Low (In Bid Book)

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

CERTIFIED DVBE SUMMARY

DES-OE-0102.5 (REV 3/2008)

Low Bidder

DISTRICT-COUNTY-ROUTE: 08 - SBd - 40-R2.0/R39.0

CONTRACT NO.: 08-0Q7804

TOTAL BID: 1,075,000.00

BID OPENING DATE: 5-2-13

BIDDER'S NAME: WEST COAST STRUCTURES INC. dba WESTERN STRUCTURES

DVBE PRIME CONTRACTOR CERTIFICATION [1] 60085

Bid Item Number	Description of Work to Be Subcontracted to DVBE or Materials to Be Supplied by DVBE [2]	For Caltrans Only	DVBE (Name, Telephone No., and Certification No.)	$ Amount

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

Total Claimed Participation	$ _____ 100 %

1. DVBE prime contractors must enter their DVBE reference number or their DBA name as listed with Department of General Services (DVBE prime contractors are credited with 100 percent DVBE participation and need not complete the above table).

2. If 100% of an item is not performed or supplied by the DVBEs, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE.

Signature of Bidder — Date: 5-1-13

951-352-4300
(Area Code) Telephone Number

BRIAN SKAJEM
Contact Person (Type or Print)

Submit to:

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

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STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

CERTIFIED SMALL BUSINESS LISTING FOR THE NON–SMALL BUSINESS PREFERENCE

DES-OE-0102.8 (REV 2/2011)

BIDDER NAME WEST COAST STRUCTURES, INC. dba WESTERN STRUCTURES **CONTRACT NO.** 08 - 0Q7804

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

Submit to:

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

Bid Item Number	Description of Work, Service, or Materials	Certified Small Business (Name, Telephone No., and Certification No.)	$ Amount
N/A	N/A	N/A	N/A

BRIAN SKAJEM
Person to Contact (Please Type or Print)

951-352-4320
(Area Code) Telephone Number

Total Claimed Participation

$ _____

_____ % of Contract

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