

LOW BID FORM OF BID

2H CONSTRUCTION, INC.
Name of Bidder (Firm Name)

10338701
Vendor Identification Number

SECTION 00 03 00

FORM OF BID TO BE USED BY BIDDERS

The undersigned proposes to furnish all materials, labor, and equipment required for the construction to complete the Harriman Building Renovation Project, in accordance with Drawings and Specifications 7248, including addenda thereto, if any, adopted by the Board of Supervisors, and on file in the office of the Board of Supervisors, as follows:

(1) LUMP SUM BID

The lump sum bid for the work, including Best Management Practices (BMP) and Construction and Demolition Debris Recycling requirements complete according to the Drawings and Specifications, will be:

(\$ 41,900,000)
Lump sum bid in figures

Forty one Million Nine Hundred Thousand
Lump sum bid in words
Dollars

(2) ALTERNATIVES (Per Section 01 23 00)

ADDITIVE ALTERNATE NO. 1:

PRE-ACTION AFS IN IDF ROOM.....\$ 65,000

DEDUCTIVE ALTERNATE NO. 2:

SITWORK WITHIN CENTRAL COURTYARD.....\$ 270,000

DEDUCTIVE ALTERNATE NO. 3:

SITWORK TO THE EAST
OF THE HARRIMAN BUILDING.....\$ 225,000

DEDUCTIVE ALTERNATE NO. 4:

SITWORK TO THE SOUTH
OF THE HARRIMAN BUILDING.....\$ 220,000

DEDUCTIVE ALTERNATE NO. 5:

EQUIPMENT ENCLOSURES TO
THE WEST OF THE HARRIMAN BUILDING.....\$ 540,000

DEDUCTIVE ALTERNATE NO. 6:

CLAY TILE ROOF TILE

REPLACEMENT IN LIEU OF SALVAGE.....\$ 80,000**DEDUCTIVE ALTERNATE NO. 7:**

REPLACEMENT WOOD WINDOWS

IN LIEU OF REPAIRING

THE EXISTING WOOD WINDOWS.....\$ Ø**ADDITIVE ALTERNATE NO. 8:**

INTERACTIVE DISPLAY REPLACEMENT

IN CONFERENCE ROOMS.....\$ 22,500**(2A) ALTERNATE TOTAL.....\$ 1,247,500****(3) EXTENDED OVERHEAD DAILY RATE**

The daily rate for the sum of the Contractor's field office and home office overhead applicable to this project, for each day of compensable delay will be:

(\$ 2,000)
Daily rate in figures

(Two Thousand Dollars)
Daily rate in words

(3A) Extended Overhead Daily Rate X 60 DAYS:

(\$ 120,000)
Daily rate x 60 Days in figures

(One Hundred Twenty Thousand Dollars)
Daily rate x 60 Days in words

(4) TOTAL LOW BID AMOUNT (To be used for evaluation of Low Bid)

(1) LUMP SUM BID.....\$ 41,900,000

(2A) TOTAL PRICE OF ALL ALTERNATES.....\$ 1,247,500

(3A) EXTENDED OVERHEAD DAILY RATE X 60....\$ 120,000

TOTAL (1) - (2A) + (3A).....\$ 40,772,500

(5) LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE:

The Local Small Business Enterprise Preference is provided by the County for purposes of bid evaluation only, as specified in Article 1.30 of Section 00 01 00. If

Bidder is a qualifying Local Small Business Enterprise, check "yes" in the box below. If non-qualifying, check "no" in the appropriate box.

Yes

☐

No

☒

(6) RECEIPT OF NOTICE TO BIDDERS: (IF APPLICABLE)

I hereby certify and declare that I have received, reviewed and incorporated the following Notice(s) to Bidders into my Bid:

- a. Notice to Bidders B, dated June 5, 2019
- b. Notice to Bidders C, dated June 6, 2019
- c. Notice to Bidders D, dated July 3, 2019
- d. Notice to Bidders E, dated July 11, 2019
- e. Notice to Bidders F, dated July 25, 2019
- f. Notice to Bidders G, dated August 5, 2019
- g. Notice to Bidders H, dated August 13, 2019
- h. Notice to Bidders I, dated August 21, 2019

Executed this day of AUGUST 23, 2019 (Month and Year)

By: _____

(Authorized Signature of a Principal Owner, Officer, or Manager)

SEAN R. HITCHCOCK - PRESIDENT

NOTE: Any alteration or addition to the Form of Bid may invalidate same. All blank spaces shall be filled out completely. Line out nonapplicable blanks. An incomplete form may invalidate bid. The County reserves the right to waive any informalities or to reject any or all bids or to accept any alternatives when called for.

