

**ADDENDUM NO. 1 – June 17, 2024**

**CTF Phase 3 Expansion, CIP WW 22-38**

This addendum amends the Contract Drawings and Specifications for this project as follows:

1. Insert Attachment A – “Bidder’s Qualification Statements” pages 00300-13 – 00300-61 into, Bid Specifications - Section 00300 Bid Proposal Forms, and submit with bid packet.
2. Insert Attachment B – “Caterpillar Wheel Loader 908 Specifications” into Bid Specifications as Attachment B.

When submitting the bid for the project, the Contractor must acknowledge receipt of the addendum.

Recommended by:  \_\_\_\_\_ Date 6-17-2024  
Ken Reed  
Senior Construction Manager

Approved by:  \_\_\_\_\_ Date 6/17/2024  
Brad Taylor, P.E.  
City Engineer

**A. PRIME CONTRACTOR QUALIFICATION STATEMENT**

**THE INFORMATION SUPPLIED IN THIS DOCUMENT IS CONFIDENTIAL TO THE EXTENT PERMITTED BY LAWS AND REGULATIONS**

The undersigned Bidder represents that it is competent, knowledgeable and has the special skills on the nature, extent and inherent conditions of the work to be performed on this project. Bidder further acknowledges that these inherent conditions existent in the construction of particular facilities may create, during construction, unusual or unsafe conditions hazardous to persons and property. Bidder expressly acknowledges that it is aware of such risks and that it has the skill and experience to foresee and to adopt protective measures to adequately and safely perform the construction work with respect to such hazards.

**1. SUBMITTED BY:**

Official Name of Firm: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**2. SUBMITTED TO: \_\_\_\_\_**

**3. SUBMITTED FOR: \_\_\_\_\_**

Owner: \_\_\_\_\_

Project Name: \_\_\_\_\_

**TYPE OF WORK:** \_\_\_\_\_

\_\_\_\_\_

**4. CONTRACTOR'S CONTACT INFORMATION**

Contact Person: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**5. AFFILIATED COMPANIES:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**6. TYPE OF ORGANIZATION:**

SOLE PROPRIETORSHIP

Name of Owner: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Date of Organization: \_\_\_\_\_

PARTNERSHIP

Date of Organization: \_\_\_\_\_

Type of Partnership: \_\_\_\_\_

Name of General Partner(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CORPORATION

State of Organization: \_\_\_\_\_

Date of Organization: \_\_\_\_\_

Executive Officers:

- President: \_\_\_\_\_

- Vice President(s):

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- Treasurer:

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- - Secretary:

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-  LIMITED LIABILITY COMPANY

- State of Organization:

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Date of Organization:

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Members:

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JOINT VENTURE

State of Organization:

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Date of Organization:

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Form of Organization:

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Joint Venture Managing Partner

- Name:

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- Address:

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Joint Venture Managing Partner

- Name:

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- Address: \_\_\_\_\_  
\_\_\_\_\_

Joint Venture Managing Partner

- Name: \_\_\_\_\_  
- Address: \_\_\_\_\_  
\_\_\_\_\_

**7. LICENSING**

Jurisdiction: \_\_\_\_\_  
Type of License: \_\_\_\_\_  
License Number: \_\_\_\_\_  
Valid CA DIR No.: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_

**8. CERTIFICATIONS CERTIFIED BY:**

Disadvantage Business Enterprise: \_\_\_\_\_  
Minority Business Enterprise: \_\_\_\_\_  
Woman Owned Enterprise: \_\_\_\_\_  
Small Business Enterprise: \_\_\_\_\_  
Other ( \_\_\_\_\_ ): \_\_\_\_\_

**9. BONDING INFORMATION**

Bonding Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Bonding Agent: \_\_\_\_\_  
\_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Aggregate Bonding Capacity: \_\_\_\_\_

Available Bonding Capacity as of date of this submittal: \_\_\_\_\_

**10. FINANCIAL INFORMATION**

Financial Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Account Manager: \_\_\_\_\_

Phone: \_\_\_\_\_

INCLUDE AS AN ATTACHMENT AN AUDITED BALANCE SHEET FOR EACH OF THE  
LAST 3 YEARS

**11. CONSTRUCTION EXPERIENCE:**

Current Experience:

List on **Schedule A** all uncompleted projects currently under contract (If Joint Venture list each participant's projects separately).

Previous Experience:

List on **Schedule B** all projects completed within the last 5 Years (If Joint Venture list each participant's projects separately).

Has firm listed in Section 1 ever failed to complete a construction contract awarded to it?

YES  NO

If YES, attach as an Attachment details including Project Owner's contact information.

Has any Corporate Officer, Partner, Joint Venture participant or Proprietor ever failed to complete a construction contract awarded to them in their name or when acting as a principal of another entity?

YES  NO

If YES, attach as an Attachment details including Project Owner's contact information.

Are there any judgments, claims, disputes or litigation pending or outstanding involving the firm listed in Section 1 or any of its officers (or any of its partners if a partnership or any of the individual entities if a joint venture)?

YES  NO

If YES, attach as an Attachment details including Project Owner's contact information.

## 12. SAFETY PROGRAM:

Name of Contractor's Safety Officer: \_\_\_\_\_

Include the following as attachments:

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) OSHA No. 500- Log & Summary of Occupational Injuries & Illnesses for the past 5 years.

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) list of all OSHA Citations & Notifications of Penalty (monetary or other) received within the last 5 years (indicate disposition as applicable) - IF NONE SO STATE.

Provide as an Attachment Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) list of all safety citations or violations under any state all received within the last 5 years (indicate disposition as applicable) - IF NONE SO STATE.

Provide the following for the firm listed in Section V (and for each proposed Subcontractor furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) the following (attach additional sheets as necessary):

Workers' compensation Experience Modification Rate (EMR) for the last 5 years:

YEAR / EMR \_\_\_\_ / \_\_\_\_

YEAR / EMR \_\_\_\_ / \_\_\_\_

YEAR / EMR \_\_\_\_ / \_\_\_\_

YEAR / EMR \_\_\_\_ / \_\_\_\_

YEAR / EMR \_\_\_\_ / \_\_\_\_

Total Recordable Frequency Rate (TRFR) for the last 5 years:

YEAR / TRFR \_\_\_\_ / \_\_\_\_

YEAR / TRFR \_\_\_\_ / \_\_\_\_

YEAR / TRFR \_\_\_\_ / \_\_\_\_

YEAR / TRFR \_\_\_\_ / \_\_\_\_

YEAR / TRFR \_\_\_\_ / \_\_\_\_

Total number of man-hours worked for the last 5 Years:

YEAR / TOTAL NUMBER OF MAN-HOURS \_\_\_\_ / \_\_\_\_

YEAR / TOTAL NUMBER OF MAN-HOURS \_\_\_\_ / \_\_\_\_

YEAR / TOTAL NUMBER OF MAN-HOURS \_\_\_\_ / \_\_\_\_

YEAR / TOTAL NUMBER OF MAN-HOURS \_\_\_\_ / \_\_\_\_

YEAR / TOTAL NUMBER OF MAN-HOURS \_\_\_\_ / \_\_\_\_

Provide Contractor's (and Contractor's proposed Subcontractors and Suppliers furnishing or performing Work having a value in excess of 10 percent of the total amount of the Bid) Days Away From Work, Days of Restricted Work Activity or Job Transfer (DART) incidence rate for the particular industry or type of Work to be performed by Contractor and each of Contractor's proposed Subcontractors and Suppliers) for the last 5 years:

YEAR / DART \_\_\_\_ / \_\_\_\_

YEAR / DART \_\_\_\_ / \_\_\_\_

YEAR / DART \_\_\_\_ / \_\_\_\_

YEAR / DART \_\_\_\_ / \_\_\_\_

YEAR / DART \_\_\_\_ / \_\_\_\_



### 13. History of the Business and Organizational Performance

Has there been any change in ownership of the firm at any time during the last three years?

