

**SECTION 00400
BID PROPOSAL
(FORM A)**

To: Otay Water District
2554 Sweetwater Springs Boulevard
Spring Valley, California 91978-2004

Project Title: **36-Inch La Presa Air-Vac Valve Relocations (CIP P2267)**

Bidder: Underground Pipeline Solutions, Inc.

Address: 2333 Alpine Blvd., Alpine, CA 91901

Date: August 1, 2016

Bidder's contract person for additional information on this Proposal:

Name: Valli Cox Telephone: (619) 964-4074

Contractor's license number and class: 956807 Class A Expiration date: 03/31/2018

BIDDER'S DECLARATION AND UNDERSTANDING

The undersigned, hereinafter called the "Bidder," declares that the only persons or parties interested in this proposal are those named herein, that this proposal is, in all respects, fair and without fraud, that it is made without collusion with any official of the District, and that the proposal is made without any connection or collusion with any person submitting another proposal on this contract.

The Bidder further declares that the Contract Documents for the construction of the project were carefully reviewed, including materials and equipment, conditions of work involved, and including the fact that the description of the quantities of work and materials, as included herein, is brief and is intended only to indicate the general nature of the work and to identify the said quantities with the detailed requirements of the Contract Documents, and that this proposal is made according to the provisions and under the terms of the Contract Documents, which documents are hereby made a part of this proposal.

Submission of this proposal shall be conclusive evidence that the Bidder has investigated the availability of all equipment and materials required for the work specified and is satisfied that deliveries of equipment and materials can be scheduled so as to complete the work in all respects within the completion times specified herein.

The Bidder understands and agrees that if a contract is awarded, the employees of Bidder and Bidder's subcontractors shall be paid wages which are no less than the prevailing wage rates as determined by the California Department of Industrial Relations pursuant to the California Labor Code. The Bidder who is awarded the contract shall post at the job site a copy of the prevailing rates of per diem wages as determined by the California Department of Industrial Relations at the job site.

The Bidder understands that the District reserves the right to reject any and all bids and to waive any information in the bidding.

CONTRACT EXECUTION AND BONDS

After receiving the Notice of Award (NOA), the Bidder shall comply with the terms set forth in Section 00100, Article 23. The Bidder will, to the extent of this proposal, furnish all machinery, tools, apparatus, other means of construction, and do the work and furnish all the materials necessary to complete all work as specified or indicated in the contract documents.

If awarded a contract by the District's Board of Directors, the Bidder shall sign the contract in the blank space(s) provided therefore. If the Bidder is a sole proprietor, the true name of the fictitious business shall be set forth above, if operating under a fictitious name, together with the signature of the sole proprietor. If the Bidder is a partnership, the true name of the partnership shall be set forth above, together with the signature of the general partner authorized to sign contracts on behalf of the partnership. If the bidder is a corporation, the legal name of the corporation shall be set forth above, together with the signature of the president and secretary of the corporation. If the Bidder is another entity, the true name of the entity shall be set forth above, together with the signature of two senior officials authorized to sign contracts on behalf of the entity.

CONTRACT COMPLETION TIME

The Bidder further agrees to begin work and to complete the construction, in all respects, for which the proposal is accepted within **125 (one hundred twenty five)** calendar days from the date stated in the Notice to Proceed.

LIQUIDATED DAMAGES

Failure of the Contractor to complete the work within the time allowed will result in damages being sustained by the District. Such damages are, and will continue to be, impracticable and extremely difficult to determine. For each consecutive calendar day that the contractor fails to substantially complete all work in excess of the time period specified for the completion of the work, as may be adjusted in accordance with these contract documents, the contractor shall pay the District, or have withheld from monies due it, liquidated damages in the sum of **ONE THOUSAND DOLLARS (\$1,000)** per calendar day.

By execution of the contract, the Contractor and District agree that these liquidated damages and amounts are not unreasonable under the circumstances that exist at that time the invitations for bid were requested and at the time the contract was entered into and that the amount specified above per calendar day is the minimum value of the costs of actual damage caused by the failure of the contractor to complete the work within the allotted time. The liquidated damages shall not be construed as a penalty, and may be deducted from payments due the contractor if such delay occurs.

ADDENDA

The Bidder hereby acknowledges that he has received Addenda numbers 1, 2, 3, 4 *Jack* to these Contract Documents by inserting the number of each Addendum in the spaces provided above.

SALES AND USE TAXES

The bidder agrees that all sales and use taxes are included in the stated bid prices for the work, unless provision is made herein for the Bidder to separately itemize the estimated amount of sales tax.

