

### CHECKLIST FOR BIDDERS

The following information is required of all Bidders at the time of Bid submission:

- X Completed and Signed Bid Schedule, including cover sheet (page B-1)
- X Completed and Signed Bid Schedule Statement
- X Completed and Signed Contractor's Statement
- X Completed References Form
- X Completed Subcontractor Designation Form
- X Completed, Signed and Notarized Bid Bond or Other Security Form
- X Signed and Notarized Noncollusion Declaration Form
- X Completed and Signed Addenda Acknowledgement Form
- X Evidence satisfactory to the City indicating the capacity of the person(s) signing the Bid to bind the Bidder
- X Department of Industrial Relations (DIR) Contractor Registration Number
- X Bidders' List of Subcontractors – DBE and Non-DBE (Exhibit 12-B Appendix II "Federal Requirements")
- X List of Subcontractors (Exhibit 12-H Appendix II "Federal Requirements")
- X Equal Employment Opportunity Certification (Exhibit 12-H Appendix II "Federal Requirements")
- X Public Contract Code Section 10285.1 Statement / Public Contract Code Section 10162 Questionnaire (Exhibit 12-H Appendix II "Federal Requirements")
- X Public Contract Code Section 10232 Statement (Exhibit 12-H Appendix II "Federal Requirements")
- X Noncollusion Affidavit (Exhibit 12-H Appendix II "Federal Requirements")
- X Debarment and Suspension Certification (Exhibit 12-H Appendix II "Federal Requirements")
- X Nonlobbying Certification for Federal-Aid Contracts (Exhibit 12-H Appendix II "Federal Requirements")
- X Construction Contract DBE Commitment (Exhibit 15-G Appendix II "Federal Requirements")

X

DBE Information – Good Faith Efforts (Exhibit 15-H Appendix II “Federal Requirements”)

X

Subcontracting Request (Exhibit 16-B Appendix II “Federal Requirements”)

Failure of the Bidder to provide all required information in a complete and accurate manner may cause the Bid to be considered non-responsive.

**BID**

**CITY OF MANHATTAN BEACH**

**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

**TO THE HONORABLE MAYOR AND CITY COUNCIL OF THE CITY OF MANHATTAN BEACH:**

The undersigned, as Bidder, declares that: (1) this Bid is made without collusion with any other person and that the only persons or parties interested as principals are those named herein; (2) the undersigned has carefully examined the Contract Documents (including all Addenda) and the Project site; and (3) the undersigned has investigated and is satisfied as to the conditions to be encountered, the character, quality and quantities of Work to be performed, and the materials to be furnished. Furthermore, the undersigned agrees that submission of this Bid shall be conclusive evidence that such examination and investigation have been made and agrees, in the event the Contract be awarded to it, to execute the Contract with the City of Manhattan Beach to perform the Project in accordance with the Contract Documents in the time and manner therein prescribed, and to furnish or provide all materials, labor, tools, equipment, apparatus and other means necessary so to do, except as may otherwise be furnished or provided under the terms of the Contract Documents, for the following stated unit prices or lump-sum price as submitted on the Bid herein.

This Bid is made with the full knowledge of the kind, quantity, and quality of the materials and Work required and, if it is accepted by the City, the Bidder shall enter into a Contract and furnish the bonds, insurance, and other documents as required by the Contract Documents within ten calendar days after award of the Contract. The Bidder agrees that failure to execute and return the Contract or the required faithful performance bond, labor and materials payment bond, warranty bond, and insurance certificates to the City within the ten calendar day period shall be sufficient cause for the rescission of the award and forfeiture of the Bid Security to the City to the extent permitted by law.

Accompanying this Bid is cash, a cashier's check, a certified check or a Bid Bond in an amount equal to at least ten percent of the total aggregate Bid price based on the quantities shown and the unit prices quoted. The undersigned further agrees that, should it be awarded the Contract and thereafter fail or refuse to execute the Contract and provide the required evidence of insurance and Bonds within ten calendar days after delivery of the Contract to the undersigned, then the cash, check or Bid Bond shall be forfeited to the City to the extent permitted by law.



## CITY OF MANHATTAN BEACH

### ADDENDUM NO. 1

#### BID DOCUMENTS

Project No. T-246 Bid No. 1193-19

**Cycle 5 Federal HSIP Grant Traffic Signal Upgrade Project  
Sepulveda Blvd. (SR-1) at 8<sup>th</sup> St.**

**Issued on November 27, 2018**

Please note the following revisions to the Request for Bid document for the Cycle 5 HSIP Grant Traffic Signal Upgrade Project: Sepulveda Blvd. (SR-1) at 8<sup>th</sup> St. (Project No. T-246 and Bid Number 1193-19).  
*A signed copy of this addendum must be attached to the bid.*

#### Revisions to the Bid Documents:

1. **Bid Opening Date and Time on the Notice Inviting Bids:** The second sentence of the first paragraph of the Notice Inviting Bids is hereby revised to the following: "The City will receive such Bids at the City Clerk's office, City Hall, 1400 Highland Avenue, Manhattan Beach, California 90266 up to 11:00 a.m. on Thursday, December 20, 2018, at which time they will be publicly opened and read aloud."
2. **Deadline for Questions on the Notice Inviting Bids:** The sixth paragraph of the Notice Inviting Bids is hereby revised to the following:  
  
"DEADLINE FOR QUESTIONS. Bidder questions must be submitted before or by noon on December 6, 2018."
3. **Bid Schedule for Cycle 5 Federal HSIP Grant Traffic Signal Upgrade Project:** Pages B-2 through B-4 of the Bid Documents, which is the Bid Schedule for Cycle 5 Federal HSIP Grant Traffic Signal Upgrade Project, are hereby replaced with the copy of pages B-2 through B-4 that are attached to this Addendum No. 1.



4. **General Provisions Section 6-7.3.1 Hours of Work:** The first sentence of the first paragraph under Section 6-7.3.1 of the General Provisions is hereby revised to the following: "The Contractor shall not conduct any operations or perform any Work pertaining to the Project as defined herein, between the hours of 3:00 PM and 9:00 AM on any day or on Saturday, Sunday, or holidays at any time except as approved by the Engineer."
5. **Special Provisions, Part I: Special Instructions, Section C. Working Hours:** The first sentence of the first paragraph under Section C of the Special Provisions Part I: Special Instructions is hereby revised to the following: "Work hours shall be 9:00 AM – 3:00 PM, Monday through Friday, with the exception of City holidays."
6. **Special Provisions, Part I: Special Instructions, Section A.1:** The second paragraph under Section A.1 of the Special Provisions Part I: Special Instructions is hereby revised to the following: "The Contractor is responsible for adhering to and completing all Caltrans Permit Conditions, Requirements, and Provisions that are identified as the City's or Permittee's responsibility in the documents provided in Appendix III and will be provided by Caltrans through the issuance of the permits identified in Special Instructions Parts A.2 and A.3."
7. **Special Provisions, Part I: Special Instructions, Section A.4:** The following paragraphs are hereby added as Section A.4 under Section A of the Special Provisions Part I: Special Instructions:

"4. In the event that there is a conflict between the General Provisions and Special Instructions Part A or between the General Provisions and Appendix III, Special Instructions Part A and Appendix III shall supersede.

In the event that there is a conflict between the Technical Provisions and Special Instructions Part A or between the Technical Provisions and Appendix III, Special Instructions Part A and Appendix III shall supersede."

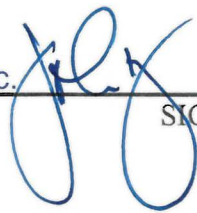
This Addendum is approved by:

  
\_\_\_\_\_  
PREM KUMAR, PE, CITY ENGINEER

11/27/18  
\_\_\_\_\_  
DATE

**A SIGNED COPY OF THIS ADDENDUM MUST BE ATTACHED TO THE BID.**

I hereby acknowledge that the information contained in this addendum has been included in the bid submitted for this project.

Elecnor Belco Electric, Inc.  , John Wong 12/11/18  
COMPANY NAME SIGNATURE DATE



## CITY OF MANHATTAN BEACH

### ADDENDUM NO. 2

#### BID DOCUMENTS

Project No. T-246 Bid No. 1193-19

**Cycle 5 Federal HSIP Grant Traffic Signal Upgrade Project  
Sepulveda Blvd. (SR-1) at 8<sup>th</sup> St.**

**Issued on November 30, 2018**

Please note the following revisions to the Request for Bid document for the Cycle 5 HSIP Grant Traffic Signal Upgrade Project: Sepulveda Blvd. (SR-1) at 8<sup>th</sup> St. (Project No. T-246 and Bid Number 1193-19).  
*A signed copy of this addendum must be attached to the bid.*

#### **Revisions to the Bid Documents:**

1. Table of Contents: The following is hereby added to the Table of Contents after "Appendix III CALTRANS PERMIT CONDITIONS, REQUIREMENTS, AND PROVISIONS":

"APPENDIX IV EXISTING CALTRANS FIBER LINE"

2. **Special Provisions, Part I: Special Instructions, Section C. Working Hours:** The following heading and paragraph is hereby added as Section K of the Special Provisions Part I: Special Instructions:

"K. EXISTING CALTRANS FIBER LINE

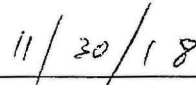
There is an existing Caltrans fiber line that is located on the east side of Sepulveda Blvd. and runs north-south. The location of the fiber line, which is shown in blue on the exhibit included in Appendix IV is approximate and provided for reference. The Contractor is required to protect the fiber line in place at all times."