I (We) certify that on 03/28/1997 20____, License No. 741856, license classification(s) A, B, was issued to me (us), in the name of 2H CONSTRUCTION, INC., by the Contractors' State License Board, pursuant to California Statutes of 1929, as amended, and that said license has not been revoked.

Firm Ownership Information
Check where applicable:

1. ☐ Minority-Owned
☐ Woman-Owned
☐ Disadvantaged-Owned
☐ Disabled Veteran-Owned
☒ Other

If minority-owned, indicate the appropriate category:

- ☐ African American
☐ Hispanic or Latino
☐ Asian/Pacific Islander
☐ Filipino
☐ American Indian/Alaskan Native

2. ☐ An individual
☒ A corporation. Name
state or territory of
Incorporation
CALIFORNIA
☐ A copartnership
☐ A joint venture

If a copartnership or joint venture, list names of individuals comprising same below

N/A

Date signed AUGUST 23, 20 19

Respectfully submitted,

Place SIGNAL HILL, CALIFORNIA
City and State

2H CONSTRUCTION, INC.
Firm Name (if applicable)


Bidder's address and telephone:

2653 WALNUT AVENUE
Number and Street

SIGNAL HILL, CALIFORNIA
City and State

562-424-5567
Telephone

562-424-5578


Signature

PRESIDENT
Title


Signature

SECRETARY

Fax

Title

SECTION 00 03 10

BEST MANAGEMENT PRACTICES (BMP) REQUIREMENTS

Best Management Practices (BMPs) shall be defined as any program, technology, process, siting criteria, operating method, measure or device which controls, prevents, removes, or reduces Storm Water pollution. The Contractor shall comply with the Los Angeles County Department of Public Works Construction Site Best Management Practices (BMP's) Manual, latest edition.

BMPs for contractor activities shall be continuously implemented throughout the year. BMPs for erosion and sediment control shall be implemented as required in Section 01 57 00. BMPs for erosion and sediment control shall also be implemented prior to the commencement of any contractor activity or construction operation.

The County, as a permittee, is subject to enforcement actions by the State Water Resources Control Board, Environmental Protection Agency, and private citizens. The County will assess the Contractor a penalty of \$1,000 for each calendar day that the Contractor has not fully implemented the BMPs specified for the Contract and/or is otherwise in noncompliance with these provisions in accordance with Section 01 57 00. In addition, the County will deduct from the final payment due the Contractor, the total amount of any fines levied on the County, plus legal and staff costs, as a result of the Contractor's lack of compliance with these provisions and/or less than complete implementation of the specified BMPs.

Full compensation for the implementation of BMPs, including the construction, deployment, maintenance, removal, and the furnishing of all necessary labor, equipment, and materials, shall be considered as included in the bid price of the total lump sum price bid in Section 00 03 00.

The lump sum bid for the IMPLEMENTATION OF BMPs for construction work according to Sections 01 00 00, 01 57 00, and 01 74 23 Specifications, will be:

(\$ <u>50,000</u>)	(<u>Fifty Thousand Dollars</u>)
BMP's lump sum bid in figures	BMP's lump sum bid in words

SECTION 00 03 11

CONSTRUCTION AND DEMOLITION DEBRIS RECYCLING REQUIREMENTS

Contractors working on any County projects that are estimated to generate at least ten tons or ten cubic yards of debris (whichever is less) shall submit a Construction and Demolition Recycling and Reuse Plan to the Environmental Programs Division of Public Works in accordance with Part 2.2 of Section 01 74 19.

Full compensation for complying with the Construction and Demolition Debris Recycling Requirements, including the construction, removal, and the furnishing of all necessary labor, equipment, and materials, shall be included in the lump sum price bid.