BID LIST REQUIREMENTS AND UNDERSTANDING

Bids are to be submitted for the entire work. All bid items must be filled out, and extension carried out as appropriate. A blank space will be considered non responsive, if zero is intended then a "0" must be entered for both unit price and amount. In case of discrepancy between the unit and lump sum prices and in the total amounts set forth in extension, the unit and lump sum price shall prevail. For purposes of comparison, the total bid amount of the bid will be the total of the base bid plus additive bid item(s). In the event the total bid amount does not agree with the sum of the total amounts for each item, the unit and lump sum price bid for each item along with its corrected/uncorrected total amount extension, shall govern. The total bid amount will be corrected accordingly, and the contractor shall be bound by said correction. The Bidder further agrees to accept as full payment for the work specified herein, the amounts computed below based on the following lump sum and unit price amounts, it being expressly understood that the unit prices are independent of the exact quantities involved. The Bidder agrees that the lump sum amounts and unit price amounts represent a true measure of the labor, material, and equipment required to perform the work, including all allowances for overhead and profit. If so requested by the District, the contractor shall substantiate any price or prices with additional detailed price breakdown.

During or after the award of the contract, the District reserves the right to increase or diminish the amount of any item of work or item(s) as may be deemed necessary. The unit prices shall remain unchanged for the duration of this contract even if the unit quantities are decreased by any amount or increased up to 150%. The District also reserves the right to delete any bid item(s) in its entirety.

Quantities for lump sum items are shown as "LS" under the unit column and shown as one (1), however all required work for that item is inclusive. For example, a lump sum item, for potholing may involve several potholes in order to perform the required work, and the unit price of that lump sum item shall remain unchanged for the duration of this contract.

If Bidder uses add/deduct items, the Bidder will be required to identify the specific item(s) being changed and amount(s) for each in order to be considered a responsive bidder. In case of discrepancy between the Change Amount and the Adjusted Bid Item Amount, the Change Amount shall prevail.

36-Inch La Presa Air-Vac Valve Relocations (CIP P2267)

BID LIST

Bid items are described in the Specifications, Section 01010 – Summary of Work, and the Contract Documents.

ITEM NO.	DESCRIPTION	QTY	UNIT	UNIT PRICE	AMOUNT
1	Mobilization / Demobilization	1	LS	\$ 10,000.00	\$ 10,000.00
2	Sheeting, Shoring, and Bracing	1	LS	\$ 190.00	\$ 190.00
3	Air-Vac Valve #1 Relocation	1	LS	\$ 24,765.00	\$ 24,765.00
4	Air-Vac Valve #2 Relocation	1	LS	\$ 26,947.00	\$ 26,947.00
5	Air-Vac Valve #3 Relocation	1	LS	\$ 25,682.00	\$ 25,682.00
6	Air-Vac Valve #4 Relocation	1	LS	\$ 25,216.00	\$ 25,216.00
7	Air-Vac Valve #5 Relocation	1	LS	\$ 22,996.00	\$ 22,996.00
8	Air-Vac Valve #6 Relocation	1	LS	\$ 6,469.00	\$ 6,469.00
9	Asphalt Concrete Pavement Replacement	80	SF	\$ 12.50	\$ 1,000.00
10	Curb and Gutter Replacement	30	LF	\$ 26.67	\$ 800.00
11	Site Restoration and Erosion Control	1	LS	\$ 1,000.00	\$ 1,000.00
12	Traffic Control	1	LS	\$ 3,750.00	\$ 3,750.00

UNIT PRICE AND ALLOWANCE ITEMS NOT INCLUDED IN THE CONTRACT DOCUMENTS AND INCLUDED IN THE CONTRACT SCOPE

Note: Quantities are an estimate for the purposes of comparing Bids only. Payment of these items will be based on actual quantities furnished, installed, disposed or constructed in accordance with the Contract Documents

13	Unknown or Unidentified Utilities, Unsuitable Soils, or Dewatering	1	LS	ALLOWANCE	\$ 5,000
14	Rock Removal	10	CY	\$ 150	\$ 1,500.00

SUBTOTAL ITEMS NOS. 1 THROUGH 14:

\$ 155,315.00

ADDITIONS OR DEDUCTIONS *		CHANGE (+) or (-)	ADJUSTED BID ITEM AMOUNT
15	Addition (+) or Deduction (-) to Bid Item _____	\$	\$
16	Addition (+) or Deduction (-) to Bid Item _____	\$	\$
17	Addition (+) or Deduction (-) to Bid Item _____	\$	\$

*** Note Regarding Use of Addition (+) or Deduction (-) Items Above:**

Provision is made for the Bidder to include an addition or deduction in the Bid, if so desired, to reflect any last minute adjustments in prices. The addition or deduction, if made, will be applied to the Bid Items listed. **It is the Bidders responsibility to identify any ADDITIONS OR DEDUCTIONS with a (+) or (-), accordingly.**

Should the bidder elect not adjust his bid, the bidder shall enter the words "NONE" for each of the Addition/Deduction blocks above.