3. **Appendices:** The following Appendix is hereby added to the Bid Documents of Project No. T-246 Bid No. 1193-19 and are attached to this Addendum No. 2:

- APPENDIX IV EXISTING CALTRANS FIBER LINE

This Addendum is approved by:

  
\_\_\_\_\_  
PREM KUMAR, PE, CITY ENGINEER

  
\_\_\_\_\_  
DATE

**A SIGNED COPY OF THIS ADDENDUM MUST BE ATTACHED TO THE BID.**

I hereby acknowledge that the information contained in this addendum has been included in the bid submitted for this project.

Elecnor Belco Electric, Inc.  , John Wong 12/11/18  
COMPANY NAME SIGNATURE DATE

**CITY OF MANHATTAN BEACH**

**BID SCHEDULE FOR**

**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

Bidder's Name: Elecnor Belco Electric, Inc.

Bidder's Address: 14320 Albers Way, Chino, CA 91710

To the Honorable Mayor and Members of the City Council:

In compliance with the Notice Inviting Bids, the undersigned hereby agrees to execute the Contract to furnish all labor, materials, equipment and supplies for the Project in accordance with the Contract Documents to the satisfaction and under the direction of the City Engineer, at the following prices:

Bid Items as Follows:

**BID AMOUNT:**

| ITEM NO. | CODE | DESCRIPTION                                                                             | UNIT | ESTIMATED QUANTITY | UNIT PRICES  | EXTENDED AMOUNT |
|----------|------|-----------------------------------------------------------------------------------------|------|--------------------|--------------|-----------------|
| 1        |      | Mobilization<br>(5% Maximum of Total Bid Price)                                         | LS   | %                  | \$8,000.00   | \$8,000.00      |
| 2        | S    | Traffic Control<br>(5% Maximum of Total Bid)                                            | LS   | %                  | \$8,000.00   | \$8,000.00      |
| 3        | S    | Stormwater<br>Pollution<br>Prevention Plan                                              | LS   | %                  | \$1,500.00   | \$1,500.00      |
| 4        |      | Construct Curb<br>Ramp over 3"<br>CMB with<br>Detectable<br>Warning Surface             | EA   | 4                  | \$9,000.00   | \$36,000.00     |
| 5        |      | Traffic Signal<br>Modification<br>Complete                                              | LS   | %                  | \$210,000.00 | \$210,000.00    |
| 6        | S    | Construction<br>Survey by<br>Licensed<br>Surveyor for all<br>New Curb Ramp<br>Locations | LS   | %                  | \$4,000.00   | \$4,000.00      |



| ITEM NO.                | CODE | DESCRIPTION                                                                                                            | UNIT | ESTIMATED QUANTITY | UNIT PRICES | EXTENDED AMOUNT |
|-------------------------|------|------------------------------------------------------------------------------------------------------------------------|------|--------------------|-------------|-----------------|
| 7                       | S    | Application and Supporting Documents for and Procurement of Caltrans Permit for Potholing                              | LS   | Complete           | \$2,000.00  | \$2,000.00      |
| 8                       | S    | Fee for Caltrans Permit for Potholing                                                                                  | EA   | 1                  | \$1,476.00  | \$1,476.00      |
| 9                       | S    | Application and Supporting Documents for and Procurement of Caltrans Permit for All Contract Work, excluding Potholing | LS   | Complete           | \$28,000.00 | \$28,000.00     |
| 10                      | S    | Fee for Caltrans Permit for All Contract Work, excluding Potholing                                                     | EA   | 1                  | \$6,724.00  | \$6,724.00      |
| 11                      | S, F | Electronic Changeable Message Board                                                                                    | EA   | 2                  | \$1,500.00  | \$1,500.00      |
| 12                      | S    | Signing and Striping                                                                                                   | LS   | %                  | \$9,300.00  | \$9,300.00      |
| TOTAL BID ITEMS AMOUNT: |      |                                                                                                                        |      |                    |             | \$318,000.00    |

**NOTE:** Estimated quantities are for the purpose of Bid comparison only; payments will be made on the basis of actual measurement of Work completed, except for lump sum (LS) and final pay (F) quantities. (S) denotes a specialty item. (F) and (S) will be specified in the "Code" Column. The Bid Price shall include, but not limited to, sales tax and all other applicable taxes and fees. See also Section 9-2 of the General Provisions.

**NOTE:** Items may be adjusted or deleted. Therefore, regardless of total actual volume (percentage) compared to estimated quantities, the unit prices provided above by the Bidder shall be applied to the final quantity when payment is calculated for these items. No adjustment in the unit prices will be allowed. The City reserves the right to not use any of the estimated quantities; and if this right is exercised, the Contractor will not be entitled to any additional compensation.

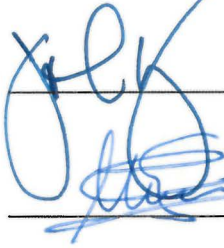
Cost of all export of material shall be included in the above unit costs; no additional compensation will be granted for such expenses.

TOTAL BID PRICE IN DIGITS: \$ 318,000.00

TOTAL BID PRICE IN WORDS: Three hundred eighteen thousand dollars and zero cents

The undersigned certifies to have a minimum of three consecutive years of current experience in the type of Work related to the Project and that this experience is in actual operation of the firm with permanent employees performing a part of the Work as distinct from a firm operating entirely by subcontracting all phases of the Work. The undersigned also certifies to be properly licensed by the State as a contractor to perform this type of Work. The undersigned possesses California Contractor's License

Number 738518, Class A,B,C-10 which expires on July 31, 2019.

Signature:  \_\_\_\_\_, John Wong

Title: Vice President Date: 12/11/18

Signature: \_\_\_\_\_, Alberto Garcia de los Angeles

Title: Exec. Vice President Date: 12/11/18



**BIDDER'S PROPOSAL – CONTRACTOR'S STATEMENT**  
**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

Fill out all of the following information. Attach additional sheets if necessary.

- (1) Bidder's Name: Elecnor Belco Electric, Inc.
- (2) If the Bidder's name is a fictitious name, who or what is the full name of the registered owner? If the Bidder's name is not a fictitious name, write "N/A" in the response to this question. If you are doing business under a fictitious name, provide a copy of the filed valid Fictitious Business Name Statement.  
\_\_\_\_\_
- (3) Business Address: 14320 Albers Way, Chino, CA 91710
- (4) Telephone: 909-993-5470 Email: jwong@elecnor.com
- (5) Type of Firm – Individual, Partnership, LLC or Corporation: Corporation
- (6) Corporation organized under the laws of the State of: California
- (7) California State Contractor's License Number and Class: 738518 A,B,C-10  
Original Date Issued: 4/15/97 Expiration Date: 9/31/19
- (8) DIR Contractor Registration Number: 1000004804
- (9) List the name and title of the person(s) who inspected the Project site for your firm:  
Ralph Antuna - Superintendent
- (10) Number of years experience the company has as a contractor in construction work: 20+
- (11) List the names, titles, addresses and telephone numbers of all individuals, firm members, partners, joint venturers, and company or corporate officers having a principal interest in this Bid:  
John Wong - Vice President 14320 Albers Way, Chino, CA 91710  
909-993-5470  
\_\_\_\_\_  
\_\_\_\_\_
- (12) List all current and prior D.B.A.'s, aliases, and fictitious business names for any principal having interest in this Bid:  
None  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- (13) List the dates of any voluntary or involuntary bankruptcy judgments against any principal having an interest in this Bid:

None

- (14) For all arbitrations, lawsuits, settlements and the like (in or out of court) that the company or any principal having an interest in this Bid has been involved with in the past five years:

- a. List the names, addresses and telephone numbers of contact persons for the parties:

N/A

- b. Briefly summarize the parties' claims and defenses:

N/A

- c. State the tribunal (e.g., Superior Court, American Arbitration Association, etc.), the matter number, and the outcome:

N/A

- (15) Has the company or any principal having an interest in this Bid ever had a contract terminated by the owner or agency? If yes, explain.

No

- (16) Has the company or any principal having an interest in this Bid ever failed to complete a project? If yes, explain.

No

- (17) Has the company or any principal having an interest in this Bid ever been terminated for cause, even if it was converted to a "termination of convenience"? If yes, explain.