**NOTE: A corporation whose shares are publicly traded is not required to answer this question.**

Yes       No

If "yes," explain on a separate signed page.

Is the firm a subsidiary, parent, holding company or affiliate of another construction firm?

**NOTE: Include information about other firms if one firm owns 50 per cent or more of another, or if an owner, partner, or officer of your firm holds a similar position in another firm.**

Yes       No

If "yes," explain on a separate signed page.

Are any corporate officers, partners or owners connected to any other construction firms.

**NOTE: Include information about other firms if an owner, partner, or officer of your firm holds a similar position in another firm.**

Yes       No

If "yes," explain on a separate signed page.

State your firm's gross revenues for each of the last three years:

\_\_\_\_\_

How many years has your organization been in business in California as a contractor under your present business name and license number? \_ years

Is your firm currently the debtor in a bankruptcy case?

Yes       No

If "yes," please attach a copy of the bankruptcy petition, showing the case number, and the date on which the petition was filed.

Was your firm in bankruptcy at any time during the last five years? (This question refers only to a bankruptcy action that was not described in answer to question 7, above)

Yes       No

If "yes," please attach a copy of the bankruptcy petition, showing the case number and the date on which the petition was filed, and a copy of the Bankruptcy Court's discharge order, or of any other document that ended the case, if no discharge order was issued.

## 14. Licenses

List all California construction license numbers, classifications and expiration dates of the California contractor licenses held by your firm:

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If any of your firm's license(s) are held in the name of a corporation or partnership, list below the names of the qualifying individual(s) listed on the CSLB records who meet(s) the experience and examination requirements for each license.

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Has your firm changed names or license number in the past five years?

Yes       No

If "yes," explain on a separate signed page, including the reason for the change.

Has any owner, partner or (for corporations:) officer of your firm operated a construction firm under any other name in the last five years?

Yes       No

If "yes," explain on a separate signed page, including the reason for the change.

Has any CSLB license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years?

Yes       No

If "yes," please explain on a separate signed sheet.

## 15. Disputes

At any time in the last five years has your firm been assessed and paid liquidated damages after completion of a project under a construction contract with either a public or private owner?

Yes       No

If yes, explain on a separate signed page, identifying all such projects by owner, owner's address, the date of completion of the project, amount of liquidated damages assessed and all other information necessary to fully explain the assessment of liquidated damages.

In the last five years has your firm, or any firm with which any of your company's owners, officers or partners was associated, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?

**NOTE: “Associated with” refers to another construction firm in which an owner, partner or officer of your firm held a similar position, and which is listed in response to question 1c or 1d on this form.**

Yes       No

If “yes,” explain on a separate signed page. State whether the firm involved was the firm applying for pre-qualification here or another firm. Identify by name of the company, the name of the person within your firm who was associated with that company, the year of the event, the owner of the project, the project and the basis for the action.

In the last five years has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?

Yes       No

If “yes,” explain on a separate signed page. Identify the year of the event, the owner, the project and the basis for the finding by the public agency.

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**NOTE: The following two questions refer only to disputes between your firm and the owner of a project. You need not include information about disputes between your firm and a supplier, another contractor, or subcontractor. You need not include information about “pass-through” disputes in which the actual dispute is between a sub-contractor and a project owner. Also, you may omit reference to all disputes about amounts of less than \$50,000.**

In the past five years has any claim **against** your firm concerning your firm’s work on a construction project been **filed in court or arbitration?**

Yes       No

If “yes,” on separate signed sheets of paper identify the claim(s) by providing the project name, date of the claim, name of the claimant, a brief description of the nature of the claim, the court in which the case was filed and a brief description of the status of the claim (pending or, if resolved, a brief description of the resolution).

In the past five years has your firm made any claim against a project owner concerning work on a project or payment for a contract and **filed that claim in court or arbitration?**

Yes       No

If “yes,” on separate signed sheets of paper identify the claim by providing the project name, date of the claim, name of the entity (or entities) against whom the claim was filed, a brief description of the nature of the claim, the court in which the case was filed and a brief description of the status of the claim (pending, or if resolved, a brief description of the resolution).

\* \* \* \* \*

At any time during the past five years, has any surety company made any payments on your firm's behalf as a result of a default, to satisfy any claims made against a performance or payment bond issued on your firm's behalf, in connection with a construction project, either public or private?

Yes       No

If "yes," explain on a separate signed page the amount of each such claim, the name and telephone number of the claimant, the date of the claim, the grounds for the claim, the present status of the claim, the date of resolution of such claim if resolved, the method by which such was resolved if resolved, the nature of the resolution and the amount, if any, at which the claim was resolved.

In the last five years has any insurance carrier, for any form of insurance, refused to renew the insurance policy for your firm?

Yes       No

If "yes," explain on a separate signed page. Name the insurance carrier, the form of insurance and the year of the refusal.

#### 16. Criminal Matters and Related Civil Suits

Has your firm or any of its owners, officers or partners ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity?

Yes       No

If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding.

Has your firm or any of its owners, officers or partners ever been convicted of a crime involving any federal, state, or local law related to construction? Yes      No

If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the conviction and the grounds for the conviction.

Has your firm or any of its owners, officers or partners ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?

Yes  No

If "yes," identify on a separate signed page the person or persons convicted, the court (the county if a state court, the district or location of the federal court), the year and the criminal conduct.

**17. Bonding**

Bonding capacity: Provide documentation from your surety identifying the following: Name of bonding company/surety: \_\_\_\_\_

Name of surety agent, address and telephone number:

\_\_\_\_\_

If your firm was required to pay a premium of more than one per cent for a performance and payment bond on any project(s) on which your firm worked at any time during the last three years, state the percentage that your firm was required to pay. You may provide an explanation for a percentage rate higher than one per cent, if you wish to do so.

\_\_\_\_\_

List all other sureties (name and full address) that have written bonds for your firm during the last five years, including the dates during which each wrote the bonds:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

During the last five years, has your firm ever been denied bond coverage by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required?

Yes       No

If yes, provide details on a separate signed sheet indicating the date when your firm was denied coverage and the name of the company or companies which denied coverage; and the period during which you had no surety bond in place.

**18. Compliance with Occupational Safety and Health Laws and with Other Labor Legislation Safety**

Has CAL OSHA cited and assessed penalties against your firm for any "serious," "willful" or "repeat" violations of its safety or health regulations in the past five years?

**NOTE: If you have filed an appeal of a citation, and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.**

Yes       No

If "yes," attached a separate signed page describing the citations, including information about the dates of the citations, the nature of the violation, the project on which the citation(s) was or were issued, the amount of penalty paid, if any. If the citation was appealed to the Occupational Safety and Health Appeals Board and a decision has been issued, state the case number and the date of the decision.

Has the federal Occupational Safety and Health Administration cited and assessed penalties against your firm in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

Yes       No

If "yes," attach a separate signed page describing each citation.

Has the EPA or any Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor, in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

Yes       No

If "yes," attach a separate signed page describing each citation.

How often do you require documented safety meetings to be held for construction employees and field supervisors during the course of a project?