TOTAL ITEMS NOS. 1 THROUGH 17: \$ 155,315.00

TOTAL ITEMS NOS. 1 THROUGH 17 IN WORDS IS: One Hundred Fifty Five Thousand Three

Hundred Fifteen and no/100 Dollars

Bid evaluations shall be based upon bid items 1 through 17. District reserves the right to implement any alternative bid items.

THE UNDERSIGNED DECLARES UNDER PENALTY OF PURJURY under the laws of the State of California that the representations made in this Bid are true and correct.

The Bidder is a (circle one):

Principal Corporation Partnership* LLC Proprietorship

Named: Underground Pipeline Solutions, Inc.

Address: 2333 Alpine Blvd., Alpine, CA 91901

Name: Valli Cox
Title: Vice President *Valli Cox*

Contractor's License No.: 956807

Class of License: Class A

Expiration Date: 03/31/2018

Treasury I.D.: 45-3126359

Corporate Seal: 3400366

*If the Bidder is a partnership, all partners must sign on a separate piece of paper, which must be attached to the Bid.

IF CORPORATION, SIGN HERE:

IN WITNESS WHEREOF the undersigned corporation has caused this instrument to be executed and its seal affixed by its duly authorized officers this 1st day of August 2016.

(SEAL)

Underground Pipeline Solutions, Inc.
Name of Corporation

By [Signature]

Martin Cox

President

By [Signature]

Valli Cox

Secretary

IF OTHER ENTITY, SIGN HERE:

IN WITNESS hereto the undersigned has set his (its) hand
This _____ day of _____ 20__.

Name of Entity

By _____

Title

By _____

Title

Attest [Signature]

**SECTION 00410
BID BOND
(FORM B)**

BOND NO. CDGB105105

AMOUNT: \$ N/A

Know all men by these presents, that _____
Underground Pipeline Solutions, Inc.

as Principal, and State National Insurance Company, Inc. Administered by: Contractor Managing Insurance Agency, Inc.

a corporation duly organized under the laws of the State of Texas

having its principal place of business at 20335 Ventura Blvd., Suite #426 Woodland Hills, CA 91364

.....
in the State of California, and authorized to do business in the State of California, as _____
an Admitted

Surety, are held and firmly bound unto Otay Water District, hereinafter "Obligee", in the penal
sum of Ten percent of the greatest amount bid

_____ Dollars (\$ (\$10.00% G.A.B.)), for the payment of which we bind ourselves, our
heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these
presents.

THE CONDITION OF THIS BOND IS SUCH THAT:

Whereas the Principal is herewith submitting his or its bid proposal for Contractor Services, said bid proposal, by reference thereto, being hereby made a part hereof.

Now, therefore, if the bid proposal submitted by the Principal is accepted, and the contract awarded to the Principal, and if the Principal shall execute the proposed contract and shall furnish such Performance Bond and Labor and Materials Bond as required by the Contract Documents, insurance certificates and policies, certification of worker's compensation insurance and other required documents within the time fixed by the Contract Documents, then this obligation shall be void. If the Principal shall fail to execute the proposed contract, furnish the required bonds and other required documents within the time specified in the Contract Documents, the Surety hereby agrees to pay to the Obligee the penal sum as liquidated damages.

Signed and sealed this 29th day of July, 2016.

Underground Pipeline Solutions, Inc.

PRINCIPAL

By Valli Cox

State National Insurance Company Inc.*

SURETY *Administered by: Contractor Managing General Insurance Agency, Inc.

By [Signature]

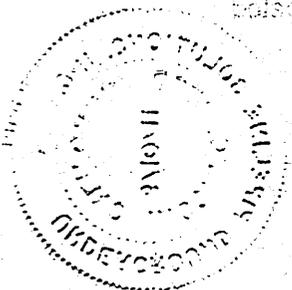
Attorney-in-fact Stephanie Hope Shear

THE NATIONAL BOARD OF DIRECTORS

Resolved, that the Board of Directors of the National Board of Directors be authorized to take such action as may be deemed proper to carry out the purposes of this Act.

Resolved, that the Board of Directors be authorized to make such amendments to the Bylaws of the National Board of Directors as may be deemed proper to carry out the purposes of this Act.

Witness my hand and seal this 15th day of June, 1955.