No

- (18) For projects that the company or any principal having an interest in this Bid has been involved with in the last five years, did you have any claims or actions:

- a. By you against the owner? Circle one: Yes ☐ No ☒
- b. By the owner against you? Circle one: Yes ☐ No ☒
- c. By any outside agency or individual for labor compliance?  
Circle one: Yes ☐ No ☒
- d. By Subcontractors? Circle one: Yes ☐ No ☒
- e. Are any of these claims or actions unresolved or outstanding?  
Circle one: Yes ☐ No ☒

If your answer is "yes" to any part or parts of this question, explain.

N/A

- (19) Has the company or any of its principals ever been debarred by any agencies? Is yes, please explain.

No

(20) For all public agency projects in excess of \$15,000.00 that you are currently working on or have worked on in the past two years, provide the following information:

**Project 1** Name/Number Traffic Signal on Mojave Dr. at East Trail

Project Description Traffic Signal and Fiber Optics

Approximate Construction Dates From: October 2017 To: January 2018

Agency Name: City of Victorville

Contact Person: Greg Hildreth Telephone: 760-243-6360

Address: 14343 Civic Drive, Victorville, CA 92393

Original Contract Amount: \$ 445,220 Final Contract Amount: \$ 445,220

If final amount is different from original amount, please explain (change orders, extra work, etc.).

No

Did you or any Subcontractor, file any claims against the Agency?

Circle one: Yes ☒ No

Did the Agency file any claims against you? Circle one: Yes ☒ No

If you answered yes to either of the above two questions, please explain and indicate outcome of claims.

N/A

**Project 2** Name/Number Foothill Blvd. from Rosemead Blvd. to Shamrock Ave.

Project Description Traffic Signal Modification

Approximate Construction Date From: December 2016 To: December 2017

Agency Name: County of Los Angeles Department of Public Works

Contact Person: Omid Emam Telephone: 626-607-7444

Address: 900 S. Fremont Ave., Alhambra, CA 91803

Original Contract Amount: \$ 1,123,181 Final Contract Amount: \$ 1,268,430

If final amount is different from original amount, please explain (change orders, extra work, etc.).

Extra work initiated by agency



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Did you or any Subcontractor, file any claims against the Agency?

Circle one: Yes

☒ No

Did the Agency file any claims against you? Circle one: Yes

☒ No

If you answered yes to either of the above two questions, please explain and indicate outcome of claims.

N/A

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**Project 3** Name/Number Traffic Signal Installation - Artesia Blvd. @ East Industry Circle

Project Description Traffic Signal Installation

Approximate Construction Dates

From: May 2017

To: September 2017

Agency Name: City of La Mirada

Contact Person: Eric Villagrancia

Telephone: 562-902-2385

Address: 15515 Phoebe Ave., La Mirada, CA 90638

Original Contract Amount: \$ 287,515

Final Contract Amount: \$ 299,490

If final amount is different from original amount, please explain (change orders, extra work, etc.).

Extra work initiated by the agency

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Did you or any Subcontractor, file any claims against the Agency?

Circle one: Yes

☒ No

Did the Agency file any claims against you? Circle one: Yes

☒ No

If you answered yes to either of the above two questions, please explain and indicate outcome of claims.

N/A

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**Project 4** Name/Number Traffic Signal Infrastructure Upgrade

Project Description Fiber Optic Work

Approximate Construction Dates

From: June 2016

To: September 2016

Agency Name: City of Diamond Bar

Contact Person: Christian Malpica Telephone: 909-839-7040

Address: 21810 Copley Dr., Diamond Bar, CA 91765

Original Contract Amount: \$ 396,957 Final Contract Amount: \$ 434,458

If final amount is different from original amount, please explain (change orders, extra work, etc.).

Extra work initiated by the agency

Did you or any Subcontractor, file any claims against the Agency?

Circle one: Yes ☒ No

Did the Agency file any claims against you? Circle one: Yes ☒ No

If you answered yes to either of the above two questions, please explain and indicate outcome of claims.

N/A

**Project 5** Name/Number Traffic Signal Upgrade at Various Locations

Project Description Traffic Signal Installation

Approximate Construction Dates From: December 2016 To: Present

Agency Name: City of Downey

Contact Person: Desi Gutierrez Telephone: 562-904-7110

Address: 11111 Brookshire Ave., Downey, CA 90241

Original Contract Amount: \$ 1,608,445 Final Contract Amount: \$ 1,790,000

If final amount is different from original amount, please explain (change orders, extra work, etc.).

Extra work initiated by the agency

Did you or any Subcontractor, file any claims against the Agency?

Circle one: Yes ☒ No

Did the Agency file any claims against you? Circle one: Yes ☒ No

If you answered yes to either of the above two questions, please explain and indicate outcome of claims.

N/A

Project 6 Name/Number Ocean View Boulevard Rehabilitation

Project Description Traffic Signal, Fiber Optics, and Interconnect

Approximate Construction Dates From: August 2017 To: March 2018

Agency Name: City of Glendale

Contact Person: Sarkis Oganessian Telephone: 818-548-3945

Address: 633 E. Broadway, Glendale, CA 91206

Original Contract Amount: \$ 600,000 Final Contract Amount: \$ 600,000

If final amount is different from original amount, please explain (change orders, extra work, etc.).

N/A

Did you or any Subcontractor, file any claims against the Agency?

Circle one: Yes

☒ No

Did the Agency file any claims against you? Circle one: Yes

☒ No

If you answered yes to either of the above two questions, please explain and indicate outcome of claims.

N/A

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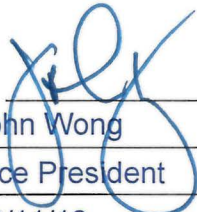
Upon request of the City, the Bidder shall furnish evidence showing a notarized financial statement, financial data, construction experience, or other additional information.

Failure to provide truthful answers to the questions above or in the following References Form may result in the Bid being deemed non-responsive.

Urban Runoff Certification. The Bidder certifies to the City that he/she has trained his/her employees and Subcontractors, if any, for Urban Runoff management and has included sufficient sums in the Bid Price to cover such costs of training as stipulated in the most current Regional Water Quality Control Board requirements, including the Municipal Separate Storm Sewer System NPDES Permit. The Contractor is responsible for all clean up and payment of all fines levied as a result of any illegal discharge (as defined in NPDES permit) occurring as a result of the Contractor's Work and/or operations.

I, the undersigned, certify and declare that I have read all the foregoing answers to the Bidder's Proposal – Contractor's Statement and know their contents. The matters stated in the Bidder's Proposal – Contractor's Statement answers are true of my own knowledge and belief, except as to those matters stated on information and belief, and as to those matters I believe them to be true. I declare under penalty of perjury under the laws of the State of California that the foregoing is correct.

Company

Signature:   
Name: John Wong  
Title: Vice President  
Date: 12/11/18

Signature:   
Name: Alberto Garcia de los Angeles  
Title: Exec. Vice President  
Date: 12/11/18

Bond No. N/A

**BID BOND**

**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

KNOW ALL PERSONS BY THESE PRESENTS that:

WHEREAS the City of Manhattan Beach ("Public Agency"), has issued an invitation for Bids for the Work described as follows: Cycle 5 Federal HSIP Grant Traffic Signal Upgrade Project Sepulveda Blvd (SR-1)  
at 8th St. Project No. T-246

WHEREAS Elecnor Belco Electric, Inc., 14320 Albers Way, Chino, CA 91710  
(Name and address of Bidder)

("Principal"), desires to submit a Bid to Public Agency for the Work.

WHEREAS, Bidders are required to furnish a form of Bidder's security with their Bids.

NOW, THEREFORE, we, the undersigned Principal, and Fidelity and Deposit Company of Maryland  
1299 Zurich Way, 5th Floor, Schaumburg, IL 60196-1056  
(Name and address of Surety)

("Surety"), a duly admitted surety insurer under the laws of the State of California, as Surety, are held and firmly bound unto the Public Agency in the penal sum of Ten Percent of Amount Bid Dollars (\$ 10%), being not less than ten percent of the total Bid price, in lawful money of the United States of America, for the payment of which sum well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS OBLIGATION IS SUCH THAT, if the hereby bounded Principal is awarded the Contract for the Work by the Public Agency and, within the time and in the manner required by the bidding specifications, enters into the written form of Contract included with the bidding specifications, furnishes the required Bonds (one to guarantee faithful performance and the other to guarantee payment for labor and materials), and furnishes the required insurance coverage, then this obligation shall become null and void; otherwise, it shall be and remain in full force and effect.

In case suit is brought upon this instrument, Surety further agrees to pay all court costs incurred by the Public Agency in the suit and reasonable attorneys' fees in an amount fixed by the court. Surety hereby waives the provisions of Civil Code Section 2845.