\_\_\_\_\_

List your firm's Experience Modification Rate (EMR) (California workers' compensation insurance) for each of the past three premium years:

**NOTE: An Experience Modification Rate is issued to your firm annually by your workers' compensation insurance carrier.**

Current year: \_\_\_\_\_

Previous year: \_\_\_\_\_

Year prior to previous year: \_\_\_\_\_

If your EMR for any of these three years is or was 1.00 or higher you may, if you wish, attach a letter of explanation.

Within the last five years has there ever been a period when your firm had employees but was without workers' compensation insurance or state-approved self-insurance?

Yes       No

If "yes," please explain the reason for the absence of workers' compensation insurance on a separate signed page. If "No," please provide a statement by your current workers' compensation insurance carrier that verifies periods of workers' compensation insurance coverage for the last five years. (If your firm has been in the construction business for less than five years, provide a statement by your workers' compensation insurance carrier verifying continuous workers' compensation insurance coverage for the period that your firm has been in the construction business.)

### 19. Prevailing Wage and Apprenticeship Compliance Record

Has there been more than one occasion during the last five years in which your firm was required to pay either back wages or penalties for your own firm's failure to comply with the **state's** prevailing wage laws?

NOTE: This question refers only to your own firm's violation of prevailing wage laws, not to violations of the prevailing wage laws by a subcontractor.

Yes       No

If "yes," attach a separate signed page or pages, describing the nature of each violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid and the amount of back wages and penalties that you were required to pay.

During the last five years, has there been more than one occasion in which your own firm has been penalized or required to pay back wages for failure to comply with the **federal** Davis-Bacon prevailing wage requirements?

Yes       No

If "yes," attach a separate signed page or pages describing the nature of the violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid, the amount of back wages you were required to pay along with the amount of any penalty paid.

Provide the **name, address and telephone number** of the apprenticeship program (approved by the California Apprenticeship Council) from whom you intend to request the dispatch of apprentices to your company for use on any public work project for which you are awarded a contract by *[Public Entity]*.

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If your firm operates its own State-approved apprenticeship program:

- (a) Identify the craft or crafts in which your firm provided apprenticeship training in the past year.
- (b) State the year in which each such apprenticeship program was approved, and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s).
- (c) State the number of individuals who were employed by your firm as apprentices at any time during the past three years in each apprenticeship and the number of persons who, during the past three years, completed apprenticeships in each craft while employed by your firm.

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At any time during the last five years, has your firm been found to have violated any provision of California apprenticeship laws or regulations, or the laws pertaining to use of apprentices on public works?

**NOTE: You may omit reference to any incident that occurred prior to January 1, 1998, if the violation was by a subcontractor and your firm, as general contractor on a project, had no knowledge of the subcontractor's violation at the time they occurred.**



If "yes," provide the date(s) of such findings, and attach copies of the Department's final decision(s).

**20. EQUIPMENT:**

**MAJOR EQUIPMENT:**

List on **Schedule C** all pieces of major equipment available for use on Owner's Project.

I HEREBY CERTIFY THAT THE INFORMATION SUBMITTED HEREWITH, INCLUDING ANY ATTACHMENTS, IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NAME OF ORGANIZATION: \_\_\_\_\_

BY: \_\_\_\_\_

TITLE:  
\_\_\_\_\_

DATED:  
\_\_\_\_\_

**NOTARY ATTEST:**

SUBSCRIBED AND SWORN TO BEFORE ME

THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_

NOTARY PUBLIC - STATE OF \_\_\_\_\_

MY COMMISSION EXPIRES: \_\_\_\_\_

**REQUIRED ATTACHMENTS**

- Schedule A (Current Experience).
- Schedule B (Previous Experience).
- Schedule C (Major Equipment).
- Audited balance sheet for each of the last 3 years for firm named in Item 1. (Audited financial reports are preferred. However, reviewed financials prepared in accordance with GAAP and accompanied by a bank reference letter (including, but not limited to, duration of relationship, average annual balances, and verification of available line of credit) are an acceptable alternative to audited financials.

- Evidence of authority for individuals listed in Item 6 to bind organization to an agreement.
- Resumes of officers and key individuals (including Safety Officer) of firm named in Section 1.
- Required safety program submittals listed in Item 12.
- Additional items as pertinent.

SCHEDULE A  
CURRENT EXPERIENCE

Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				

SCHEDULE B

PREVIOUS EXPERIENCE (Include ALL Projects Completed within last 5 years)

Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				

SCHEDULE B

PREVIOUS EXPERIENCE (Include ALL Projects Completed within last 5 years)

Project Name	Owner's Contact Person	Design Engineer	Contract Date	Type of Work	Status	Cost of Work
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				
	Name: Address: Telephone:	Name: Company: Telephone:				

SCHEDULE C - LIST OF MAJOR EQUIPMENT AVAILABLE

ITEM	PURCHASE DATE	CONDITION	ACQUIRED VALUE

## B. CERTIFICATION OF ELECTRICAL SUBCONTRACTOR'S EXPERIENCE AND QUALIFICATIONS

**Important Note:** To be eligible for an award of Contract, the Bidder must submit to Owner within three (3) business days after the receipt of bids this signed Certification from the Electrical Subcontractor listed on Bidder's Designation Of Subcontractors.

The undersigned electrical subcontractor certifies that it is, at the time of bidding, and shall be, throughout the period of the Contract, licensed under the provisions of Chapter 9, Division 3, of the Business and Professions Code of the State of California, to do the type of work contemplated in the Contract Documents. The electrical subcontractor shall further certify that it is skilled and regularly engaged in the general class and type of work called for in the Contract Documents.

The electrical subcontractor represents that it is competent, knowledgeable, and has special skills on the nature, extent, and inherent conditions of the work to be performed. The electrical subcontractor further acknowledges that there are certain peculiar and inherent conditions existent in the construction of the particular facilities which may create, during the construction program, unusual or peculiar unsafe conditions hazardous to persons and property. The electrical subcontractor expressly acknowledges that it is aware of such peculiar risks and that it has the skill and experience to foresee and to adopt protective measures to adequately and safely perform the construction work with respect to such hazards.

### A. ESSENTIAL REQUIREMENTS

**If the answer to any of questions 1 through 3 is "no", or if the answer to any of questions 4 through 7 is "yes", the Bidder will be disqualified from being awarded the Contract.**

1. Bidder possesses a valid and current California Contractor's license for the project for which it intends to submit a bid.  
 Yes                       No
  
2. Bidder will comply with and provide all insurance as defined in Supplemental Conditions, Liability And Insurance.  
 Yes                       No
  
3. Bidder has current Workers' Compensation insurance policy as required by the Labor Code or is legally self-insured pursuant to Labor Code section 3700 et. seq.  
 Yes                       No
  
4. Has your contractor's license been revoked at any time in the last five (5) years?  
 Yes                       No
  
5. Has a surety firm completed a contract on your behalf, or paid for completion because your firm was default terminated by the project owner within the last five (5) years?  
 Yes                       No

6. At the time of submitting this qualification form, is your firm ineligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code section 1777.1 or Labor Code section 1777.7 ?

- Yes                       No

7. At any time during the last five (5) years, has your firm, or any of its owners or officers been convicted of a crime involving the awarding of a contract of a government construction project, or the bidding or performance of a government contract?