Secretary



President

Bond No: CDGB105105

State National Insurance Company, Inc. Administered by:
CONTRACTOR MANAGING GENERAL INSURANCE AGENCY, INC.

Premium: \$0.00

POWER OF ATTORNEY

KNOW BY ALL THESE PRESENTS That STATE NATIONAL INSURANCE COMPANY, INC. a corporation organized and existing under the laws of the State of Texas, having its principal office in Bedford, Texas does hereby constitute and appoint

Stephanie Hope Shear

(individually, jointly, or severally)

its true and lawful agent and attorney(s)-in-fact to execute, seal and deliver for and on its behalf as surety, any and all bonds in an amount not to exceed:
Three Million and 00/100 Dollars (\$3,000,000)

and undertakings, contracts of indemnity and other writings obligatory in the nature thereof, which are or may be allowed, required or permitted by law, statute, rule, regulation, contract or otherwise.

The acknowledgement and execution of bond by said Attorney-in-Fact, shall be as binding upon STATE NATIONAL INSURANCE COMPANY, INC. as fully and amply, to all intents and purposes, as if the same had been duly executed and acknowledged by its regularly elected officers at the principal office.

RESOLVED that the signature and date of any authorized officer and the seal of the Company may be affixed by facsimile or other electronic image to any Power of Attorney or certification thereof authorizing the execution and delivery of any bond, undertaking, contracts of indemnity and other writings obligatory in the nature thereof, and such signature, date, and seal when so used shall have the same force and effect as though manually affixed.

This Power of Attorney shall remain in full force and effect until revoked by STATE NATIONAL INSURANCE COMPANY, INC. in a signed writing delivered to the foregoing Attorney-in-Fact.

IN WITNESS WHEREOF, STATE NATIONAL INSURANCE COMPANY, INC. has caused this instrument to be signed and its corporate seal to be affixed by its authorized officer, this 7th day of August, 2015.

STATE NATIONAL INSURANCE COMPANY, INC.

Terry L. Ledbetter, President

Trace Ledbetter, Secretary

STATE OF TEXAS
County of Tarrant

On this 7th day of August, 2015 before me came the individuals who executed the preceding instrument, to me personally known, and being by me duly sworn, said that each of the herein described and authorized officer of STATE NATIONAL INSURANCE COMPANY, INC.; that the seal affixed to said instrument is the Corporate Seal of said Company; that the Corporate Seal and each signature were duly affixed by order of the Board of Directors of said Company.

IN WITNESS WHEREOF, I have hereunto set my hand at Bedford, Texas the day and year above written.



Signature of Notary

[Notary Stamp]

I, the undersigned, Secretary of STATE NATIONAL INSURANCE COMPANY, INC., do hereby certify that the above and foregoing is a true and correct copy of a Power of Attorney executed by STATE NATIONAL INSURANCE COMPANY, INC., which is still in full force and effect.

IN WITNESS WHEREOF, I have thereunto systematically set my hand and attested the seal of said Company this 29th day of July, 2015

Trace Ledbetter, Secretary

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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 LOS ANGELES)

On JUL 29 2016 before me, SHIRLEY GIGGLES, NOTARY PUBLIC,
Date Here Insert Name and Title of the Officer
personally appeared STEPHANIE HOPE SHEAR
Name(s) 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 [Handwritten Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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 Diego)
On 8/2/16 before me, Melanie M Rose Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Valli Cal
Name(s) 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 Melanie Michelle Rose
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

**SECTION 00430
CONTRACTOR LICENSE AFFIDAVIT
(FORM D)**

BUSINESS AND PROFESSIONAL CODE 7028.15:

"A licensed contractor shall not submit a bid to a public agency unless his or her contractor's license number appears clearly on the bid, the license expiration date is stated, and the bid contains a statement that the representations made therein are made under penalty of perjury. Any bid not containing this information, or a bid containing information which is subsequently proven false, shall be considered nonresponsive and shall be rejected by the public agency."

State of California)
) ss
)

Valli Cox being first duly sworn, deposes and says that he is VP/ Secretary / Treas
Underground Pipeline Solutions the party making the foregoing bid, is a
licensed contractor and understands the information shown below shall be included with the bid
and understands that any bid not containing this information, or if this information is
subsequently proven to be false, shall be considered nonresponsive and shall be rejected by
the District _____

State of California License #956807 Class A General Engineering Expiration 03/31/2018

(State license number and classification) License Expiration Date

I certify under the penalty of Perjury under the laws of the State of California that the foregoing
is true and correct.