The lump sum bid for COMPLYING WITH THE CONSTRUCTION AND DEMOLITION DEBRIS RECYCLING REQUIREMENTS according to Section 01 74 19, will be:

(\$ 25,000) (Twenty Five Thousand Dollars)
Lump sum bid in figures Lump sum bid in words

2H CONSTRUCTION, INC.

Name of Bidder (Firm Name)

SECTION 00 03 12

INSURANCE REQUIREMENTS

The premium for the Builders Risk shall be included with the Lump Sum Bid, Section 00 03 00, and shall not be in addition to it.

Builders Risk:

Such coverage is required for this Project and shall supersede Section 00 07 00, Builder's Risk Course of Construction Insurance, Article 45, and shall:

1. Insure against damage from perils covered by the Causes-of-Loss Special Form (ISO form CP 10 30), and the perils of earthquake, flood, risk of transit loss, loss during storage (both onsite and offsite), and collapse during construction (without restricting collapse coverage to specified perils).
2. If Contractor's work involves testing air conditioning systems, boilers, pressure vessels, major machinery or major electrical panels, policy shall include coverage for such testing.
3. Be written on a completed-value basis and cover the entire value of the construction Project, including County-furnished materials and equipment, against loss or damage until completion and acceptance by the County.

The amount for Builders Risk according to Section 00 08 00 of the Specifications, will be:

(\$ 350,000)
Amount in figures

(Three Hundred Fifty Thousand Dollars)
Amount in words

SECTION 00 04 10

BID BOND

KNOW ALL PERSONS BY THESE PRESENTS:

That we, 2H Construction, Inc.
2653 Walnut Ave., Signal Hill, CA 90755 (Bidder and Address)

as Principal and Hartford Fire Insurance Company
One Pointe Drive 6th Floor, Brea, CA 92821 (Surety and Address)

as Surety, as held and firmly bound unto the County of Los Angeles, hereinafter called the County, in the penal sum of ten percent (10%) of the total amount of the bid of the Principal above named, submitted by said Principal to the County, for the work described below, for the payment of which sum in lawful money of the United States, well and truly to be made, we bind ourselves, our heirs, executors, administrators, and successors, jointly and severally, firmly by these presents.

THE CONDITION of this obligation of such that:

WHEREAS, the Principal has submitted the above-mentioned Bid to the County, for certain construction specifically described as follows, for which bids are to be opened on _____

July 31, 2019 for Harriman Building Renovation Spec 7248
(date of bid opening) (description of work, including location, as it appears on the bid)
7601 Imperial Hwy, Downey, CA 90242

Now, THEREFORE, if the aforesaid Principal is awarded the contract and, within the time and manner required under the bidding or contract documents, after prescribed forms are presented to him for signature, enters into written contract, in the prescribed form, in accordance with the bids, and files the two bonds with the County, one to guarantee faithful performance and the other to guarantee payment for labor and materials, as required by the law, then this obligation shall be null and void; otherwise, it shall be and remain in full force and virtue.

In the event suit is brought upon this bond by the County and judgment is recovered, the Surety shall pay all costs incurred by the County in such suit, including a reasonable attorney's fee to be fixed by the court.

IN WITNESS WHEREOF, we have hereunto set our hands and seals on this 16th day of July, 2019.

(SEAL)

(SEAL)

2H Construction, Inc.
Principal 

Signature and Title Sean Hitchcock, President
Hartford Fire Insurance Company

Surety 
Signature and Title Emily Preciado, Attorney-In-Fact

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

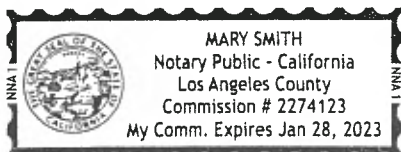
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
 County of Los Angeles)
 On 7/16/19 before me, Mary Smith, Notary Public,
Date Here Insert Name and Title of the Officer
 personally appeared Emily Preciado
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 Mary Smith
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: _____
<input type="checkbox"/> Corporate Officer — Title(s): _____	<input type="checkbox"/> Corporate Officer — Title(s): _____
<input type="checkbox"/> Partner — <input type="checkbox"/> Limited <input type="checkbox"/> General	<input type="checkbox"/> Partner — <input type="checkbox"/> Limited <input type="checkbox"/> General
<input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact	<input type="checkbox"/> Individual <input type="checkbox"/> Attorney in Fact
<input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator	<input type="checkbox"/> Trustee <input type="checkbox"/> Guardian or Conservator
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
Signer Is Representing: _____	Signer Is Representing: _____

POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD

BOND, T-12

One Hartford Plaza

Hartford, Connecticut 06155

Bond.Claims@thehartford.com

call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Agency Name: BOLTON & COMPANY

Agency Code: 72-183250

- | | |
|-------------------------------------|------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> | Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut |
| <input checked="" type="checkbox"/> | Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana |
| <input checked="" type="checkbox"/> | Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut |
| <input type="checkbox"/> | Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut |
| <input type="checkbox"/> | Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana |
| <input type="checkbox"/> | Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois |
| <input type="checkbox"/> | Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana |
| <input type="checkbox"/> | Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida |

having their home office in Hartford, Connecticut, (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, **up to the amount of Unlimited** :

Steven L. Brockmeyer, Barbara Doerning, Emily Preciado, Mary Smith, Ronald C. Wanglin of PASADENA, California

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by ☒ , and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

In Witness Whereof, and as authorized by a Resolution of the Board of Directors of the Companies on May 6, 2015 the Companies have caused these presents to be signed by its Senior Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



John Gray

John Gray, Assistant Secretary

M. Ross Fisher

M. Ross Fisher, Senior Vice President

STATE OF CONNECTICUT

COUNTY OF HARTFORD

ss. Hartford

On this 5th day of January, 2018, before me personally came M. Ross Fisher, to me known, who being by me duly sworn, did depose and say: that he resides in the County of Hartford, State of Connecticut; that he is the Senior Vice President of the Companies, the corporations described in and which executed the above instrument; that he knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that he signed his name thereto by like authority.



CERTIFICATE

Kathleen T. Maynard

Kathleen T. Maynard

Notary Public

My Commission Expires July 31, 2021

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of July 16, 2019

Signed and sealed at the City of Hartford.



Kevin Heckman

Kevin Heckman, Assistant Vice President

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

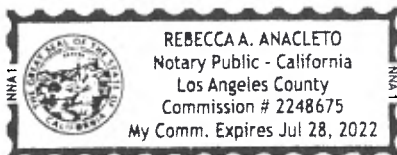
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
 County of Los Angeles)
 On 07/22/19 before me, Rebecca A. Anacleto, Notary Public
 Date Here Insert Name and Title of the Officer
 personally appeared Sean R. Hitchcock
 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 [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: _____

SECTION 00 04 30

SUBCONTRACTOR LISTING AND SUBCONTRACTING

Prime Contractors shall be governed by the provisions of Sections 4100 to 4113, inclusive, of the Public Contract Code of the State of California and shall set forth in their bids, on forms provided for same, the name and California contractor license number of each Subcontractor who will perform work or labor or render service to the prime Contractor in or about the construction of the work or improvement in amount in excess of one-half (1/2) of one percent (1%) of the prime Contractor's total bid.

Failure by a prime Contractor to specify a Subcontractor for any portion of the work in excess of one-half (1/2) of one percent (1%) of the total bid constitutes an agreement between the prime Contractor and the County that he is fully qualified to perform that portion of the work himself and will perform that portion of the work himself.

No prime Contractor whose bid is accepted shall substitute any person as subcontractor in place of the subcontractor listed, nor shall any subcontract be assigned or transferred except as provided for in the above Sections of the Public Contract Code of the State of California.

Prime Contractors in violation of any of the provisions of Sections 4100 to 4113, inclusive, of the Public Contract Code of the State of California are subject to possible cancellation of contract and monetary penalties as well as disciplinary action by the Contractors' State License Board.

LIST OF SUBCONTRACTORS

The following is a list of the proposed subcontractors to whom I (we) propose to sublet a portion or portions of this work.