- Yes                       No

**B. PROJECT EXPERIENCE**

The electrical subcontractor shall list below at least three (3) wastewater or water projects or other industrial projects with electrical systems of 12 kV or higher and of reasonably similar nature completed in the last seven (7) years of similar size and complexity that demonstrate the electrical subcontractor's experience and qualification to construct this project. **Failure to provide this information within three (3) working days following receipt of bids or failure of the electrical subcontractor to have the required experience may render the Bid non-responsive and may be the basis for rejection of the Bid.**

**Bidders are to complete this Bid Form and not attach their own form.**

1. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Electrical Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days: \_\_\_\_\_

Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

2. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Electrical Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days: \_\_\_\_\_

Owner's Representative: \_\_\_\_\_



Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

3. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Electrical Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days: \_\_\_\_\_

Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

4. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Electrical Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days \_\_\_\_\_

Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

5. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Electrical Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days \_\_\_\_\_

Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

\_\_\_\_\_  
Name of Electrical Subcontractor

**C. History of the Business and Organizational Performance**

1. Has there been any change in ownership of the firm at any time during the last three years?

**NOTE: A corporation whose shares are publicly traded is not required to answer this question.**

Yes  No

If "yes," explain on a separate signed page.

2. Is the firm a subsidiary, parent, holding company or affiliate of another construction firm?

**NOTE: Include information about other firms if one firm owns 50 per cent or more of another, or if an owner, partner, or officer of your firm holds a similar position in another firm.**

Yes  No

If "yes," explain on a separate signed page.

3. Are any corporate officers, partners or owners connected to any other construction firms.

**NOTE: Include information about other firms if an owner, partner, or officer of your firm holds a similar position in another firm.**

Yes  No

If "yes," explain on a separate signed page.

4. State your firm's gross revenues for each of the last three years:

\_\_\_\_\_

5. How many years has your organization been in business in California as a contractor under your present business name and license number? years \_\_\_\_\_

6. Is your firm currently the debtor in a bankruptcy case?

Yes  No

If "yes," please attach a copy of the bankruptcy petition, showing the case number, and the date on which the petition was filed.

7. Was your firm in bankruptcy at any time during the last five years? (This question refers only to a bankruptcy action that was not described in answer to question 6, above)

Yes  No

If "yes," please attach a copy of the bankruptcy petition, showing the case number and the date on which the petition was filed, and a copy of the Bankruptcy Court's discharge order, or of any other document that ended the case, if no discharge order was issued.

**D. Licenses**

1. List all California construction license numbers, classifications and expiration dates of the California contractor licenses held by your firm:

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2. If any of your firm's license(s) are held in the name of a corporation or partnership, list below the names of the qualifying individual(s) listed on the CSLB records who meet(s) the experience and examination requirements for each license.

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3. Has your firm changed names or license number in the past five years?

Yes  No

If "yes," explain on a separate signed page, including the reason for the change.

4. Has any owner, partner or (for corporations:) officer of your firm operated a construction firm under any other name in the last five years?

Yes  No

If "yes," explain on a separate signed page, including the reason for the change.

5. Has any CSLB license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years?

Yes  No

If "yes," please explain on a separate signed sheet.

**E. Disputes**

1. At any time in the last five years has your firm been assessed and paid liquidated damages after completion of a project under a construction contract with either a public or private owner?

Yes  No

If yes, explain on a separate signed page, identifying all such projects by owner, owner's address, the date of completion of the project, amount of liquidated damages assessed and all other information necessary to fully explain the assessment of liquidated damages.

2. In the last five years has your firm, or any firm with which any of your company's owners, officers or partners was associated, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?

**NOTE: "Associated with" refers to another construction firm in which an owner, partner or officer of your firm held a similar position, and which is listed in response to question C2 or C3 on this form.**

Yes  No

If "yes," explain on a separate signed page. State whether the firm involved was the firm applying for pre-qualification here or another firm. Identify by name of the company, the name of the person within your firm who was associated with that company, the year of the event, the owner of the project, the project and the basis for the action.

3. In the last five years has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?

Yes  No

If "yes," explain on a separate signed page. Identify the year of the event, the owner, the project and the basis for the finding by the public agency.

\* \* \* \* \*

**NOTE: The following two questions refer only to disputes between your firm and the owner of a project. You need not include information about disputes between your firm and a supplier, another contractor, or subcontractor. You need not include information about "pass-through" disputes in which the actual dispute is between a sub-contractor and a project owner. Also, you may omit reference to all disputes about amounts of less than \$50,000.**

4. In the past five years has any claim **against** your firm concerning your firm's work on a construction project been **filed in court or arbitration?**

Yes  No

If "yes," on separate signed sheets of paper identify the claim(s) by providing the project name, date of the claim, name of the claimant, a brief description of the nature of the

claim, the court in which the case was filed and a brief description of the status of the claim (pending or, if resolved, a brief description of the resolution).

5. In the past five years has your firm made any claim against a project owner concerning work on a project or payment for a contract and **filed that claim in court or arbitration?**

Yes  No

If "yes," on separate signed sheets of paper identify the claim by providing the project name, date of the claim, name of the entity (or entities) against whom the claim was filed, a brief description of the nature of the claim, the court in which the case was filed and a brief description of the status of the claim (pending, or if resolved, a brief description of the resolution).

\* \* \* \* \*

6. At any time during the past five years, has any surety company made any payments on your firm's behalf as a result of a default, to satisfy any claims made against a performance or payment bond issued on your firm's behalf, in connection with a construction project, either public or private?

Yes  No

If "yes," explain on a separate signed page the amount of each such claim, the name and telephone number of the claimant, the date of the claim, the grounds for the claim, the present status of the claim, the date of resolution of such claim if resolved, the method by which such was resolved if resolved, the nature of the resolution and the amount, if any, at which the claim was resolved.

7. In the last five years has any insurance carrier, for any form of insurance, refused to renew the insurance policy for your firm?

Yes  No

If "yes," explain on a separate signed page. Name the insurance carrier, the form of insurance and the year of the refusal.

**F. Criminal Matters and Related Civil Suits**

1. Has your firm or any of its owners, officers or partners ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity?

Yes  No

If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding.

2. Has your firm or any of its owners, officers or partners ever been convicted of a crime involving any federal, state, or local law related to construction?

Yes  No

If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the conviction and the grounds for the conviction.

3. Has your firm or any of its owners, officers or partners ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?

Yes  No

If "yes," identify on a separate signed page the person or persons convicted, the court (the county if a state court, the district or location of the federal court), the year and the criminal conduct.

**G. Bonding**

1. Bonding capacity: Provide documentation from your surety identifying the following:

Name of bonding company/surety: \_\_\_\_\_

Name of surety agent, address and telephone number:

\_\_\_\_\_

2. If your firm was required to pay a premium of more than one per cent for a performance and payment bond on any project(s) on which your firm worked at any time during the last three years, state the percentage that your firm was required to pay. You may provide an explanation for a percentage rate higher than one per cent, if you wish to do so.

\_\_\_\_\_

3. List all other sureties (name and full address) that have written bonds for your firm during the last five years, including the dates during which each wrote the bonds:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. During the last five years, has your firm ever been denied bond coverage by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required?

Yes  No

If yes, provide details on a separate signed sheet indicating the date when your firm was denied coverage and the name of the company or companies which denied coverage; and the period during which you had no surety bond in place.

**H. Compliance with Occupational Safety and Health Laws and with Other Labor Legislation Safety**

1. Has CAL OSHA cited and assessed penalties against your firm for any "serious," "willful" or "repeat" violations of its safety or health regulations in the past five years?

**NOTE: If you have filed an appeal of a citation, and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.**

Yes  No

If "yes," attached a separate signed page describing the citations, including information about the dates of the citations, the nature of the violation, the project on which the citation(s) was or were issued, the amount of penalty paid, if any. If the citation was appealed to the Occupational Safety and Health Appeals Board and a decision has been issued, state the case number and the date of the decision.

2. Has the federal Occupational Safety and Health Administration cited and assessed penalties against your firm in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

Yes  No

If "yes," attach a separate signed page describing each citation.

