name</b>	TRAFFIC LOOPS CRACKFILLING, INC
<b>Address Line1</b>	1915 W BALL RD.
<b>Address Line2</b>	
<b>City</b>	ANAHEIM
<b>State</b>	CA
<b>Zip Code1</b>	92804
<b>Zip Code2</b>	
<b>Mailing Address Line1</b>	946 S. EMERALD ST
<b>Mailing Address Line2</b>	
<b>Mailing City</b>	ANAHEIM
<b>Mailing State</b>	CA
<b>Mailing Zip Code1</b>	92804
<b>Mailing Zip Code2</b>	
<b>Certification Type</b>	DBE
<b>EMail</b>	trafficloops@sbcglobal.net
<b>Contact Name</b>	MAI-LAN NGUYEN
<b>Area Code</b>	( 714 )
<b>Phone Number</b>	520-4026
<b>Alt Area Code</b>	( )
<b>Alt Phone Number</b>	
<b>Fax Area Code</b>	( 714 )
<b>Fax Phone Number</b>	520-4027
<b>Agency Name</b>	DEPARTMENT OF TRANSPORTATION
<b>Counties</b>	00;
<b>Districts</b>	00;
<b>DBE NAICS</b>	238210; 238990;

**ACDBE NAICS**

<b>Work Codes</b>	C4040 CLEAN & SEAL PAVEMENT JOINTS - ROUT & SEAL CRACKS; C8501 PAVEMENT MARKING; C8608 DETECTOR; C8611 RAMP METERING SYSTEM; C8903 ELECTRICAL; C9858 RESIDENTIAL ELECTRICAL;
<b>Licenses</b>	C10 Electrical Contractor; C32 Parking and Highway Improvement Contractor;
<b>Trucks</b>	
<b>Gender</b>	F
<b>Ethnicity</b>	ASIAN PACIFIC
<b>Firm Type</b>	DBE

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[Back To Query Form](#)

# Traffic Loops Crackfilling, Inc.

946 S. Emerald Street, Anaheim CA 92804 • Tel: (714) 520 4026 Fax: (714) 520 4027

State License # 652956 • Class C-10 & C-32 • UDBE # 38033

Email: trafficloops@sbcglobal.net

## Quotation

Date: 7/22/2015  
Attn: Raudel Martinez / TDS  
Owner: Caltrans  
Project: Caltrans # 06-0S9304- Counties of Fresno, Kern, Tulare and Madera  
Bid Date 7/22/15 @ 2:00PM

BID ITEM	DESCRIPTION	QTY.	UNIT	UNIT PRICE	ITEM TOTAL
7 Partial	Central Control Units	29	EA	2,727.90	79,109.10
					-
					-

<b>TOTAL BID AMOUNT:</b>	<b>\$</b>	<b>79,109.10</b>
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**\* Quote is good for 180 days from the date of this proposal**

Please call if you have any questions or need more information.

Sincerely,

**Mai-Lan Nguyen**



*TRAFFIC DEVELOPMENT SERVICES, INC*

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE GOOD FAITH EFFORTS DOCUMENTATION**  
DES-OE-0102.11A (REV 12/2014)

Bidder's Name: \_\_\_\_\_  
Contract No.: \_\_\_\_\_

2. List the names of certified DBEs and all the dates on which they were solicited to bid on this project. Include the items of work offered and the dates and methods used for following up initial and follow-up solicitations to determine with certainty whether the DBEs were interested. Attach copies of solicitations. e-mail messages, telephone records, fax confirmations, etc.

Name of DBE Solicited	Date of Initial Solicitation	Items of Work Offered	Follow Up Methods and Dates
<i>DBE Goal met</i>			

3. For each item of work made available, indicate whether the Bidder provided plans and specifications specific to the items of work being offered, list the selected firm and its status as a DBE, the DBEs that provided quotes, the price quote for each firm, and the price difference for each DBE if the selected firm is not a DBE. Provide copies of each DBE and Non-DBE quote submitted to the Bidder whenever a Non-DBE firm was selected over a DBE for work on the Contract.