IN WITNESS WHEREOF, this instrument has been duly executed by Principal and Surety, on the date set forth below, the name of each corporate party being hereto affixed and these presents duly signed by its undersigned representative(s) pursuant to authority of its governing body.

Dated: November 28, 2018

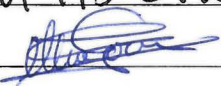
"Principal"

Name: Elecnor Belco Electric, Inc.

Address: 14320 Albers Way

Chino, CA 91710

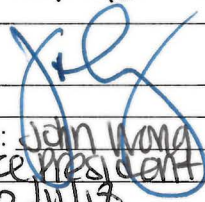
Telephone No.: 909-993-5470

Signature: 

Print Name: Alberto Garcia

Title: Exec. Vice President

Date: 12/11/18

Signature: 

Print Name: John Wong

Title: Vice President

Date: 12/11/18

"Surety"

Company Name: Fidelity and Deposit Company of Maryland

Address: 1299 Zurich Way, 5th Floor

Schaumburg, IL 60196-1056

Telephone No.: (847) 605-6000

Signature: 

Print Name: Donna M. Planeta

Title: Attorney-in-Fact

Date: November 28, 2018

**NOTE:** *This Bond must be dated, all signatures must be notarized, and evidence of the authority of any person signing as attorney-in-fact must be attached.*

# CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT

Civil Code § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy or validity of that document.

State of California  
County of San Bernardino }

On December 17, 2018 before me, Olivia Chea, Notary Public

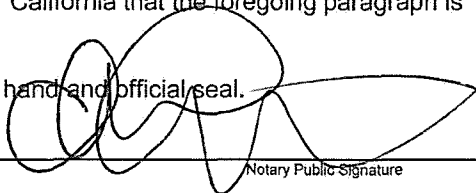
personally appeared John Wong and Alberto Garcia de los Angeles  
Name and or Names of Signer(s)

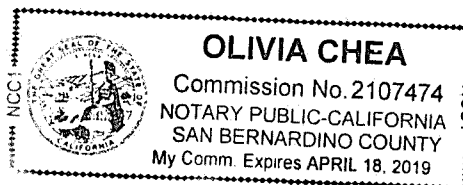
Who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

Witness my hand and official seal.

Signature

  
Notary Public Signature



Place Notary Public Seal Above

OPTIONAL

Though the information below is not required by law, it may prove valuable to the persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

## Description of Attached Document

Title or Type of Document \_\_\_\_\_

Document Date \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- ☐ Individual
- ☐ Corporate Officer – Title(s): \_\_\_\_\_
- ☐ Partner - ☐ Limited ☐ General
- ☐ Guardian or Conservator
- ☐ Attorney-in-Fact
- ☐ Trustee
- ☐ Other: \_\_\_\_\_

Signer is representing \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb

- ☐ Individual
- ☐ Corporate Officer – Title(s): \_\_\_\_\_
- ☐ Partner - ☐ Limited ☐ General
- ☐ Guardian or Conservator
- ☐ Attorney-in-Fact
- ☐ Trustee
- ☐ Other: \_\_\_\_\_

Signer is representing \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
Top of thumb

## ACKNOWLEDGMENT

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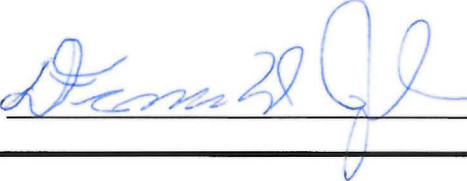
State of ~~California~~ <sup>Connecticut</sup>  
County of Hartford

On November 28, 2018 before me, Danielle D. Johnson, Notary Public  
(insert name and title of the officer)

personally appeared Donna M. Planeta,  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are  
subscribed to the within instrument and acknowledged to me that he/she/they executed the same in  
his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the  
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing  
paragraph is true and correct.

WITNESS my hand and official seal.

Signature  (Seal)

**DANIELLE D. JOHNSON**  
**NOTARY PUBLIC - CT 175556**  
MY COMMISSION EXPIRES JAN. 31, 2023

**ZURICH AMERICAN INSURANCE COMPANY  
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY  
FIDELITY AND DEPOSIT COMPANY OF MARYLAND  
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Maryland, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Maryland (herein collectively called the "Companies"), by **MICHAEL BOND, Vice President**, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint **Donna M. PLANETA, Joshua SANFORD, Aimee R. PERONDINE, Aiza LOPEZ, Danielle D. JOHNSON, Michelle Anne McMAHON, Saykham CHANTHASONE and Noah William PIERCE**, all of Hartford, Connecticut, **EACH** its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: **any and all bonds and undertakings**, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland., and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., in their own proper persons.

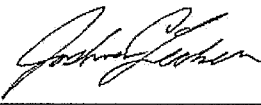
The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said **ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND**, this 9th day of July, A.D. 2018.

**ATTEST:**

**ZURICH AMERICAN INSURANCE COMPANY  
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY  
FIDELITY AND DEPOSIT COMPANY OF MARYLAND**



By:   
\_\_\_\_\_  
Assistant Secretary  
Joshua Lecker

  
\_\_\_\_\_  
Vice President  
Michael Bond

State of Maryland  
County of Baltimore

On this 9th day of July, A.D. 2018, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, **MICHAEL BOND, Vice President, and JOSHUA LECKER, Assistant Secretary**, of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, deposeth and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.





\_\_\_\_\_  
Constance A. Dunn, Notary Public  
My Commission Expires: July 9, 2019



**NONCOLLUSION DECLARATION FORM**  
**TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID**  
**[Public Contract Code Section 7106]**

**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

The undersigned declares:

I am the Vice President of Elecnor Belco Electric, Inc., the party making the foregoing Bid.

The Bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation. The Bid is genuine and not collusive or sham. The Bidder has not directly or indirectly induced or solicited any other Bidder to put in a false or sham Bid. The Bidder has not directly or indirectly colluded, conspired, connived, or agreed with any Bidder or anyone else to put in a sham Bid, or to refrain from bidding. The Bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the Bid price of the Bidder or any other Bidder, or to fix any overhead, profit, or cost element of the Bid price, or of that of any other Bidder. All statements contained in the Bid are true. The Bidder has not, directly or indirectly, submitted his or her Bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, to any corporation, partnership, company, association, organization, Bid depository, or to any member or agent thereof, to effectuate a collusive or sham Bid, and has not paid, and will not pay, any Person or entity for such purpose.

Any person executing this declaration on behalf of a Bidder that is a corporation, partnership, joint venture, limited liability company, limited liability partnership, or any other entity, hereby represents that he or she has full power to execute, and does execute, this declaration on behalf of the Bidder.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on December 11, 2018 [date], at Chino [city], California [state].

Signature: \_\_\_\_\_

Printed Name: John Wong/Vice President

Date: 12/11/18

Signature: \_\_\_\_\_

Printed Name: Alberto Garcia de los Angeles/Exec. Vice President

Date: 12/11/18

**This form must be notarized.**



# CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }

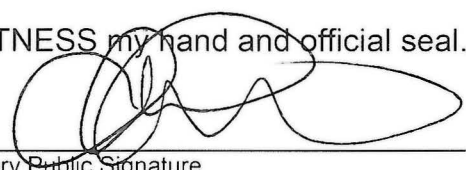
County of San Bernardino }

On December 11, 2018 before me, Olivia Chea, Notary Public,  
(Here insert name and title of the officer)

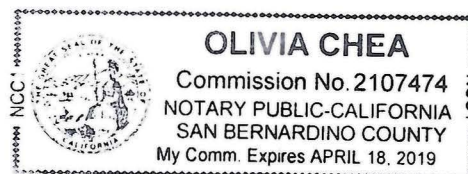
personally appeared John Wong and Alberto Garcia de los Angeles  
who proved to me on the basis of satisfactory evidence to be the person(s) whose  
name(s) ~~is~~ are subscribed to the within instrument and acknowledged to me that  
~~he/she~~ they executed the same in ~~his/her~~ their authorized capacity(ies), and that by  
his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of  
which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that  
the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

  
Notary Public Signature

(Notary Public Seal)



## ADDITIONAL OPTIONAL INFORMATION

### DESCRIPTION OF THE ATTACHED DOCUMENT

(Title or description of attached document)

(Title or description of attached document continued)

Number of Pages \_\_\_\_\_ Document Date \_\_\_\_\_

### CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)  
☐ Corporate Officer

\_\_\_\_\_  
(Title)

- ☐ Partner(s)  
☐ Attorney-in-Fact  
☐ Trustee(s)  
☐ Other \_\_\_\_\_

## INSTRUCTIONS FOR COMPLETING THIS FORM

*This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.*

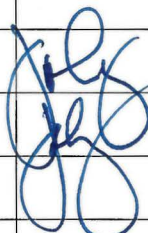
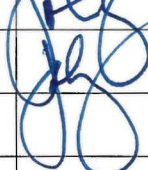
- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he/she/they~~ is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
  - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
  - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.