<u>NAME</u>	<u>LICENSE NUMBER</u>	<u>LOCATION OF THE PLACE OF BUSINESS</u>	<u>CLASSIFICATION OF WORK TO BE EXECUTED</u>	<u>DIR REGISTRATION NUMBER</u>
<u>Tri-SPAN</u>	<u>611639</u>	<u>Brea</u>	<u>Demolition</u>	<u>1000012420</u>
<u>Tri-Span</u>	<u>611639</u>	<u>Brea</u>	<u>Abatement</u>	<u>1000012420</u>
<u>Tri-Span</u>	<u>611639</u>	<u>Brea</u>	<u>Sitework</u>	<u>1000012420</u>
<u>McGuire</u>	<u>818119</u>	<u>Fontana</u>	<u>Concrete</u>	<u>1000006002</u>

<u>NAME</u>	<u>LICENSE NUMBER</u>	<u>LOCATION OF THE PLACE OF BUSINESS</u>	<u>CLASSIFICATION OF WORK TO BE EXECUTED</u>	<u>DIR REGISTRATION NUMBER</u>
CW	7141736	Long Beach	Steel	1000029589
Trispan	611639	Brea	Rough Carpentry	100002420
Golden State	9410408	Carson	Roofing	1000001424
Tre-span	611639	Brea	Doors/Glazing	1000012420
Platinum	870864	Stanton	Drywall	1000006755
Long Beach ^{Architects}	988060	Bell ^{Gardens} Stanh	Acoustical	1000009378
Southland	864931	Tustin	Flooring	1000013745
Apollo	1001550	Los Angeles	Painting	1000026486
GMS	672856	San Dimas	Elevator	1000008514
Chase	951294	Glendale	Fire Sprinkler	1000029574
Boudreau	791842	Corona	Site Utilities	1000003803
Pro Craft	467234	Redlands	Plumbing	1000001106
ACCO	120696	Glendale	HVAC	1000000546
RA	669126	Duarte	Electrical	1000001618
Quality First	876139	Anaheim	CASEWORK	1000015895

List of Subcontractors
00 04 30 - 2

SECTION 00 04 38

Request for Local Small Business Enterprise (SBE) Preference Program Consideration and Community Business Enterprise (CBE) Firm/Organization Information Form

INSTRUCTIONS: All proposers/bidders responding to this solicitation must complete and return this form for proper consideration of the proposal/bid.

I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM:

FIRM NAME: 2H CONSTRUCTION, INC.

My County (WebVen) Vendor Number: 10338701

- ☒ I AM NOT A Local SBE certified by the State of California or certified by SBA for a Federal funded project and the County of Los Angeles Office of Small Business, as of the date of this proposal/bid submission.
- ☐ I AM
- ☐ As an eligible Local SBE, I request this proposal/bid be considered for the Local SBE Preference.

II. **FIRM/ORGANIZATION INFORMATION:** The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race, ethnicity, color, religion, sex, national origin, age, sexual orientation, or disability.

Business Structure: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Non-Profit <input type="checkbox"/> Franchise <input type="checkbox"/> Other (Please Specify) _____						
Total Number of Employees (including owners): <u>74</u>						
Race/Ethnic Composition of Firm: Please distribute the above total number of individuals into the following categories:						
Race/Ethnic Composition	Owners/Partners/ Associate Partners		Managers		Staff	
	Male	Female	Male	Female	Male	Female
Black/African American					2	
Hispanic/Latino					24	3
Asian or Pacific Islander			2			
American Indian						
Filipino						
White	1		4		33	5

III. **PERCENTAGE OF OWNERSHIP IN FIRM:** Please indicate by percentage (%) how ownership of the firm is distributed:

	Black/African American	Hispanic/Latino	Asian or Pacific Islander	American Indian	Filipino	White
Male	%	%	%	%	%	100 %
Female	%	%	%	%	%	%

IV. **CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES:**
If your firm is currently certified as a minority, women, disadvantaged or disabled veteran-owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use back of form, if necessary.)

Agency Name	Minority	Women	Dis- advantaged	Disabled Veteran	Expiration Date

V. **DECLARATION:** I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Print Authorized Name SEAN R. HITCHCOCK	Authorized Signature 	Title PRESIDENT	Date 07/19/19
---------------------------------------------------	--------------------------------------------------------------------------------------------------------------	---------------------------	-------------------------