3. Has the EPA or any Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor, in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

Yes  No

If "yes," attach a separate signed page describing each citation.

4. How often do you require documented safety meetings to be held for construction employees and field supervisors during the course of a project? \_\_\_\_\_

5. List your firm's Experience Modification Rate (EMR) (California workers' compensation insurance) for each of the past three premium years:

NOTE: An Experience Modification Rate is issued to your firm annually by your workers' compensation insurance carrier.

Current year: \_\_\_\_\_

Previous year: \_\_\_\_\_

Year prior to previous year: \_\_\_\_\_

If your EMR for any of these three years is or was 1.00 or higher you may, if you wish, attach a letter of explanation.

6. Within the last five years has there ever been a period when your firm had employees but was without workers' compensation insurance or state-approved self-insurance?

Yes  No

If "yes," please explain the reason for the absence of workers' compensation insurance on a separate signed page. If "No," please provide a statement by your current workers' compensation insurance carrier that verifies periods of workers' compensation insurance coverage for the last five years. (If your firm has been in the construction business for less than five years, provide a statement by your workers' compensation insurance carrier verifying continuous workers' compensation insurance coverage for the period that your firm has been in the construction business.)

#### **I. Prevailing Wage and Apprenticeship Compliance Record**

1. Has there been more than one occasion during the last five years in which your firm was required to pay either back wages or penalties for your own firm's failure to comply with the **state's** prevailing wage laws?

NOTE: This question refers only to your own firm's violation of prevailing wage laws, not to violations of the prevailing wage laws by a subcontractor.

Yes  No

If "yes," attach a separate signed page or pages, describing the nature of each violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid and the amount of back wages and penalties that you were required to pay.



2. During the last five years, has there been more than one occasion in which your own firm has been penalized or required to pay back wages for failure to comply with the **federal Davis-Bacon** prevailing wage requirements?

Yes  No

If "yes," attach a separate signed page or pages describing the nature of the violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid, the amount of back wages you were required to pay along with the amount of any penalty paid.

3. Provide the **name, address and telephone number** of the apprenticeship program (approved by the California Apprenticeship Council) from whom you intend to request the dispatch of apprentices to your company for use on any public work project for which you are awarded a contract by the City of Lathrop.

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4. If your firm operates its own State-approved apprenticeship program:

(a) Identify the craft or crafts in which your firm provided apprenticeship training in the past year.

(b) State the year in which each such apprenticeship program was approved, and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s).

(c) State the number of individuals who were employed by your firm as apprentices at any time during the past three years in each apprenticeship and the number of persons who, during the past three years, completed apprenticeships in each craft while employed by your firm.

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5. At any time during the last five years, has your firm been found to have violated any provision of California apprenticeship laws or regulations, or the laws pertaining to use of apprentices on public works?

**NOTE: You may omit reference to any incident that occurred prior to January 1, 1998, if the violation was by a subcontractor and your firm, as general contractor on a project, had no knowledge of the subcontractor's violation at the time they occurred.**

Yes  No

If "yes," provide the date(s) of such findings, and attach copies of the Department's final decision(s).

**J. SAFETY QUALIFICATION CRITERIA**

The following information will be used to determine if electrical subcontractor meets the minimum safety requirements for this project. **To qualify to bid and be awarded the project, the electrical subcontractor's three year average Workers' Compensation Experience Modification (EMR) must not be greater than 1.15 (115%).** The electrical subcontractor shall list its Experience Modification Rate for the last three complete years (available from your insurance carrier).

<u>Year</u>	<u>EMR</u>
_____	_____
_____	_____
_____	_____

Three Year Average = \_\_\_\_\_

To verify the above information, the Owner will contact the electrical subcontractor's Workers' Compensation Insurance carrier. The electrical subcontractor shall authorize its carrier to release this information. Failure to release this information will result in the bid being non-responsive and result in automatic disqualification of the bid.

Workers' Compensation Insurance Company: \_\_\_\_\_

Contact Person for Insurance Company: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

The Owner will check project references listed to verify information provided along with skills and capacity represented by Subcontractor. It is very important that the Bidder verify that all contact information is current for each name listed above.

The undersigned hereby states that all above representations are correct and true.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Electrical Subcontractor's Name

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title of Signator

\_\_\_\_\_  
Valid CA Contractors License No.

\_\_\_\_\_  
License Classification

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Valid CA DIR No.

\_\_\_\_\_  
Expiration Date

## C. CERTIFICATION OF CONCRETE SUBCONTRACTOR'S EXPERIENCE AND QUALIFICATIONS

**Important Note:** To be eligible for an award of Contract, the Bidder must submit to Owner within three (3) business days after the receipt of bids this signed Certification from the Concrete Subcontractor listed on Bidder's Designation Of Subcontractors.

The undersigned Concrete subcontractor certifies that it is, at the time of bidding, and shall be, throughout the period of the Contract, licensed under the provisions of Chapter 9, Division 3, of the Business and Professions Code of the State of California, to do the type of work contemplated in the Contract Documents. The Concrete subcontractor shall further certify that it is skilled and regularly engaged in the general class and type of work called for in the Contract Documents.

The Concrete subcontractor represents that it is competent, knowledgeable, and has special skills on the nature, extent, and inherent conditions of the work to be performed. The concrete subcontractor further acknowledges that there are certain peculiar and inherent conditions existent in the construction of the particular facilities which may create, during the construction program, unusual or peculiar unsafe conditions hazardous to persons and property. The concrete subcontractor expressly acknowledges that it is aware of such peculiar risks and that it has the skill and experience to foresee and to adopt protective measures to adequately and safely perform the construction work with respect to such hazards.

### A ESSENTIAL REQUIREMENTS

**If the answer to any of questions 1 through 3 is "no", or if the answer to any of questions 4 through 7 is "yes", the Bidder will be disqualified from being awarded the Contract.**

1. Bidder possesses a valid and current California Contractor's license for the project for which it intends to submit a bid.  
 Yes                       No
  
2. Bidder will comply with and provide all insurance as defined in Supplemental Conditions, Liability And Insurance.  
 Yes                       No
  
3. Bidder has current Workers' Compensation insurance policy as required by the Labor Code or is legally self-insured pursuant to Labor Code section 3700 et. seq.  
 Yes                       No
  
4. Has your contractor's license been revoked at any time in the last five (5) years?  
 Yes                       No
  
5. Has a surety firm completed a contract on your behalf, or paid for completion because your firm was default terminated by the project owner within the last five (5) years?  
 Yes                       No

6. At the time of submitting this qualification form, is your firm ineligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code section 1777.1 or Labor Code section 1777.7 ?

- Yes                       No

7. At any time during the last five (5) years, has your firm, or any of its owners or officers been convicted of a crime involving the awarding of a contract of a government construction project, or the bidding or performance of a government contract?

- Yes                       No

**B PROJECT EXPERIENCE**

The concrete subcontractor shall list below at least three (3) wastewater or water projects or other industrial projects of reasonably similar nature completed in the last seven (7) years of similar size and complexity that demonstrate the concrete subcontractor's experience and qualification to construct this project. **Failure to provide this information within three (3) working days following receipt of bids or failure of the concrete subcontractor to have the required experience may render the Bid non-responsive and may be the basis for rejection of the Bid.**

**Bidders are to complete this Bid Form and not attach their own form.**

1. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Concrete Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days

Days Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: Date \_\_\_\_\_

of Substantial Completion: \_\_\_\_\_

2. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

concrete Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days

Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

3. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

concrete Subcontract Cost: \$ \_\_\_\_\_

Construction Time: \_\_\_\_\_ Calendar Days

Days Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial \_\_\_\_\_

Completion: \_\_\_\_\_

4. Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

concrete Subcontract Cost: \$ \_\_\_\_\_ Calendar Days

Construction Time: \_\_\_\_\_

Days Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial \_\_\_\_\_

Completion: \_\_\_\_\_

5. Project Name: \_\_\_\_\_

Owner:

concrete Subcontract Cost: \$

Construction Time: \_\_\_\_\_ Calendar Days

Days Owner's Representative: \_\_\_\_\_

Owner's Telephone No.: \_\_\_\_\_

Date of Substantial Completion: \_\_\_\_\_

\_\_\_\_\_  
Name of Concrete Subcontractor

**C. History of the Business and Organizational Performance**

1. Has there been any change in ownership of the firm at any time during the last three years?  
**NOTE: A corporation whose shares are publicly traded is not required to answer this question.**

Yes  No

If "yes," explain on a separate signed page.