**ADDENDA ACKNOWLEDGMENT FORM**

**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

Bidder's Name: Elecnor Belco Electric, Inc.

The Bidder shall signify receipt of all Addenda here, if any:

| Addendum Number | Date Received | Signature                                                                                      |
|-----------------|---------------|------------------------------------------------------------------------------------------------|
| 1               | 11/27/18      |  , John Wong |
| 2               | 11/30/18      |  , John Wong |
|                 |               |                                                                                                |
|                 |               |                                                                                                |
|                 |               |                                                                                                |
|                 |               |                                                                                                |
|                 |               |                                                                                                |
|                 |               |                                                                                                |

If there are more Addenda than there is room in the chart above, attach another page acknowledging receipt of the Addenda.

## Department of Industrial Relations (DIR) Contractor Registration Number

Beginning July 1, 2014, contractors must register with the Department of Industrial Relations (DIR) before bidding on public works contracts in California. For more information, please refer to this section of the Department of Industrial Relations Website: <http://www.dir.ca.gov/Public-Works/PublicWorks.html>.

**Per this requirement, provide the following information:**

Contractor Name: Elecnor Belco Electric, Inc.

**Contractor Department of Industrial Relations Registration Number:**

1000004804

**Expiration Date of Registration Number:** June 30, 2019

(THIS FORM MUST BE SUBMITTED WITH THE SEALED BID)



## Bidder's List of Subcontractors (DBE and NON-DBE)

## Exhibit 12-B Bidder's List of subcontractor (DBE and Non-DBE)

## Part 1

As of March 1, 2015 Contractors (and sub-contractors) wishing to bid on public works contracts shall be registered with the State Division of Industrial Relations and certified to bid on Public Works contracts. Please register at: <https://efiling.dir.ca.gov/PWCR/ActionServlet?action=displayPWCRRegistrationForm>

In accordance with Title 49, Section 26.11 of the Code of Federal Regulations, and Section 4104 of the Public Contract Code of the State of California, as amended, the following information is required for each sub-contractor who will perform work amounting to more than one half of one percent (0.5%) of the Total Base Bid or \$10,000 (whichever is greater). **Photocopy this form for additional firms.**

| Subcontractor Name and Location       | Line Item & Description | Subcontract Amount | Percentage of Bid Item Sub-contracted | Contractor License Number<br>DIR Reg Number | DBE (Y/N) | DBE Cert Number | Annual Gross Receipts                             |
|---------------------------------------|-------------------------|--------------------|---------------------------------------|---------------------------------------------|-----------|-----------------|---------------------------------------------------|
| Name: <i>Smithson Elec</i>            | <i>5<br/>loops</i>      | <i>\$4,800.00</i>  | <i>2.2%</i>                           | <i>614518</i>                               | <i>N</i>  |                 | <input type="checkbox"/> <\$1 million             |
| City, State: <i>Orange CA</i>         |                         |                    |                                       | <i>1006001610</i>                           |           |                 | <input type="checkbox"/> <\$5 million             |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$10 million            |
|                                       |                         |                    |                                       |                                             |           |                 | <input checked="" type="checkbox"/> <\$15 million |
|                                       |                         |                    |                                       |                                             |           |                 | Age of Firm: ___ yrs.                             |
| Name: <i>CTI</i>                      | <i>12<br/>striping</i>  | <i>\$8,150.00</i>  | <i>87.6%</i>                          | <i>991122</i>                               | <i>N</i>  |                 | <input type="checkbox"/> <\$1 million             |
| City, State: <i>Riverside CA</i>      |                         |                    |                                       | <i>1000011750</i>                           |           |                 | <input type="checkbox"/> <\$5 million             |
|                                       |                         |                    |                                       |                                             |           |                 | <input checked="" type="checkbox"/> <\$10 million |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$15 million            |
|                                       |                         |                    |                                       |                                             |           |                 | Age of Firm: ___ yrs.                             |
| Name: <i>Kilamick</i>                 | <i>4<br/>civil</i>      | <i>\$1600</i>      | <i>9.9%</i>                           | <i>267073</i>                               | <i>N</i>  |                 | <input type="checkbox"/> <\$1 million             |
| City, State: <i>Asphalt Corona CA</i> |                         |                    |                                       | <i>1000001051</i>                           |           |                 | <input type="checkbox"/> <\$5 million             |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$10 million            |
|                                       |                         |                    |                                       |                                             |           |                 | <input checked="" type="checkbox"/> <\$15 million |
|                                       |                         |                    |                                       |                                             |           |                 | Age of Firm: ___ yrs.                             |
| Name:                                 |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$1 million             |
| City, State:                          |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$5 million             |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$10 million            |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$15 million            |
|                                       |                         |                    |                                       |                                             |           |                 | Age of Firm: ___ yrs.                             |
| Name:                                 |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$1 million             |
| City, State:                          |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$5 million             |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$10 million            |
|                                       |                         |                    |                                       |                                             |           |                 | <input type="checkbox"/> <\$15 million            |
|                                       |                         |                    |                                       |                                             |           |                 | Age of Firm: ___ yrs.                             |

Distribution: 1) Original-Local Agency File 2) Copy-DLAE w/ Award Package

**Bidder's List of Subcontractors (DBE and NON-DBE)****Exhibit 12-B Bidder's List of subcontractor (DBE and Non-DBE)****Part 2**

In accordance with Title 49, Section 26 of the Code of Federal Regulations, the Bidder shall list all subcontractor who provide a quote or bid but were not selected to participate as a subcontractor on this project. Photocopy this form for additional firms.

| Subcontractor Name and Location | Line Item & Description | Subcontract Amount | Percentage of Bid Item Sub-contracted | Contractor License Number | DBE (Y/N) | DBE Cert Number | Annual Gross Receipts                  |
|---------------------------------|-------------------------|--------------------|---------------------------------------|---------------------------|-----------|-----------------|----------------------------------------|
|                                 |                         |                    |                                       | DIR Reg Number            |           |                 |                                        |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |
| Name:                           |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$1 million  |
| City, State:                    |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$5 million  |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$10 million |
|                                 |                         |                    |                                       |                           |           |                 | <input type="checkbox"/> <\$15 million |
|                                 |                         |                    |                                       |                           |           |                 | Age of Firm: ____ yrs.                 |

Distribution: 1) Original-Local Agency File 2) Copy-DLAE w/ Award Package



**DESIGNATION OF SUBCONTRACTORS**  
**[Public Contract Code Section 4104]**

**CYCLE 5 FEDERAL HSIP GRANT TRAFFIC SIGNAL UPGRADE PROJECT**

List all Subcontractors who will perform Work or labor or render service to the Contractor in or about the construction of the Work or improvement, or a Subcontractor licensed by the State of California who, under subcontract to the Contractor, specially fabricates and installs a portion of the Work or improvement according to detailed drawings contained in the Plans and Specifications, in an amount in excess of one-half percent of the Contractor's total Bid or, in the case of bids or offers for the construction of streets or highways, including bridges, in excess of one-half percent of the Contractor's total Bid or \$10,000.00, whichever is greater. If all Subcontractors do not fit on this page, attach another page listing all information for all other Subcontractors.

| Name under which Subcontractor is Licensed and Registered | CSLB License Number(s) and Class(es) | DIR Contractor Registration Number | Address and Phone Number        | Type of Work (e.g., Electrical) | Percentage of Total Bid (e.g., 10%)* |
|-----------------------------------------------------------|--------------------------------------|------------------------------------|---------------------------------|---------------------------------|--------------------------------------|
| Smithson Electric                                         | 614518                               | 1000001610                         | Orange, CA<br>(714) 997-9552    | Loops                           | 2.9%                                 |
| CTI                                                       | 991122                               | 1000011750                         | Riverside, CA<br>(951) 682-1494 | striping                        | 2.5%                                 |
| AAK                                                       | 267073                               | 1000001051                         | Corona, CA<br>(951) 736-7600    | civil                           | 9.7%                                 |
|                                                           |                                      |                                    |                                 |                                 |                                      |
|                                                           |                                      |                                    |                                 |                                 |                                      |

\*The percentage of the total Bid shall represent the "portion of the work" for the purposes of Public Contract Code Section 4104(b).

The Bidder shall list the name and address, Contractor license number, and description of portion of work subcontracted of each subcontractor to whom the Bidder proposes to subcontract portions of the work, as required by the provisions of the Standard Specifications and of the special provisions.

