

Low Bidder

DISTRICT-COUNTY-ROUTE 02 - SHA,TEH - 5,44,273 -VAR

CONTRACT NO. 02-3J3304

TOTAL BID \$2,837,770.90

BID OPENING DATE 04/10/2025

BIDDER'S NAME McCuen Construction, Inc

DVBE PRIME CONTRACTOR CERTIFICATION¹ N/A

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CONSTRUCTION
CONTRACT AWARDS

Bid Item Number	Description of Work to Be Subcontracted to DVBE or Materials to Be Supplied by DVBE ²	For Caltrans Only	DVBE ³ (Name, Telephone No., and Certification No.)	\$ Amount
1, 9, 10, 30	LCP (partial), Job Site Management (partial), WPCP, Public Safety Plan		SapperWest 707-317-0002 1390180	\$18,345.00
20, 21, 22, 23, 24, 31	Joint Seals (supply), Rapid Setting Concrete (supply)		USC Supply 530-273-1639 1568820	\$72,030.00 ** This number is 60% of total cost to USC Supply for supply
Names of first tier DVBE subcontractors and their items of work listed must be consistent with the names and items of work in the Subcontractor List (Pub Cont Code § 4100 et seq.) submitted with the bid.			Total Claimed Participation	\$ <u>90,375</u> <u>3.18</u> %

Identify second and lower tier subcontractors on this form.

- DVBE prime contractors must enter their DVBE reference number or their DBA name as listed with Department of General Services (DVBE prime contractors are credited with 100% DVBE participation and need not complete the above table).
- If 100% of an item is not performed or supplied by the DVBE's, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE. Describe the "commercially useful function" (as defined by 2 CCR 1896.71) performed by the DVBE.
- The bidder's DVBE information shall include the names of DVBE firms and/or DVBE joint venture partners to be used, that will participate, with a complete description of work or supplies to be provided by each, the dollar value of each DVBE transaction, and a written confirmation on company letterhead from the DVBE that is participating in the contract. A copy of the DVBE's quote (on the DVBE's Letterhead) will serve as written confirmation that the DVBE is participating in the contract.

Will Broad

Signature of Bidder

04/10/2025

Date

(530) 412-1288

(Area Code) Telephone Number

William Broad

Contact Person

(Type or Print)

DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS

DGS PD 843 (Rev. 9/2019)

Formerly STD. 843

Instructions: The disabled veteran (DV) owner(s) and DV manager(s) of the Disabled Veteran Business Enterprise (DVBE) must complete this declaration when a DVBE contractor or subcontractor will provide materials, supplies, services or equipment [Military and Veterans Code Section 999.2]. Violations are misdemeanors and punishable by imprisonment or fine and violators are liable for civil penalties. All signatures are made under penalty of perjury.

SECTION 1Name of certified DVBE: United Synergy Corporation dba USC Supply DVBE Ref. Number: 1568820Description (materials/supplies/services/equipment proposed): Construction MaterialsSolicitation/Contract Number: 02-3J3304

SCPRS Ref. Number: _____

(FOR STATE USE ONLY)

SECTION 2**APPLIES TO ALL DVBEs. Check only one box in Section 2 and provide original signatures.**

- ☒ I (we) declare that the DVBE is not a broker or agent, as defined in Military and Veterans Code Section 999.2 (b), of materials, supplies, services or equipment listed above. Also, complete Section 3 below if renting equipment.
- ☐ Pursuant to Military and Veterans Code Section 999.2 (f), I (we) declare that the DVBE is a broker or agent for the principal(s) listed below or on an attached sheet(s). (Pursuant to Military and Veterans Code 999.2 (e), State funds expended for equipment rented from equipment brokers pursuant to contracts awarded under this section shall not be credited toward the 3-percent DVBE participation goal.)

All DV owners and managers of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

Edmond Rossovich

(Printed Name of DV Owner/Manager)

(Signature of DV Owner/ Manager)

04/10/2025

(Date Signed)

(Printed Name of DV Owner/Manager)

(Signature of DV Owner/Manager)

(Date Signed)

Firm/Principal for whom the DVBE is acting as a broker or agent:

(If more than one firm, list on extra sheets.)

(Print or Type Name)

Firm/Principal Phone: _____

Address: _____

SECTION 3**APPLIES TO ALL DVBEs THAT RENT EQUIPMENT AND DECLARE THE DVBE IS NOT A BROKER.**

- ☒ Pursuant to Military and Veterans Code Section 999.2 (c), (d) and (g), I am (we are) the DV(s) with at least 51% ownership of the DVBE, or a DV manager(s) of the DVBE. The DVBE maintains certification requirements in accordance with Military and Veterans Code Section 999 et. seq.
- ☐ The undersigned owner(s) own(s) at least 51% of the quantity and value of each piece of equipment that will be rented for use in the contract identified above. I (we), the DV owners of the equipment, have submitted to the administering agency my (our) personal federal tax return(s) at time of certification and annually thereafter as defined in Military and Veterans Code 999.2, subsections (c) and (g). Failure by the disabled veteran equipment owner(s) to submit their personal federal tax return(s) to the administering agency as defined in Military and Veterans Code 999.2, subsections (c) and (g), will result in the DVBE being deemed an equipment broker.

Disabled Veteran Owner(s) of the DVBE (attach additional pages with signature blocks for each person to sign):

(Printed Name)

(Signature)

(Date Signed)

(Address of Owner)

(Telephone)

(Tax Identification Number of Owner)

Disabled Veteran Manager(s) of the DVBE (attach additional pages with sufficient signature blocks for each person to sign):

(Printed Name of DV Manager)

(Signature of DV Manager)

(Date Signed)

Page ____ of ____

PRINT**CLEAR**