



MARK PESTRELLA, Director

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

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ADDRESS ALL CORRESPONDENCE TO:
P.O. BOX 1460
ALHAMBRA, CALIFORNIA 91802-1460

IN REPLY PLEASE

REFER TO FILE: **BRC-2**

February 19, 2026

**NOTICE TO BIDDERS "D"
WHITTIER NARROWS RECREATION
AREA SPLASH PAD PROJECT
PROJECT ID NUMBER: BRC0000608
SPECS NO. 7835**

This Notice to Bidders "D" clarifies certain portions of the Project Manual and forms a part of the contract documents.

PROJECT MANUAL

1. Refer to Section 00 03 00, Form of Bid to Be Used by Bidders. **Delete** in its entirety and **Replace** with the following Section 00 03 00, Form of Bid to Be Used by Bidders (Attachment A).
2. Qualifications in Form 00 04 00 – Attestation of Qualifications shall supersede any qualifications mentioned throughout the bid documents and plans.

“General Contractor or it’s Subcontractor (Contractor Licensee, RME/RMO) has, in the last four (4) years, constructed at least two (2) commercially designed municipal and public-use Spray Grounds.”

Please notify your subcontractors to this effect.

If you have any questions, please contact Mr. Michael Sanchez, at (626) 300-2085 or misanchez@pw.lacounty.gov.

Very truly yours,
MARK PESTRELLA, PE
Director of Public Works

Brian Soria

for SOO KIM
Assistant Deputy Director
Business Relations and Contracts Division

SK:ms

ATTACHMENT A

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 Whittier Narrows Recreation Area Splash Pad Project, in accordance with Drawings and Specifications 7835, including addenda thereto, if any, adopted by the Board of Supervisors, and on file in the office of the Board of Supervisors, as follows:

The lowest bid price shall be determined by adding the following items: Lump Sum Bid in Words (1) + Bid Alternate (2) + [Extended Overhead Daily Rate (3) x Multiplied by 30 days] = Total Lump Sum Bid. Preference as stated in Section 00 01 00, 1.30, will be applied to the Total Lump Sum Bid, if applicable, to determine the final total bid amount.

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:

(\$ _____) (_____)
Lump sum bid in figures Lump sum bid in words

2. BID ALTERNATE 1:

The amount to be added to the Lump Sum Bid for inclusion of the work of Additive Alternate 1 (Reference 01 23 00, 1.02 and Appendix B, G0.40 for more information):

(\$ _____) (_____)
Lump sum bid in figures Lump sum bid in words

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:

(\$ _____) (_____)
Daily rate in figures Daily rate in words

4. COUNTY PROGRAM PREFERENCE:

The Local Small Business Enterprise Program 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. Bidder shall be certified by the County of Los Angeles Department of Economic Opportunity at time of bid. If non-qualifying, check "no" in the appropriate box.

LSBE Certification for Non-Federally Funded County Solicitations

Yes

No

5. RECEIPT OF NOTICE TO BIDDERS: (IF APPLICABLE)

I hereby certify and declare that I have received, reviewed and incorporated Notice to Bidders "A" dated January 29, 2026, Notice to Bidders "B" dated February 12, 2026, Notices to Bidders "C" and "D" dated February 19, 2026, into my Bid.

Executed this day of _____ (Month and Year)

By: _____

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

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 _____, 20____, License No. _____, license classification(s) _____, was issued to me (us), in the name of _____, 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
- LGBTQQ-Owned

- 2. An individual
- A corporation. Name
state or territory of
Incorporation

- A copartnership
- A joint venture

Race/Ethnic Composition

For statistical purposes only.

- Black/African American
- Hispanic/Latino
- Asian or Pacific Islander
- Native Americans
- Subcontinent Asian
- White

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

Date signed _____, 20____

Respectfully submitted,

Place _____
City and State

Firm Name (if applicable)

Bidder's address, E-mail address, and telephone:

Number and Street

Signature and Print Name

City and State Zip Code

Title and E-mail Address

Telephone

Signature and Print Name

Fax

Title and E-mail Address