Subscribed at:

ALPINE SAN DIEGO CALIFORNIA
(City) (County) (State)

on 8/2, 2016.
(Date)

Valli Cox

CLASS A LICENSE # 956807

(State license number and classification)

2333 ALPINE BLVD

(Address)

ALPINE CA 91901

(City) (State) (Zip Code)

619-964-4074

(Telephone)

NOTARY TO AFFIX SEAL
AND CERTIFICATE OF
ACKNOWLEDGMENT



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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 Diego)
On 8/2/14 before me, Melanie M. Rose Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Valli Cox
Name(s) 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 Melanie Michelle Rose
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____ Signer's Name: _____
 Corporate Officer — Title(s): _____ Corporate Officer — Title(s): _____
 Partner — Limited General Partner — Limited General
 Individual Attorney in Fact Individual Attorney in Fact
 Trustee Guardian or Conservator Trustee Guardian or Conservator
 Other: _____ Other: _____
Signer Is Representing: _____ Signer Is Representing: _____

**SECTION 00440
LIST OF SUBCONTRACTORS
(FORM E)**

The Bidder shall identify all proposed subcontractors and subconsultants who will be performing work that has a value in excess of one-half (0.5) of one (1) percent of the total amount of this proposal. The Bidder certifies that the following subcontracting firms or businesses will be awarded subcontracts for the indicated portions of the work in the event that the Bidder is awarded the contract.

The Bidder shall identify the type of work the subcontractor shall perform; include the specific bid item(s) that the subcontractor(s) will perform work on; and state the percent (%) of the bid item that the subcontractor will perform.

TYPE OF WORK: NONE / N/A

Bid Item	Percent
Name	
Street	City
License No. /Type	

TYPE OF WORK:

Bid Item	Percent
Name	
Street	City
License No. /Type	

TYPE OF WORK:

Bid Item	Percent
Name	
Street	City
License No. /Type	

TYPE OF WORK:

Bid Item

Percent

Name

Street

City

License No. /Type _____

TYPE OF WORK:

Bid Item

Percent

Name

Street

City

License No. /Type _____

TYPE OF WORK:

Bid Item

Percent

Name

Street

City

License No. /Type _____

BIDDER: UNDERGROUND PIPELINE SOLUTIONS, INC

Signature: Val C Cox

Date: 8/1/16

**SECTION 00450
LIST OF REFERENCES
(FORM F)**

A minimum of five (5) project references are required for the Contractor and a minimum of three (3) project references are required for the Project Manager to be assigned to the subject work. The referenced projects must have been completed within the past five (5) years and be similar in scope including type, size, duration, value, etc. to the aforementioned project. Bidder's failure to provide current reference contact information could impact District's ability to check references. Lack of valid references could delay award of a contract to Bidder and jeopardize award.

CONTRACTOR

Project Title: Fire Station No. 2 (Bayside) Year Completed: 2016

Type of Project New Fire Station (subcontract for wet utilities) Contract Amount: \$ 335,079.00

Company Name: Barnhart-Reese Construction Co.

Address: 10805 Thornmint Rd, Suite 200, San Diego, CA

Contact Person: Patrick Nolan Tel: 858-254-2949

Project Title: Downtown Bus Rapid Transit (BRT) Year Completed: 2016

Type of Project Subcontract for Water, sewer & Storm Drain Contract Amount: \$ 178,739.00

Company Name: West Coast General Corp.

Address: 13700 Stowe Dr., Suite 100, Poway, Ca 92064

Contact Person: Nick Walters, VP Tel: 619-561-4200

Project Title: Los Penasquitos Blk Mtn Ranger Station Year Completed: 2016

Type of Project New Ranger Station (Sub for Water Sewer & SD) Contract Amount: \$ 151,864.00

Company Name: West Coast General Corp.

Address: 13700 Stowe Dr., Suite 100, Poway, CA 92064

Contact Person: Nick Walters, VP Tel: 619-561-4200

Project Title: Vista Camino 8" Waterline Replacement Project Year Completed: 2015

Type of Project Water Line Replacement Contract Amount: \$ 415,000.00

Company Name: Lakeside Water District

Address: 10375 Vine St., Lakeside, Ca 92040

Contact Person: Brett Sanders Tel: 619-443-3805

Project Title: Tenth Avenue Marine Terminal Year Completed: 2013

Type of Project Water & Sewer System Contract Amount: \$ 248,752.00

Company Name: Fordyce Construction Co.

Address: 9932 Prospect St., #138, Santee, CA 92071

Contact Person: Amy Crandall Tel: 619-449-4272

Project Title: Mission Avenue Improvements, Downtown Oceanside Year Completed: 2014

Type of Project Water, Sewer, Storm Drain Contract Amount: \$ 168,332.00

Company Name: West Coast General Corp.