Items of Work	Provided Plans/ Specifications for Work Offered Yes/No	Name of Selected Firm	DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					
	<input type="checkbox"/> YES <input type="checkbox"/> NO					

If the firm selected for the item is not a DBE, provide the reasons for the selection on a separate sheet and attach names, addresses, and phone numbers for the firms listed above. Provide evidence as to why additional agreements could not be reached for DBEs to perform work.

TRAFFIC DEVELOPMENT SERVICES, INC

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE GOOD FAITH EFFORTS DOCUMENTATION**  
DES-OE-0102.11A (REV 12/2014)

Bidder's Name: \_\_\_\_\_  
Contract No.: \_\_\_\_\_

4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.

Description of Outreach	Dates	Location (if applicable)	Results
DBE PROJ MET			

5. Describe the Bidder's efforts made to provide interested DBEs with adequate information about the plans, specifications, and requirements of the Contract to assist them in responding to a solicitation. Identify the DBEs assisted, the type of information provided, and the date of the contracts. Provide copies of supporting documents.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Describe the Bidder's efforts made to assist interested DBEs in obtaining bonding, lines of credit, or insurance. Identify the DBEs assisted, the type of assistance offered, and the dates. Provide copies of supporting documents.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Describe the Bidder's efforts made to assist interested DBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, excluding supplies and equipment the DBE purchases or leases from the prime contractor or its affiliate. Identify the DBEs assisted, the type of assistance offered, and the dates. Provide copies of supporting documents. List efforts made to assist interested DBEs in obtaining bonding, lines of credit, insurance, necessary equipment, supplies, materials, or related assistance or services, excluding supplies and equipment the DBE subcontractor purchases or leases from the prime contractor or its affiliate. Identify the DBE assisted, the assistance offered, and the date. Provide copies of supporting documents.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. List the names of agencies and the dates on which they were contacted to provide assistance in contacting, recruiting, and using DBE firms. If the agencies were contacted in writing, provide copies of supporting documents.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Include additional data to support a demonstration of good faith efforts.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: USE ADDITIONAL SHEETS OF PAPER IF NECESSARY.

**ADA Notice**

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**DBE - COMMITMENT**

DES-CE-0102.10D (REV 12/2014)

07-21-15 A10:35 IN

CONTRACT NO:

06-059304

BID AMOUNT:

\$

BID OPENING DATE:

7.22.2015

BIDDER'S NAME:

TRAFFIC DEVELOPMENT SERVICES, INC

DBE GOAL FROM CONTRACT %:

4%

DBE PRIME CONTRACTOR CERTIFICATION<sup>1</sup>:

TOTAL NUMBER OF ALL SUBCONTRACTS (DBE & NON-DBE)

TOTAL VALUE OF ALL SUBCONTRACTS (DBE & NON-DBE)

BID ITEM NO.	ITEM OF WORK AND DESCRIPTION OF SERVICES TO BE SUBCONTRACTED OR MATERIALS TO BE PROVIDED <sup>2</sup>	WORK CATEGORY CODES <sup>3</sup>	NAME OF DBEs (Must be certified on the date bids are opened. Include Caltrans' certification no., DBE address, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
	WILL FURNISH WITHIN 4 BUSINESS DAYS			

Show all DBE firms being claimed for credit, regardless of tier. Attach written confirmation from each DBE shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

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Total Claimed Participation

\$

%

The bidder acknowledges that it is committed to use the DBEs shown on this form to meet the contract goal (49 CFR 26.53).

Signature of Bidder

7.21.15

Date

(805) 217-8693

(Area Code) Tel. No.

RAUDEL MARTINEZ

Person to Contact

(Please Type or Print)

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Name of DBE Solicited	Date of Initial Solicitation	Items of Work Offered	Follow Up Methods and Dates
"DBE GOAL MET"			

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	<input type="checkbox"/> YES <input type="checkbox"/> NO					
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07-21-15 A10:35 IN

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Description of Outreach	Dates	Location (if applicable)	Results
	11		
		DBE GOAL MET	

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