**LIST OF SUBCONTRACTORS**

| Business Name and Location | California Contractor License Number | Description of Portion of Work | Bid Items Numbers | Percentage of Bid Item Subcontracted |
|----------------------------|--------------------------------------|--------------------------------|-------------------|--------------------------------------|
| Smithson Electric          | 614518                               | Loops                          | 5                 | 2.2%                                 |
| C#                         | 991122                               | striping                       | 12                | 81.4                                 |
| All American Asphalt       | 267073                               | civil                          | 4                 | 9.9%                                 |

*(THE BIDDER'S EXECUTION ON THE SIGNATURE PORTION OF THIS PROPOSAL SHALL ALSO CONSTITUTE AN ENDORSEMENT AND EXECUTION OF THOSE CERTIFICATIONS WHICH ARE A PART OF THIS PROPOSAL)*

**EQUAL EMPLOYMENT OPPORTUNITY CERTIFICATION**

The bidder Eleanor Belco Electric, Inc., proposed subcontractor  
\_\_\_\_\_, hereby certifies that he has X, has not \_\_\_\_\_, participated in  
a previous contract or subcontract subject to the equal opportunity clauses, as required by Executive Orders 10925, 11114, or  
11246, and that, where required, he has filed with the Joint Reporting Committee, the Director of the Office of Federal  
Contract Compliance, a Federal Government contracting or administering agency, or the former President's Committee on  
Equal Employment Opportunity, all reports due under the applicable filing requirements.

**Note:** The above certification is required by the Equal Employment Opportunity Regulations of the Secretary of Labor (41 CFR 60-1.7(b) (1)), and must be submitted by bidders and proposed subcontractors only in connection with contracts and subcontracts which are subject to the equal opportunity clause. Contracts and subcontracts which are exempt from the equal opportunity clause are set forth in 41 CFR 60-1.5. (Generally only contracts or subcontracts of \$10,000 or under are exempt.)

Currently, Standard Form 100 (EEO-1) is the only report required by the Executive Orders or their implementing regulations.

Proposed prime contractors and subcontractors who have participated in a previous contract or subcontract subject to the Executive Orders and have not filed the required reports should note that 41 CFR 60-1.7(b) (1) prevents the award of contracts and subcontracts unless such contractor submits a report covering the delinquent period or such other period specified by the Federal Highway Administration or by the Director, Office of Federal Contract Compliance, U.S. Department of Labor.

\_\_\_\_\_

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**PUBLIC CONTRACT CODE****PUBLIC CONTRACT CODE SECTION 10285.1 STATEMENT**

In conformance with Public Contract Code Section 10285.1 (Chapter 376, Stats. 1985), the bidder hereby declares under penalty of perjury under the laws of the State of California that the bidder has \_\_\_\_, has not ☒ been convicted within the preceding three years of any offenses referred to in that section, including any charge of fraud, bribery, collusion, conspiracy, or any other act in violation of any state or Federal antitrust law in connection with the bidding upon, award of, or performance of, any public works contract, as defined in Public Contract Code Section 1101, with any public entity, as defined in Public Contract Code Section 1100, including the Regents of the University of California or the Trustees of the California State University. The term "bidder" is understood to include any partner, member, officer, director, responsible managing officer, or responsible managing employee thereof, as referred to in Section 10285.1.

Note: The bidder must place a checkmark after "has" or "has not" in one of the blank spaces provided. The above Statement is part of the Proposal. Signing this Proposal on the signature portion thereof shall also constitute signature of this Statement. Bidders are cautioned that making a false certification may subject the certifier to criminal prosecution.

---

**PUBLIC CONTRACT CODE SECTION 10162 QUESTIONNAIRE**

In conformance with Public Contract Code Section 10162, the Bidder shall complete, under penalty of perjury, the following questionnaire:

Has the bidder, any officer of the bidder, or any employee of the bidder who has a proprietary interest in the bidder, ever been disqualified, removed, or otherwise prevented from bidding on, or completing a federal, state, or local government project because of a violation of law or a safety regulation?

Yes ☐ No ☒

If the answer is yes, explain the circumstances in the following space.

**PUBLIC CONTRACT CODE 10232 STATEMENT**

In conformance with Public Contract Code Section 10232, the Contractor, hereby states under penalty of perjury, that no more than one final unappealable finding of contempt of court by a federal court has been issued against the Contractor within the immediately preceding two-year period because of the Contractor's failure to comply with an order of a federal court which orders the Contractor to comply with an order of the National Labor Relations Board.

Note: The above Statement and Questionnaire are part of the Proposal. Signing this Proposal on the signature portion thereof shall also constitute signature of this Statement and Questionnaire.  
Bidders are cautioned that making a false certification may subject the certifier to criminal prosecution.

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**Noncollusion Affidavit**  
(Title 23 United States Code Section 112 and  
Public Contract Code Section 7106)

To the CITY / COUNTY of MANHATTAN BEACH  
*DEPARTMENT OF PUBLIC WORKS.*

In conformance with Title 23 United States Code Section 112 and Public Contract Code 7106 the bidder declares that the bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the bid is genuine and not collusive or sham; that the bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham bid, and has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else to put in a sham bid, or that anyone shall refrain from bidding; that the bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the bid price of the bidder or any other bidder, or to fix any overhead, profit, or cost element of the bid price, or of that of any other bidder, or to secure any advantage against the public body awarding the contract of anyone interested in the proposed contract; that all statements contained in the bid are true; and, further, that the bidder has not, directly or indirectly, submitted his or her bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, bid depository, or to any member or agent thereof to effectuate a collusive or sham bid.

Note: The above Non-collusion Affidavit is part of the Proposal. Signing this Proposal on the signature portion thereof shall also constitute signature of this Non-collusion Affidavit. Bidders are cautioned that making a false certification may subject the certifier to criminal prosecution.

\_\_\_\_\_

**DEBARMENT AND SUSPENSION CERTIFICATION**

## TITLE 49, CODE OF FEDERAL REGULATIONS, PART 29

The bidder, under penalty of perjury, certifies that, except as noted below, he/she or any other person associated therewith in the capacity of owner, partner, director, officer, manager:

- is not currently under suspension, debarment, voluntary exclusion, or determination of ineligibility by any Federal agency;
- has not been suspended, debarred, voluntarily excluded or determined ineligible by any Federal agency within the past 3 years;
- does not have a proposed debarment pending; and
- has not been indicted, convicted, or had a civil judgment rendered against it by a court of competent jurisdiction in any matter involving fraud or official misconduct within the past 3 years.

If there are any exceptions to this certification, insert the exceptions in the following space.

Exceptions will not necessarily result in denial of award, but will be considered in determining bidder responsibility. For any exception noted above, indicate below to whom it applies, initiating agency, and dates of action.

Notes: Providing false information may result in criminal prosecution or administrative sanctions. The above certification is part of the Proposal. Signing this Proposal on the signature portion thereof shall also constitute signature of this Certification.

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**NONLOBBYING CERTIFICATION  
FOR FEDERAL-AID CONTRACTS**

The prospective participant certifies, by signing and submitting this bid or proposal, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any Federal agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in conformance with its instructions.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

The prospective participant also agrees by submitting his or her bid or proposal that he or she shall require that the language of this certification be included in all lower tier subcontracts, which exceed \$100,000 and that all such subrecipients shall certify and disclose accordingly.

## DISCLOSURE OF LOBBYING ACTIVITIES

COMPLETE THIS FORM TO DISCLOSE LOBBYING ACTIVITIES PURSUANT TO 31 U.S.C. 1352

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. Type of Federal Action:</b><br><input type="checkbox"/> a. contract<br><input type="checkbox"/> b. grant<br><input type="checkbox"/> c. cooperative agreement<br><input type="checkbox"/> d. loan<br><input type="checkbox"/> e. loan guarantee<br><input type="checkbox"/> f. loan insurance                                                                                                                                                                                                                                                      | <b>2. Status of Federal Action:</b><br><input type="checkbox"/> a. bid/offer/application<br><input type="checkbox"/> b. initial award<br><input type="checkbox"/> c. post-award                                                                                                                                           | <b>3. Report Type:</b><br><input type="checkbox"/> a. initial<br><input type="checkbox"/> b. material change<br><br><b>For Material Change Only:</b><br>year _____ quarter _____<br>date of last report _____ |
| <b>4. Name and Address of Reporting Entity</b><br><br><input type="checkbox"/> Prime <input checked="" type="checkbox"/> Subawardee<br>Tier _____, if known<br><br>Congressional District, if known _____                                                                                                                                                                                                                                                                                                                                                | <b>5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Prime:</b><br><br>Congressional District, if known _____                                                                                                                                                                                      |                                                                                                                                                                                                               |
| <b>6. Federal Department/Agency:</b><br><br><b>8. Federal Action Number, if known:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>7. Federal Program Name/Description:</b><br><br>CFDA Number, if applicable _____<br><b>9. Award Amount, if known:</b>                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>10. a. Name and Address of Lobby Entity</b><br>(If individual, last name, first name, MI)                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>b. Individuals Performing Services</b> (including address if different from No. 10a)<br>(last name, first name, MI)                                                                                                                                                                                                    |                                                                                                                                                                                                               |
| (attach Continuation Sheet(s) if necessary)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                               |
| <b>11. Amount of Payment (check all that apply)</b><br>\$ _____ <input type="checkbox"/> actual <input type="checkbox"/> planned                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>13. Type of Payment (check all that apply)</b><br><input type="checkbox"/> a. retainer<br><input type="checkbox"/> b. one-time fee<br><input type="checkbox"/> c. commission<br><input type="checkbox"/> d. contingent fee<br><input type="checkbox"/> e. deferred<br><input type="checkbox"/> f. other, specify _____ |                                                                                                                                                                                                               |
| <b>12. Form of Payment (check all that apply):</b><br><input type="checkbox"/> a. cash<br><input checked="" type="checkbox"/> b. in-kind; specify: nature _____<br>value _____                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                               |
| <b>14. Brief Description of Services Performed or to be performed and Date(s) of Service, including officer(s), employee(s), or member(s) contacted, for Payment Indicated in Item 11:</b><br><br>(attach Continuation Sheet(s) if necessary)                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                               |
| <b>15. Continuation Sheet(s) attached:</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                               |
| <b>16. Information requested through this form is authorized by Title 31 U.S.C. Section 1352. This disclosure of lobbying reliance was placed by the tier above when his transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to Congress semiannually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</b> |                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                               |
| Signature: _____<br>Print Name: <u>John Wong</u><br>Title: <u>Vice President</u><br>Telephone No.: <u>909-943-4170</u> Date: <u>12/11/11</u>                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                           | Authorized for Local Reproduction<br>Standard Form - LLL                                                                                                                                                      |