2. Is the firm a subsidiary, parent, holding company or affiliate of another construction firm?  
**NOTE: Include information about other firms if one firm owns 50 per cent or more of another, or if an owner, partner, or officer of your firm holds a similar position in another firm.**

Yes  No

If "yes," explain on a separate signed page.

3. Are any corporate officers, partners or owners connected to any other construction firms.  
**NOTE: Include information about other firms if an owner, partner, or officer of your firm holds a similar position in another firm.**

Yes  No

If "yes," explain on a separate signed page.

4. State your firm's gross revenues for each of the last three years:

\_\_\_\_\_

6. How many years has your organization been in business in California as a contractor under your present business name and license number? \_\_\_\_\_ years

7. Is your firm currently the debtor in a bankruptcy case?

Yes  No

If "yes," please attach a copy of the bankruptcy petition, showing the case number, and the date on which the petition was filed.

7. Was your firm in bankruptcy at any time during the last five years? (This question refers only to a bankruptcy action that was not described in answer to question 7, above)
- Yes       No

If "yes," please attach a copy of the bankruptcy petition, showing the case number and the date on which the petition was filed, and a copy of the Bankruptcy Court's discharge order, or of any other document that ended the case, if no discharge order was issued.

**D. Licenses**

9. List all California construction license numbers, classifications and expiration dates of the California contractor licenses held by your firm:

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10. If any of your firm's license(s) are held in the name of a corporation or partnership, list below the names of the qualifying individual(s) listed on the CSLB records who meet(s) the experience and examination requirements for each license.

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11. Has your firm changed names or license number in the past five years?

Yes  No

If "yes," explain on a separate signed page, including the reason for the change.

4. Has any owner, partner or (for corporations:) officer of your firm operated a construction firm under any other name in the last five years?

Yes  No

If "yes," explain on a separate signed page, including the reason for the change.

5. Has any CSLB license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years?

Yes  No

If "yes," please explain on a separate signed sheet.



**E. Disputes**

1. At any time in the last five years has your firm been assessed and paid liquidated damages after completion of a project under a construction contract with either a public or private owner?

Yes  No

If yes, explain on a separate signed page, identifying all such projects by owner, owner's address, the date of completion of the project, amount of liquidated damages assessed and all other information necessary to fully explain the assessment of liquidated damages.

2. In the last five years has your firm, or any firm with which any of your company's owners, officers or partners was associated, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?

**NOTE: "Associated with" refers to another construction firm in which an owner, partner or officer of your firm held a similar position, and which is listed in response to question 1c or 1d on this form.**

Yes  No

If "yes," explain on a separate signed page. State whether the firm involved was the firm applying for pre-qualification here or another firm. Identify by name of the company, the name of the person within your firm who was associated with that company, the year of the event, the owner of the project, the project and the basis for the action.

3. In the last five years has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?

Yes  No

If "yes," explain on a separate signed page. Identify the year of the event, the owner, the project and the basis for the finding by the public agency.

\* \* \* \* \*

**NOTE: The following two questions refer only to disputes between your firm and the owner of a project. You need not include information about disputes between your firm and a supplier, another contractor, or subcontractor. You need not include information about "pass-through" disputes in which the actual dispute is between a sub-contractor and a project owner. Also, you may omit reference to all disputes about amounts of less than \$50,000.**

4. In the past five years has any claim **against** your firm concerning your firm's work on a construction project been **filed in court or arbitration?**

Yes  No

If "yes," on separate signed sheets of paper identify the claim(s) by providing the project name, date of the claim, name of the claimant, a brief description of the nature of the

claim, the court in which the case was filed and a brief description of the status of the claim (pending or, if resolved, a brief description of the resolution).

5. In the past five years has your firm made any claim against a project owner concerning work on a project or payment for a contract and **filed that claim in court or arbitration?**  
 Yes  No

If "yes," on separate signed sheets of paper identify the claim by providing the project name, date of the claim, name of the entity (or entities) against whom the claim was filed, a brief description of the nature of the claim, the court in which the case was filed and a brief description of the status of the claim (pending, or if resolved, a brief description of the resolution).

\* \* \* \* \*

6. At any time during the past five years, has any surety company made any payments on your firm's behalf as a result of a default, to satisfy any claims made against a performance or payment bond issued on your firm's behalf, in connection with a construction project, either public or private?  
 Yes  No

If "yes," explain on a separate signed page the amount of each such claim, the name and telephone number of the claimant, the date of the claim, the grounds for the claim, the present status of the claim, the date of resolution of such claim if resolved, the method by which such was resolved if resolved, the nature of the resolution and the amount, if any, at which the claim was resolved.

7. In the last five years has any insurance carrier, for any form of insurance, refused to renew the insurance policy for your firm?  
 Yes  No

If "yes," explain on a separate signed page. Name the insurance carrier, the form of insurance and the year of the refusal.

**F. Criminal Matters and Related Civil Suits**

1. Has your firm or any of its owners, officers or partners ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity?  
 Yes  No

If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding.

2. Has your firm or any of its owners, officers or partners ever been convicted of a crime involving any federal, state, or local law related to construction?

Yes  No

If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the conviction and the grounds for the conviction.

3. Has your firm or any of its owners, officers or partners ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?

Yes  No

If "yes," identify on a separate signed page the person or persons convicted, the court (the county if a state court, the district or location of the federal court), the year and the criminal conduct.

**G. Bonding**

1. Bonding capacity: Provide documentation from your surety identifying the following:

Name of bonding company/surety: \_\_\_\_\_

Name of surety agent, address and telephone number:

\_\_\_\_\_

2. If your firm was required to pay a premium of more than one per cent for a performance and payment bond on any project(s) on which your firm worked at any time during the last three years, state the percentage that your firm was required to pay. You may provide an explanation for a percentage rate higher than one per cent, if you wish to do so.

\_\_\_\_\_

3. List all other sureties (name and full address) that have written bonds for your firm during the last five years, including the dates during which each wrote the bonds:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. During the last five years, has your firm ever been denied bond coverage by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required?

Yes  No

If yes, provide details on a separate signed sheet indicating the date when your firm was denied coverage and the name of the company or companies which denied coverage; and the period during which you had no surety bond in place.

**H. Compliance with Occupational Safety and Health Laws and with Other Labor Legislation Safety**

1. Has CAL OSHA cited and assessed penalties against your firm for any "serious," "willful" or "repeat" violations of its safety or health regulations in the past five years?

**NOTE: If you have filed an appeal of a citation, and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.**

Yes  No

If "yes," attached a separate signed page describing the citations, including information about the dates of the citations, the nature of the violation, the project on which the citation(s) was or were issued, the amount of penalty paid, if any. If the citation was appealed to the Occupational Safety and Health Appeals Board and a decision has been issued, state the case number and the date of the decision.