Address: 13700 Stowe Dr., Suite 100, Poway, CA 92064

Contact Person: Nick Walters, VP Tel: 619-561-4200

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

PROJECT MANAGER

Project Manager: Marty Cox

Project Title: Fire Station No. 2 (Bayside) Year Completed: 2016

Type of Project New Fire Station (subcontract for wet utilities) Contract Amount: \$ 335,079.00

Company Name: Barnhart-Reese Construction Co.

Address: 10805 Thornmint St., Suite 200, San Diego, CA 92128

Contact Person: Patrick Nolan Tel: 858-254-2949

Project Title: Downtown Bus Rapid Transit (BRT) Year Completed: 2016

Type of Project Subcontract for Water, sewer & Storm Drain Contract Amount: \$ 176,739.00

Company Name: West Coast General Corp.

Address: 13700 Stowe Dr., Suite 100, Poway, CA 92064

Contact Person: Nick Walters Tel: 619-561-4200

Project Title: Vista Camino 8" Waterline Replacement Year Completed: 2015

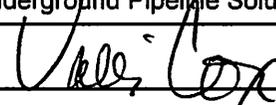
Type of Project Water Line Replacement Contract Amount: \$ 415,000.00

Company Name: Lakeside Water District

Address: 10375 Vine St., Lakeside, CA 92040

Contact Person: Brett Sanders Tel: 619-443-3805

BIDDER: Underground Pipeline Solutions, Inc.

Signature: 

Date: 08/01/16

**SECTION 00460
COMPANY BACKGROUND QUESTIONNAIRE
(FORM G)**

Company Name: Underground Pipeline Solutions, Inc.

Person Completing Form (Print): Valli Cox

Signature: *Valli Cox* Date: 8/1/16

Title: VP / Secretary / Treas Phone Number: 619-964-4074

IMPORTANT: Falsifying information or failure to provide known information could jeopardize or delay award of a contract and may render the bid nonresponsive.

1. COMPANY HISTORY

	Yes	No
1. Have there been any previous changes to the company name or changes in ownership that have occurred within the past ten (10) years?		X
2. Has any owner or officer of the company operated as a contractor under any other name or license number in the last ten (10) years?		X
3. Have there been any previous changes to the company's license number(s) in the past ten (10) years?		X
4. Is your company a subsidiary, parent, holding company or affiliate of another construction company?		X

If 'Yes' to any of the above, provide details for each on the lines below including, but not limited to, previous company name and/or number, date of name change, date of change in ownership.

NIA

2. COMPANY FINANCIAL RECORD

	Yes	No
1. Has your company filed for bankruptcy at any time during the last ten (10) years or is it currently involved in bankruptcy proceedings?		X

If 'Yes' to the above, provide details on the lines below including, but not limited to, case number, bankruptcy court, the date the petition was filed, the type of bankruptcy, and the result, if any.

N/A

3. CIVIL COURT ACTIONS

	Yes	No
1. Has your company, or any owner or officer of your company, ever been found liable in a civil suit?		X
2. Have there been any judgments against your company or any owner or officer of your company within the past ten (10) years?		X
3. In the past ten (10) years, has your company or any owner or officer of your company made any claim in excess of \$50,000 against a project owner and filed that claim in court or arbitration?		X
4. In the past ten (10) years, have there been any claims in excess of \$50,000 that have been filed in court or arbitration against your company?		X

If 'Yes' to any of the above, provide details for each on the lines below including, but not limited to, project name, date of the claim, name of the claimant, name of the entity (or entities) against whom the claim was filed, brief description of the claim, the court and case number, if applicable, brief description of the status (i.e. pending, resolved, a description of the resolution, etc.).

N/A

4. CRIMINAL OR ADMINISTRATIVE ACTIONS

	Yes	No
1. Has your company or any owner or officer of your company ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?		X
2. Has your company or any owner or officer of your company ever been found guilty in a criminal or administrative action for making any false claim or material misrepresentation to any public agency or entity?		X
3. Has any state or local agency including, but not limited to, the Division of Labor Standards Enforcement or the Department of Industrial Relations, filed or taken any disciplinary or administrative action against your company or any owner or officer of your company?		X

If 'Yes' to any of the above provide details for each on the lines below including, but not limited to, the person or persons convicted or subject to discipline or administrative action, the name of the victim or complaining party(ies), the date of conviction, citation or penalty, the court and case number or administrative number, the crime or claims, and the year convicted, cited or fined.