**INSTRUCTIONS FOR COMPLETION OF SF-LLL,  
DISCLOSURE OF LOBBYING ACTIVITIES**

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of covered Federal action or a material change to previous filing pursuant to title 31 U.S.C. section 1352. The filing of a form is required for such payment or agreement to make payment to lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress an officer or employee of Congress or an employee of a Member of Congress in connection with a covered Federal action. Attach a continuation sheet for additional information if the space on the form is inadequate. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence, the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a follow-up report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last, previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, state and zip code of the reporting entity. Include Congressional District if known. Check the appropriate classification of the reporting entity that designates if it is or expects to be a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the first tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in Item 4 checks "Subawardee" then enter the full name, address, city, state and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organization level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identification in item 1 (e.g., Request for Proposal (RFP) number, Invitation for Bid (IFB) number, grant announcement number, the contract grant, or loan award number, the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitments for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, state and zip code of the lobbying entity engaged by the reporting entity identified in item 4 to influenced the covered Federal action.  
(b) Enter the full names of the individual(s) performing services and include full address if different from 10 (a). Enter Last Name, First Name and Middle Initial (MI).
11. Enter the amount of compensation paid or reasonably expected to be paid by the reporting entity (item 4) to the lobbying entity (item 10). Indicate whether the payment has been made (actual) or will be made (planned). Check all boxes that apply. If this is a material change report, enter the cumulative amount of payment made or planned to be made.
12. Check the appropriate box. Check all boxes that apply. If payment is made through an in-kind contribution, specify the nature and value of the in-kind payment.
13. Check the appropriate box. Check all boxes that apply. If other, specify nature.
14. Provide a specific and detailed description of the services that the lobbyist has performed or will be expected to perform and the date(s) of any services rendered. Include all preparatory and related activity not just time spent in actual contact with Federal officials. Identify the Federal officer(s) or employee(s) contacted or the officer(s) employee(s) or Member(s) of Congress that were contacted.
15. Check whether or not a continuation sheet(s) is attached.
16. The certifying official shall sign and date the form, print his/her name title and telephone number.

Public reporting burden for this collection of information is estimated to average 30 minutes per response, including time for reviewing instruction, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, D.C. 20503.

SF-LLL-Instructions Rev. 06-04-90«ENDIF»



## EXHIBIT 15-G CONSTRUCTION CONTRACT DBE COMMITMENT

1. Local Agency: City of Manhattan Beach 2. Contract DBE Goal: 6%  
 3. Project Description: Traffic Signal  
 4. Project Location: Sepulveda Blvd.  
 5. Bidder's Name: Eleanor Belco Electric, Inc. 6. Prime Certified DBE: ☐ 7. Bid Amount: \_\_\_\_\_  
 8. Total Dollar Amount for ALL Subcontractors: \_\_\_\_\_ 9. Total Number of ALL Subcontractors: \_\_\_\_\_

| 10. Bid Item Number                                                                                                 | 11. Description of Work, Service, or Materials Supplied | 12. DBE Certification Number | 13. DBE Contact Information (Must be certified on the date bids are opened)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 14. DBE Dollar Amount |
|---------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| 5                                                                                                                   | Traffic Sig                                             | 40340                        | TEK SERVICES LLC<br>7490 JURUPA AVE.<br>RIVERSIDE, CA 92504<br>(714) 336-0536                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$2700.00             |
|                                                                                                                     |                                                         |                              | 60% of 45000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                       |
|                                                                                                                     |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
|                                                                                                                     |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
|                                                                                                                     |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
|                                                                                                                     |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
|                                                                                                                     |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| Local Agency to Complete this Section                                                                               |                                                         |                              | 15. TOTAL CLAIMED DBE PARTICIPATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$2700.00<br>8.4 %    |
| 21. Local Agency Contract Number: _____                                                                             |                                                         |                              | IMPORTANT: Identify all DBE firms being claimed for credit, regardless of tier. Names of the First Tier DBE Subcontractors and their respective item(s) of work listed above must be consistent, where applicable with the names and items of the work in the "Subcontractor List" submitted with your bid. Written confirmation of each listed DBE is required.<br><br>16. Preparer's Signature <u>[Signature]</u> 17. Date <u>12/11/18</u><br>18. Preparer's Name <u>John Wong</u> 19. Phone <u>909-993-9170</u><br>20. Preparer's Title <u>vice President</u> |                       |
| 22. Federal-Aid Project Number: _____                                                                               |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| 23. Bid Opening Date: _____                                                                                         |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| 24. Contract Award Date: _____                                                                                      |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| Local Agency certifies that all DBE certifications are valid and information on this form is complete and accurate. |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| 25. Local Agency Representative's Signature _____                                                                   |                                                         | 26. Date _____               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| 27. Local Agency Representative's Name _____                                                                        |                                                         | 28. Phone _____              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |
| 29. Local Agency Representative's Title _____                                                                       |                                                         |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                       |

DISTRIBUTION: 1. Original – Local Agency  
 2. Copy – Caltrans District Local Assistance Engineer (DLAE). Failure to submit to DLAE within 30 days of contract execution may result in de-obligation of federal funds on contract. Include additional copy with award package.

ADA Notice: For individuals with sensory disabilities, this document is available in alternate formats. For information call (916) 654-6410 or TDD (916) 654-3880 or write Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

## Exhibit 16-B SUBCONTRACTING REQUEST

|                                                     |                           |                                               |                              |                          |                                               |                          |                                                                        |
|-----------------------------------------------------|---------------------------|-----------------------------------------------|------------------------------|--------------------------|-----------------------------------------------|--------------------------|------------------------------------------------------------------------|
| CONTRACTOR NAME                                     |                           |                                               |                              | COUNTY                   |                                               | ROUTE                    |                                                                        |
| BUSINESS ADDRESS                                    |                           |                                               |                              | CONTRACT NUMBER<br>T-246 |                                               |                          |                                                                        |
| CITY AND STATE                                      |                           |                                               | ZIP CODE                     |                          | FEDERAL-AID PROJECT NUMBER<br>HSIPL-5212(011) |                          |                                                                        |
| A. SUBCONTRACTOR<br>(Name, Business Address, Phone) | B. BID ITEM<br>NUMBER (S) | C. PERCENTAGE OF<br>BID ITEM<br>SUBCONTRACTED | D. SUB LISTED<br>AT BID TIME |                          | E. CERTIFIED<br>DBE                           |                          | F. DESCRIBE WORK<br>WHEN LESS THAN<br>100% OF WORK IS<br>SUBCONTRACTED |
|                                                     |                           |                                               | Yes                          | No                       | Yes                                           | No                       |                                                                        |
|                                                     |                           |                                               | <input type="checkbox"/>     | <input type="checkbox"/> | <input type="checkbox"/>                      | <input type="checkbox"/> |                                                                        |
|                                                     |                           |                                               | Yes                          | No                       | Yes                                           | No                       |                                                                        |
|                                                     |                           |                                               | <input type="checkbox"/>     | <input type="checkbox"/> | <input type="checkbox"/>                      | <input type="checkbox"/> |                                                                        |
|                                                     |                           |                                               | Yes                          | No                       | Yes                                           | No                       |                                                                        |
|                                                     |                           |                                               | <input type="checkbox"/>     | <input type="checkbox"/> | <input type="checkbox"/>                      | <input type="checkbox"/> |                                                                        |
|                                                     |                           |                                               | Yes                          | No                       | Yes                                           | No                       |                                                                        |
|                                                     |                           |                                               | <input type="checkbox"/>     | <input type="checkbox"/> | <input type="checkbox"/>                      | <input type="checkbox"/> |                                                                        |
|                                                     |                           |                                               | Yes                          | No                       | Yes                                           | No                       |                                                                        |
|                                                     |                           |                                               | <input type="checkbox"/>     | <input type="checkbox"/> | <input type="checkbox"/>                      | <input type="checkbox"/> |                                                                        |

I certify that

- The Standard Provisions for labor set forth in the contract apply to the subcontracted work
- If applicable, Form FHWA- 1273 of the Special Provisions have been inserted in the subcontracts and should be incorporated in any lower-tier subcontract. Written contracts have been executed for the above noted subcontracted work.

|                      |      |
|----------------------|------|
| Contractor Signature | Date |
|----------------------|------|

This section is to be completed by the resident engineer.