2. Has the federal Occupational Safety and Health Administration cited and assessed penalties against your firm in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

Yes  No

If "yes," attach a separate signed page describing each citation.

3. Has the EPA or any Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor, in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

Yes  No

If "yes," attach a separate signed page describing each citation.

4. How often do you require documented safety meetings to be held for construction employees and field supervisors during the course of a project?

- 
32. List your firm's Experience Modification Rate (EMR) (California workers' compensation insurance) for each of the past three premium years:  
**NOTE: An Experience Modification Rate is issued to your firm annually by your workers' compensation insurance carrier.**

Current year: \_\_\_\_\_

Previous year: \_\_\_\_\_

Year prior to previous year: \_\_\_\_\_

If your EMR for any of these three years is or was 1.00 or higher you may, if you wish, attach a letter of explanation.

33. Within the last five years has there ever been a period when your firm had employees but was without workers' compensation insurance or state-approved self-insurance?

Yes       No

If "yes," please explain the reason for the absence of workers' compensation insurance on a separate signed page. If "No," please provide a statement by your current workers' compensation insurance carrier that verifies periods of workers' compensation insurance coverage for the last five years. (If your firm has been in the construction business for less than five years, provide a statement by your workers' compensation insurance carrier verifying continuous workers' compensation insurance coverage for the period that your firm has been in the construction business.)

**I. Prevailing Wage and Apprenticeship Compliance Record**

1. Has there been more than one occasion during the last five years in which your firm was required to pay either back wages or penalties for your own firm's failure to comply with the **state's** prevailing wage laws?

NOTE: This question refers only to your own firm's violation of prevailing wage laws, not to violations of the prevailing wage laws by a subcontractor.

Yes  No

If "yes," attach a separate signed page or pages, describing the nature of each violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid and the amount of back wages and penalties that you were required to pay.

2. During the last five years, has there been more than one occasion in which your own firm has been penalized or required to pay back wages for failure to comply with the **federal** Davis-Bacon prevailing wage requirements?

Yes  No

If "yes," attach a separate signed page or pages describing the nature of the violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid, the amount of back wages you were required to pay along with the amount of any penalty paid.

3. Provide the **name, address and telephone number** of the apprenticeship program (approved by the California Apprenticeship Council) from whom you intend to request the dispatch of apprentices to your company for use on any public work project for which you are awarded a contract by the City of Lathrop.

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37. If your firm operates its own State-approved apprenticeship program:

- (a) Identify the craft or crafts in which your firm provided apprenticeship training in the past year.
- (b) State the year in which each such apprenticeship program was approved, and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s).
- (c) State the number of individuals who were employed by your firm as apprentices at any time during the past three years in each apprenticeship and the number of persons who, during the past three years, completed apprenticeships in each craft while employed by your firm.

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5. At any time during the last five years, has your firm been found to have violated any provision of California apprenticeship laws or regulations, or the laws pertaining to use of apprentices on public works?

**NOTE: You may omit reference to any incident that occurred prior to January 1, 1998, if the violation was by a subcontractor and your firm, as general contractor on a project, had no knowledge of the subcontractor's violation at the time they occurred.**

Yes  No

If "yes," provide the date(s) of such findings, and attach copies of the Department's final decision(s).

**J. SAFETY QUALITIFICATION CRITERIA**

The following information will be used to determine if concrete subcontractor meets the minimum safety requirements for this project. **To qualify to bid and be awarded the project, the concrete subcontractor's three year average Workers' Compensation Experience Modification (EMR) must not be greater than 1.15 (115%).** The concrete subcontractor shall list its Experience Modification Rate for the last three complete years (available from your insurance carrier).

<u>Year</u>	<u>EMR</u>
_____	_____
_____	_____
_____	_____

Three Year Average = \_\_\_\_\_

To verify the above information, the Owner will contact the concrete subcontractor's Workers' Compensation Insurance carrier. The concrete subcontractor shall authorize its carrier to release this information. Failure to release this information will result in the bid being non-responsive and result in automatic disqualification of the bid.

Workers' Compensation Insurance Company: \_\_\_\_\_

Contact Person for Insurance Company: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

The Owner will check project references listed to verify information provided along with skills and capacity represented by Subcontractor. It is very important that the Bidder verify that all contact information is current for each name listed above.

The undersigned hereby states that all above representations are correct and true.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Concrete Subcontractor's Name

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Title of Signator

\_\_\_\_\_  
Valid CA Contractors License No.

\_\_\_\_\_  
License Classification

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Valid CA DIR No.

\_\_\_\_\_  
Expiration Date



### D. CERTIFICATION OF PRIME CONTRACTOR'S JOBSITE SUPERINTENDENT'S EXPERIENCE AND QUALIFICATIONS

**Important Note:** To be eligible for award of the Contract for the City of Lathrop (City) Phase 3 CTF Expansion, CIP WW 22-38 (Project), the Bidder must submit to the City within three (3) business days after the receipt of bids this signed Certification of the Prime Contractor's Jobsite Superintendent's Experience and Qualifications.

The Prime Contractor represents that its proposed Jobsite Superintendent is competent, knowledgeable, and has the requisite skills of the nature, extent, and inherent conditions to superintend the work to be performed. Prime Contractor further represents that the Jobsite Superintendent will perform his or her position at the physical project site.

The Prime Contractor further represents that its proposed Jobsite Superintendent will remain in this position throughout the entire duration of construction of the Project. If it becomes necessary for the Prime Contractor to replace the Jobsite Superintendent listed below, the Prime Contractor shall propose in writing to the City's Senior Construction Manager a new Jobsite Superintendent for the City's approval. Under no circumstances will the Prime Contractor be allowed to substitute / replace the Jobsite Superintendent listed below without the City's approval.

Name of Proposed Jobsite Superintendent: \_\_\_\_\_

Certifications Held: \_\_\_\_\_

# of Years employed by any Company as Jobsite Superintendent: \_\_\_\_\_

# of Years employed by Prime Contractor as Jobsite Superintendent: \_\_\_\_\_

Current Project Superintendence: \_\_\_\_\_

List 5 completed projects of a nature similar to the Project / price as jobsite superintendent for Prime Contractor:

_____	/ \$
_____	/ \$
_____	/ \$
_____	/ \$
_____	/ \$

List 5 completed projects of a nature similar to the Project / company / price as jobsite superintendent for previous employers:

_____ / _____ / \$ _____
_____ / _____ / \$ _____
_____ / _____ / \$ _____
_____ / _____ / \$ _____
_____ / _____ / \$ _____

Has the proposed Jobsite Superintendent ever been removed from an assignment? \_\_\_\_\_

***(END OF SECTION)***

# ATTACHMENT B

Quote 157789-01



Jun 04, 2024

**CITY OF LATHROP**  
390 TOWNE CENTRE DR  
LATHROP CA 95330,  
Account # 54170

**Attention: KEN REED**

**New Caterpillar Model: 908 Compact Construction Equipment with all standard equipment in addition to the additional specifications listed below:**

STOCK NUMBER: **R62026**      SERIAL NUMBER: **0MZ801052**      YEAR:      SMU:

**ADDITIONAL SPECIFICATIONS**

Reference #	Description of Material and Equipment	Reference #	Description of Material and Equipment
572-7978	908 14A CWL AM-N/AM-S	572-7989	SEAT, STANDARD, MECH, FABRIC
601-2045	PREPARATION PKG-USA, ANSI	594-7065	SEAT BELT, 3"
573-3913	LIGHTS, ROAD, FN, HAL, RH DIP	587-6908	AIR CON, AUTO TEMP CONTROL
581-4771	FAN, DEMAND, STD, PRECLEANER	600-3116	DOOR STOP, CAB
580-6298	WEATHER, STD, FLUIDS	636-6174	PRODUCT LINK, CELLULAR PL243
607-1279	ENGINE, C2.8, STAGE V	462-2556	TIRES, 400/70 R20, MX, BIBLOAD
569-2570	FILTER, FUEL, MANUAL	579-9894	FENDERS, STANDARD
597-1180	TRANS 25 MPH DIFF LOCK	580-0511	HITCH, REAR RETRIEVAL, STD
598-2562	HYD, 3V, STD FLOW, STD LIFT	577-6969	HYDRAULIC OIL, STANDARD
577-6117	COUPLER, SSL	580-7652	LIGHTS, CAB, STD, 4X HAL
607-6811	AUX, STD FLOW, 3 VALVE	580-0537	ALARM, BACK UP
577-6048	RIDE CONTROL, NONE, STD LIFT	580-0539	HARNESS, WIRING, WT, SSL
573-3916	KICKOUT, RTD, ROTARY SENSOR	623-9432	STANDARD RADIO (12V)
577-7152	CAB, STD, FIXED DOOR GLASS	421-8926	SERIALIZED TECHNICAL MEDIA KIT
580-0524	KEY START, PASSCODE SECURITY	0G-3273	RUST PREVENTATIVE APPLICATOR
577-7161	MIRROR, EXT, STD	583-3909	CARRIAGE, PAL CL3, 51", SSL
602-2788	MIRROR INTERNAL, REAR VIEW	540-1433	FORK, PAL HD C2, 60"X4.8"X1.8" Qty 2
598-4911	STORAGE, BASE TRAY	569-6217	BUCKET-LM, 2.0 YD3, SSL, BOCE
580-0522	KEYPAD 8, RIM PULL/CREEP CTL		

**WARRANTY INFORMATION**

Standard Warranty:	12 months / unlimited hours
Extended Warranty:	908-60 MO/3000 HR POWERTRAIN + HYDRAULICS + TECH
CSA	Dry Parts Kit - 24 MO/1000 HR

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Sell Price	\$153,711.08
Ext Warranty	Included
Net Balance Due	\$153,711.08
Sales Tax (8.75%)	\$13,449.72
CSA	Included
After Tax Balance	\$167,160.80

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**STANDARD EQUIPMENT**

**POWERTRAIN** - - Emissions compliant, two options - - U.S EPA Tier 4 Final and EU Stage V\* - - U.S. EPA Tier 3 and EU Stage IIIA\*\* - - C2.8 DIT engine (Turbocharger) - - Diesel particulate filter (DPF)\* - (Fit for Life) or exhaust muffler\*\* - - Fuel, diesel, ultra low sulphur, - @ < 15 ppm (stage V)\* - - Fuel, diesel, standard sulphur, - @ < 500 ppm (stage IIIA)\*\* - - Hydrostatic transmission, 2 speed, - with inching function, shift on the go - - Powertrain mode, hystat - - Air cleaner, two stage filter, with in - cab audio/visual indicator on display - - Axles, heavy duty, frame mounted - with outboard planetary reduction - - Closed circuit breather - - Coolant, extended life, -36C (-33F) - - Drive shaft, maintenance free, - sealed for life, universal joints - - Engine, auto idle shutdown, - ultra low idle, hibernation mode - - Engine oil, ECO drain tap and hose - - Fuel pump, priming (manual) with - water separator & drain port

**HYDRAULICS** - - Caterpillar HYDO Adv. 10 hydraulic oil - - Coupler/pin on attachment ready - - Demand cooling fan, hyd. driven - - Dead engine lower, lift valve, manual - - EH fully proportional controls - - Implement lockout switch, in cab - - Hystat pump, infinitely variable, - - Implement valve, anti drift - and pressure compensated - - Joystick, single auxiliary roller - - Lift and tilt control - - Loader arm float function - - Motor, single drive with dedicated - implement and steering pumps - - Oil Sampling SOS ports, -

**ELECTRICAL** - - Alternator, 100 amp sealed - - Battery, heavy duty, 12V, 90Ah&950CCA - - Battery disconnect switch - - Cab mounted fuse panel - - Lights, rear stop and turn, LED - - Lights, roading, front halogen - - Service port, electronic diagnostic,ET - - Product link ( PL243 )

**OPERATOR ENVIRONMENT** - - ROPS/FOPS certified canopy/cab - - 12V power outlets, interior/exterior - - Pedals, brake/inching, accelerator - - Lever, parking brake - - Cup holders (2) - - CB radio clip, phone holder - - Door release, internal (left/right) - - Hook, large, coat and hard hat - - Floormat, easy clean, raised pedals - - Mirrors, 2 external, 1 internal - - Steering wheel, spinner knob, horn - - Seat belt, orange, 51mm (2 in) - - Storage, cab (trays x3, seat pocket) - - Steering column, tilt adjusted - - Column mounted multi function - control: lights, roading, wipers, - self cancelling turn signals - - Quick coupler switch, in cab - - Display, analog and digital - - Gauges (2), hyd oil, engine coolant - - Digital with soft touch buttons, - fuel level, speed range, speedometer, - service hour meter, service/ maint info, - hyd/powertrain perf and aggr settings, - security passcode (multiple languages) - - Joystick, seat mounted, multifunction - - Forward/neutral/reverse, aux roller, - speed range, cont flow, diff lock, horn - - Right Arm rest, padded, multi height - - Seat, manual height adjust/suspension, - (cab) fabric, adjustable left arm rest - (canopy) vinyl, no left arm rest - - Cab - - Doors, (2), fixed glass - - Wipers , front/rear, full coverage - - Windshield, front single piece - - Window, rear heated - - Radio ready, speakers and wiring - - Air vents, 4 screen, 7 directional - - Heating, mechanical control unit - - Sun Visor, solid, front full width - - Interior light (incandescent)

**OTHER STANDARD EQUIPMENT** - - Cat optimized Z-bar loader linkage - - Fenders, front and rear - - Ground level daily service points - - Loader arm safety brace - - Lockable engine enclosure/side access - fuel filler cap, nose cone, HVAC filters - - Machine lifting/tie down points - - Paint, E-Coat primer, powder top coat - - Recovery hitch with pin -

**This quote is good for (30) days. Any machine quoted outside of HOLT of CALIFORNIA's inventory is subject to revision All quotes are subject to credit approval and prior sale. Any quoted interest rates are subject to change without notice. Quote is void unless machine is delivered, and remains, within HOLT of CALIFORNIA's Dealership territory for two years or unless the machine has at least 1000 hours if delivered outside of Holt's territory.**

THE ADDITIONAL TERMS AND CONDITIONS ON THE REVERSE SIDE ARE PART OF AND INCORPORATED IN THIS AGREEMENT. THIS AGREEMENT SHALL NOT BE CONSIDERED ENFORCEABLE UNTIL ACCEPTED BY HOLT AND EXECUTED BY ITS OFFICE. ANY INDIVIDUAL SIGNING THIS AGREEMENT REPRESENTS AND WARRANTES THAT HE/SHE IS AT LEAST 18 YEARS OLD AND HAS THE AUTHORITY TO BIND CUSTOMER TO THE TERMS OF THE AGREEMENT.

Accepted by \_\_\_\_\_ Date, \_\_\_\_\_  
(Please Print)

Signature \_\_\_\_\_

Sincerely,  
Jason Hjelmstad  
Territory Manager  
Earth Moving Division  
Holt of California  
jhjelmstad@holtca.com  
Cell 209-321-2831