N/A

5. CONTRACT AWARD

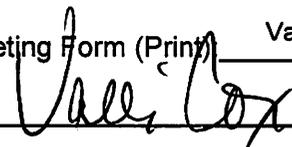
	Yes	No
1. Has your company ever been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?		X
2. In the past ten (10) years, has your company or any owner or officer of your company been prevented from bidding on, or completing, any government agency or public works project for any reason, including debarment or disqualification? This includes any current debarments or disqualifications, regardless of when it occurred, and any listing on the Excluded Parties List System or System for Award Management.		X

If 'Yes' to any of the above, provide details for each on the lines below including, but not limited to, year of the event, the owner, the project, entity denying the award, the basis for the finding by the public agency, name of the organization and/or individuals debarred.

N/A

This page is intentionally blank.

**SECTION 00470
COMPANY SAFETY QUESTIONNAIRE
(FORM H)**

Company Name: Underground Pipeline Solutions, Inc.
 Person Completing Form (Print) Valli Cox
 Signature:  Date: 8/1/16
 Title: VP / Sec / Treas Phone Number: 619-964-4074

IMPORTANT: Falsifying information or failure to provide known information could jeopardize or delay award of a contract.

SAFETY PERFORMANCE

1. List your company's Interstate Experience Rating Modifier (ERM) for the three most recent years.

20 <u>15</u>	<u>0</u>	
20 <u>14</u>	<u>0</u>	
20 <u>13</u>	<u>0</u>	

2. List your company's number of injuries/illnesses from your OSHA 300 logs for the three most recent years.

	20 <u>15</u>	20 <u>14</u>	20 <u>13</u>
a. Fatalities	<u>0</u>	<u>0</u>	<u>0</u>
b. OSHA recordable incidents	<u>0</u>	<u>0</u>	<u>0</u>
c. Lost work day incidents	<u>0</u>	<u>0</u>	<u>0</u>
d. Total lost work days	<u>0</u>	<u>0</u>	<u>0</u>
e. Total hours worked	<u>5591</u>	<u>2657</u>	<u>3157</u>

3. Please provide copies of the following upon award:

Check if Available

- | | |
|---|-------------------------------------|
| a. OSHA 300 logs for the most recent three years and current year-to-date | <input checked="" type="checkbox"/> |
| b. Verification of ERM from your insurance carrier | <input checked="" type="checkbox"/> |
| c. Injury/Illness Report | <input checked="" type="checkbox"/> |
| d. Complete written Safety Program | <input checked="" type="checkbox"/> |
| e. Training Plans | <input checked="" type="checkbox"/> |
| f. Training Certificates for Employees | <input checked="" type="checkbox"/> |
| g. Emergency Response Training | <input checked="" type="checkbox"/> |

Primary contractors must submit all information requested on No. 3 (a-g) to the District. Subcontractors must submit information (a-c) to the District and d-g to the primary contractor and should be made available to the District upon request.

4. Company Safety Contact

a. Name: Valli Cox
 b. Phone: 619-964-4074

SAFETY PROGRAM

1. SAFETY PROGRAM DOCUMENTATION

Circle One

- a. Do you have a written safety program manual? Yes No
Last revision date 2/17/16
- b. Do you have a written safety field manual? Yes No
- c. Are all workers given a booklet that contains work rules, responsibilities and other appropriate information? Yes No

2. POLICY AND MANAGEMENT SUPPORT

- a. Do you have a safety policy statement from an officer of the company? Yes No
- b. Do you have a disciplinary process for enforcement of your safety program? Yes No
- c. Does management set corporate safety goals? Yes No
- d. Does executive management review:
- Accident reports?
 - Inspection reports?
 - Safety statistics?
- e. Do you safety pre-qualify subcontractors? Yes No
- f. Do you have a written policy on accident reporting and investigation? Yes No
- g. Do you have a light-duty, return-to-work policy? Yes No
- h. Is safety part of your supervisor's performance evaluation? Yes No
- i. Do you have a personal protective equipment (PPE) policy? Yes No
- j. Do you have a written substance abuse program? Yes No
If yes, check which apply:
- | | |
|--|--|
| <input checked="" type="checkbox"/> Pre-employment testing | <input checked="" type="checkbox"/> Return to duty testing |
| <input checked="" type="checkbox"/> Random testing | <input checked="" type="checkbox"/> Disciplinary process |
| <input checked="" type="checkbox"/> Reasonable cause testing | <input checked="" type="checkbox"/> Alcohol Testing |
| <input checked="" type="checkbox"/> Post accident testing | <input type="checkbox"/> National Institute on Drug Abuse |
| <input checked="" type="checkbox"/> Panel Screen | |
- k. Does each level of management have assigned safety duties and responsibilities? Yes No