- |                                                                             |    |       |
|-----------------------------------------------------------------------------|----|-------|
| 1. Total of bid items                                                       | \$ | _____ |
| 2. Contractor must perform with own forces (lines 1 X contract req. %)      | \$ | _____ |
| 3. Bid items previously subcontracted (taken from previously approved 16-B) | \$ | _____ |
| 4. Bid items subcontracted (this request)                                   | \$ | _____ |
| 5. Total (lines 3 + 4)                                                      | \$ | _____ |
| 6. Balance of work contractor to perform (lines 1 minus 5)                  | \$ | _____ |

|                               |      |
|-------------------------------|------|
| Approved                      |      |
| RESIDENT ENGINEER'S SIGNATURE | DATE |

Copy Distribution : Original-Contractor Copy- Resident Engineer Copy- OBEO- [smallbusinessadvocate@dopt.ca.gov](mailto:smallbusinessadvocate@dopt.ca.gov) or fax to (916) 324-1949

\* TO Be completed upon Award of contract

Page 1 of 2  
January 2018

**EXHIBIT 17-F FINAL REPORT-UTILIZATION OF DISADVANTAGED BUSINESS ENTERPRISES (DBE) AND FIRST-TIER SUBCONTRACTORS**

| 1. Local Agency Contract Number<br>T-246 |                                                        | 2. Federal-Aid Project Number<br>HSIPL-5212(011) |                              | 3. Local Agency<br>City of Manhattan Beach |           | 4. Contract Completion Date |                           |
|------------------------------------------|--------------------------------------------------------|--------------------------------------------------|------------------------------|--------------------------------------------|-----------|-----------------------------|---------------------------|
| 5. Contractor/Consultant                 |                                                        |                                                  | 6. Business Address          |                                            |           | 7. Final Contract Amount    |                           |
| 8. Contract Item Number                  | 9. Description of Work, Service, or Materials Supplied | 10. Company Name and Business Address            | 11. DBE Certification Number | 12. Contract Payments                      |           | 13. Date Work Completed     | 14. Date of Final Payment |
|                                          |                                                        |                                                  |                              | Non-DBE                                    | DBE       |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          | A. TO BE completed. after project completion           |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
|                                          |                                                        |                                                  |                              |                                            |           |                             |                           |
| 15. ORIGINAL DBE COMMITMENT AMOUNT       |                                                        |                                                  |                              | \$                                         | 16. TOTAL |                             |                           |

List all first-tier subcontractors/subconsultants and DBEs regardless of tier whether or not the firms were originally listed for goal credit. If actual DBE utilization (or item of work) was different than that approved at the time of award, provide comments on an additional page. List actual amount paid to each entity. If no subcontractors/subconsultants were used on the contract, indicate on the form.

|                                                                                                 |                                                 |           |          |
|-------------------------------------------------------------------------------------------------|-------------------------------------------------|-----------|----------|
| I CERTIFY THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT                                    |                                                 |           |          |
| 17. Contractor/Consultant Representative's Signature                                            | 18. Contractor/Consultant Representative's Name | 19. Phone | 20. Date |
| I CERTIFY THAT THE CONTRACTING RECORDS AND ON-SITE PERFORMANCE OF THE DBE(S) HAS BEEN MONITORED |                                                 |           |          |
| 21. Local Agency Representative's Signature                                                     | 22. Local Agency Representative's Name          | 23. Phone | 24. Date |

**DISTRIBUTION:** Original – Local Agency, Copy – Caltrans District Local Assistance Engineer. Include with Final Report of Expenditures

**ADA NOTICE:** For individuals with sensory disabilities, this document is available in alternate formats. For information, call (916) 445-1233, Local Assistance Procedures Manual TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

**UNANIMOUS WRITTEN CONSENT IN LIEU OF  
2018 ANNUAL MEETING OF THE BOARD OF DIRECTORS  
OF  
ELEC NOR BELCO ELECTRIC, INC.**

**January 1, 2018**

---

The undersigned, being all of the members of the Board of Directors (the "Board") of Elecnor Belco Electric, Inc., a California corporation (the "Company"), in lieu of holding a meeting of the Board, hereby take the following actions and adopt the following resolutions by unanimous written consent:

**WHEREAS**, the Board has determined that it is in the Company's best interests to appoint a revised slate of Officers of the Company.

**NOW, THEREFORE, BE IT RESOLVED**, that the following persons be, and hereby are, elected to the offices set forth opposite their respective names, to hold such offices until their respective successors are elected and qualified at or before the next annual meeting of the Board, or until their earlier respective deaths, resignations or removals:

President and Chief Executive Officer  
Chief Financial Officer  
Executive Vice President  
Roger DeVito

John Wong  
Secretary

Juan Bravo  
Jeroni Gervilla  
Alberto Garcia  
Senior Vice President, General Counsel  
and Assistant Secretary  
Vice President for Construction  
Pedro Enrile

**FURTHER RESOLVED**, that Juan Bravo, Jeroni Gervilla, Alberto Garcia and Roger DeVito in their respective capacities (listed above) subject to such supervisory powers of the Board of Directors, hereby are authorized and directed to perform all the duties commonly incident to that office; shall have authority to execute in the name of the Company contracts, leases and other written instruments to be executed by the Company; and, shall perform such other duties as the Board of Directors may from time to time determine.

**FURTHER RESOLVED**, that the President and Chief Executive Officer may delegate authority to any Chief Financial Officer or Chief Operating Officer or Senior Vice President or Vice President as and within their authority levels as set forth in the Company's Bylaws, as the same may be amended from time to time;

**FURTHER RESOLVED**, that Roger DeVito, in his capacity of Senior Vice President, is hereby authorized and directed to:

1. Negotiate, sign, amend and terminate agreements in connection with the purpose of the Company, for all contracts up to \$250,000.00, and acting jointly with Juan Bravo or Alberto Garcia for all contracts in amounts greater than \$250,000.00.
2. Execute, amend and finalize bid proposals in connection with the purpose of the Company, for all proposals up to \$1,000,000.00, and acting jointly with Juan Bravo or Alberto Garcia for all proposals in amounts greater than \$1,000,000.00.
3. Acting jointly with Juan Bravo or Alberto Garcia, execute, amend and finalize purchase orders for materials and equipment in connection with the purpose of the Company.



4. Acting jointly with Juan Bravo or Alberto Garcia, execute, amend and terminate agreements for the lease of real estate to be used as offices or job related temporary yards.
5. Acting jointly with Juan Bravo or Jeroni Gervilla, execute, amend and terminate insurance and/or bid bonds arrangements in connection with the purpose of the Company.
6. Acting jointly with Juan Bravo or Jeroni Gervilla, hire, suspend, impose sanctions and dismiss the administrative personnel of the Company, setting forth their employment terms and conditions, obligations and remuneration.
7. Acting jointly with Juan Bravo or Jeroni Gervilla, settle and claims on behalf of the Company.

**AND IT IS FURTHER RESOLVED**, that all actions heretofore taken by the officers of the Company on behalf of and in the name of the Company, relating to the conduct of the business of the Company, the expenditure of money, the making of contracts and all other acts taken or omitted in the performance of their duties to the Company be, and the same hereby are, in all respects, approved, ratified and affirmed, as of the date taken, done or omitted, respectively.

The actions taken by the Board Consent shall have the same force and effect as if taken by the undersigned at a meeting of the Board of Directors, duly called and constituted pursuant to the Bylaws of the Company and the laws of the State of California. This Board Consent may be executed in counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same document.

**IN WITNESS WHEREOF**, the undersigned, being all of the members of the Board of Directors of Elecnor Belco Electric, Inc., have executed these actions by written consent as of the date first written above.

  
\_\_\_\_\_  
Argimiro Ramon, Director  
\_\_\_\_\_  
Luis Alcibar, Director  
\_\_\_\_\_  
Alexander Arrola, Director