3. TRAINING AND ORIENTATION

Circle One

- a. Do you conduct safety orientation training for each employee? Yes No
- b. Do you conduct site safety orientation for every person new to the job? Yes No
- c. Does your safety program require safety training meetings for each supervisor (foreman and above)? How often?
 Weekly Monthly Quarterly Annually Yes No
- d. Do you hold tool box/tailgate safety meetings focused on your specific work operations/exposures?
 Weekly Daily Yes No
- e. Do you require equipment operation/certification training? Yes No

4. ADMINISTRATION AND PROCEDURES

- a. Does your written safety program address administrative procedures? Yes No

If yes, check which apply:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Pre-project/task planning | <input checked="" type="checkbox"/> Emergency procedures |
| <input checked="" type="checkbox"/> Record keeping | <input checked="" type="checkbox"/> Audits/inspections |
| <input checked="" type="checkbox"/> Safety committees | <input checked="" type="checkbox"/> Accident investigations/reporting |
| <input checked="" type="checkbox"/> HAZCOM | <input checked="" type="checkbox"/> Training documentation |
| <input checked="" type="checkbox"/> Substance abuse prevention | <input checked="" type="checkbox"/> Hazardous work permits |
| <input checked="" type="checkbox"/> Return-to work | <input checked="" type="checkbox"/> Subcontractor prequalification |

- b. Do you have project safety committees? Yes No
- c. Do you conduct job site safety inspections? How often?
 Daily Weekly Monthly Yes No
- d. Do these inspections include a routine safety inspection of equipment (e.g. scaffold, ladders, fire extinguishers, etc.)? Yes No
- e. Do you investigate accidents? How are they reported?
 Total company By superintendent
 By project By project manager
 By foreman In accordance with OSHA
- f. Do you discuss safety at all preconstruction and progress meetings? Yes No
- g. Do you perform rigging and lifting checks prior to lifting? Yes No
 For personnel For equipment Heavy lifts (more than 10,000 lbs)

5. WORK RULES

Circle One

a. Do you periodically update work rules?

Yes No

When was the last update? 6/1/16

b. What work practices are addressed by your work rules? Check all that apply.

- | | |
|--|---|
| <input checked="" type="checkbox"/> CPR/first aid | <input checked="" type="checkbox"/> Access-entrances/stairs |
| <input checked="" type="checkbox"/> Barricades, signs, and signals | <input checked="" type="checkbox"/> Respiratory protection |
| <input type="checkbox"/> Blasting | <input checked="" type="checkbox"/> Material handling/storage |
| <input checked="" type="checkbox"/> Communications | <input checked="" type="checkbox"/> Temporary heat |
| <input checked="" type="checkbox"/> Compressed air and gases | <input checked="" type="checkbox"/> Vehicle Safety |
| <input checked="" type="checkbox"/> Concrete work | <input checked="" type="checkbox"/> Traffic control |
| <input checked="" type="checkbox"/> Confined-space entry | <input checked="" type="checkbox"/> Site visitor escorting |
| <input checked="" type="checkbox"/> Cranes/rigging and hoisting | <input checked="" type="checkbox"/> Public protection |
| <input type="checkbox"/> Electrical grounding | <input checked="" type="checkbox"/> Equipment guards and grounding |
| <input checked="" type="checkbox"/> Environmental controls and Occupational health | <input checked="" type="checkbox"/> Monitoring Equipment |
| <input checked="" type="checkbox"/> Emergency procedures | <input checked="" type="checkbox"/> Flammable material handling/storage |
| <input checked="" type="checkbox"/> Fire protection and prevention | <input checked="" type="checkbox"/> Site sanitation |
| <input checked="" type="checkbox"/> Floor and wall openings | <input checked="" type="checkbox"/> Trenching and excavating |
| <input checked="" type="checkbox"/> Fall protection | <input checked="" type="checkbox"/> Lockout/Tagout |
| <input checked="" type="checkbox"/> Housekeeping | <input checked="" type="checkbox"/> Energized/pressurized equipment |
| <input checked="" type="checkbox"/> Ladders and scaffolds | <input checked="" type="checkbox"/> Personal protective equipment |
| <input checked="" type="checkbox"/> Mechanical equipment | <input checked="" type="checkbox"/> Tools, power and hand |
| <input checked="" type="checkbox"/> Welding and cutting (hot work) | <input type="checkbox"/> Electrical power lines |
| | <input type="checkbox"/> Other _____ |

6. OSHA INSPECTIONS

a. Have you been inspected by OSHA in the last three years?

Yes No

b. Were these inspections in response to complaints?

Yes No

c. Have you been cited as a result of these inspections?

Yes No

If yes, describe the citations:

NIA
