

Second Bidder

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION
SMALL BUSINESS ENTERPRISE - COMMITMENT
 OCR-SBE 01 (REV 01/2024)

PAGE 1 OF 4

RECEIVED
 CALTRANS

2025 MAY -5 A 11: 26

CONTRACT NUMBER 04-0X6304	BID AMOUNT \$1,561,980.40	BID OPENING DATE 5/1/2025
BIDDER NAME Interstate Civil Construction		
SMALL BUSINESS BIDDER CERTIFICATION NUMBER 2023604	<input type="checkbox"/> Not applicable	
CONTRACT SBE PARTICIPATION GOAL REQUIREMENT 5 %	TOTAL NUMBER OF ALL SUBCONTRACTS 3	CONSTRUCTION CONTRACT AWARDS
SBE PARTICIPATION GOAL REQUIREMENT COMMITMENT 89 %	TOTAL AMOUNT OF ALL SUBCONTRACTS \$164,542.88	

SBE PARTICIPATION GOAL REQUIREMENT COMMITMENTS

Bid Item Number	Item of Work ^{1,2}	Percentage of Bid Amount	Amount ³ (\$)
	BID ITEM DESCRIPTION		
	SMALL BUSINESS NAME		
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS		
	BID ITEM DESCRIPTION		
	SMALL BUSINESS NAME		
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS		
	BID ITEM DESCRIPTION		
	SMALL BUSINESS NAME		
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS		
	BID ITEM DESCRIPTION		
	SMALL BUSINESS NAME		
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS		
TOTAL COMMITMENT FOR SBE PARTICIPATION GOAL REQUIREMENT \$			

¹The names of the 1st tier small business subcontractors and items of work must be consistent with the Subcontractor List (Pub Cont Code § 4100 et seq.).

²If 100% of an item is not to be performed or furnished by the small business, describe the portion of the item to be performed or furnished.

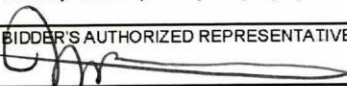
³Attach written confirmation and quotes from each small business shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

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

SMALL BUSINESS ENTERPRISE - COMMITMENT

OCR-SBE 01 (REV 01/2024)

CONTRACT NUMBER 04-0X6304		BID AMOUNT \$1,561,980.40	BID OPENING DATE 5/1/2025
BIDDER NAME Interstate Civil Construction			
SMALL BUSINESS ENTERPRISE INFORMATION			
SMALL BUSINESS NAME Interstate Civil Construction		SMALL BUSINESS CERTIFICATION NUMBER 2023604	
SMALL BUSINESS ADDRESS PO Box 2819 Wrightwood, CA 92397		SMALL BUSINESS REPRESENTATIVE NAME Mark Bates	
		SMALL BUSINESS PHONE NUMBER 760-281-0188	
		SMALL BUSINESS EMAIL ADDRESS mark@Interstate-Inc.com	
SMALL BUSINESS NAME		SMALL BUSINESS CERTIFICATION NUMBER	
SMALL BUSINESS ADDRESS		SMALL BUSINESS REPRESENTATIVE NAME	
		SMALL BUSINESS PHONE NUMBER	
		SMALL BUSINESS EMAIL ADDRESS	
SMALL BUSINESS NAME		SMALL BUSINESS CERTIFICATION NUMBER	
SMALL BUSINESS ADDRESS		SMALL BUSINESS REPRESENTATIVE NAME	
		SMALL BUSINESS PHONE NUMBER	
		SMALL BUSINESS EMAIL ADDRESS	
BIDDER'S SBE PARTICIPATION GOAL REQUIREMENT CERTIFICATION			
<p>As an authorized representative of the bidder, if the bidder is awarded the contract, the bidder is committed to use the small businesses shown on this form to meet the contract's SBE participation goal requirement. The work to be performed in fulfillment of the contract requirements will be Commercially Useful Function (CUF) compliant in accordance with the requirements in Government Code section 14837, subdivision (d)(4).</p> <p>I certify under penalty of perjury that the foregoing is true and correct.</p>			
BIDDER'S AUTHORIZED REPRESENTATIVE SIGNATURE 		BIDDER'S AUTHORIZED REPRESENTATIVE PRINTED NAME Mark Bates	
DATE 5/1/2025		CONTACT PERSON NAME Mark Bates	
EMAIL ADDRESS CONTACT PERSON mark@Interstate-Inc.com		PHONE NUMBER CONTACT PERSON 760-281-0188	
<p>Attachments: Small Business Enterprise - Confirmation (OCR-SBE-02) form from each small business shown.</p> <p><input type="checkbox"/> Small Business Enterprise - Confirmation (OCR-SBE-02) form from each small business</p> <p><input type="checkbox"/> shown. Quote from each small business shown.</p>			

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

SMALL BUSINESS ENTERPRISE - COMMITMENT INSTRUCTIONS

OCR-SBE 01 (REV 01/2024)

GENERAL INFORMATION

This form is used by bidders to provide SBE commitment documentation based on SBE work, services, or materials. These SBE commitments are used for determining the percentage of SBE participation towards meeting the contract's SBE participation goal requirement.

FORM

- **CONTRACT NUMBER:** Enter the project contract number.
- **BID AMOUNT:** Enter the total amount bid on the contract.
- **BID OPENING DATE:** Enter the contract bid opening date.
- **BIDDER NAME:** Enter the name of the contractor bidding the contract.
- **SMALL BUSINESS BIDDER CERTIFICATION NUMBER:** If the bidder is a small business, enter the small business certification number issued by the Department of General Services, Office of Small Business and DVBE Services as either a small business or a small business for the purpose of public works. If the bidder is not a small business check the box for "Not Applicable."
- **CONTRACT SBE PARTICIPATION GOAL REQUIREMENT %:** Enter the contract's SBE participation goal requirement from the contract bid book.
- **SBE PARTICIPATION GOAL REQUIREMENT COMMITMENT %:** Calculate the commitment for SBE participation by dividing the "TOTAL COMMITMENT AMOUNT FOR SBE PARTICIPATION GOAL REQUIREMENT" by the "CONTRACT BID AMOUNT" and enter the calculated percentage.
- **TOTAL NUMBER OF ALL SUBCONTRACTS:** Enter the total number of subcontracts including small business and non-small business.
- **TOTAL AMOUNT OF ALL SUBCONTRACTS:** Enter the total dollar amount of subcontracts including small business and non-small business.

SBE PARTICIPATION GOAL REQUIREMENT COMMITMENT

Show all small business firms being claimed for credit, regardless of tier. Attach written confirmation from each small business shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to. For a certified small business prime contractor, identify the self-performed work.

For each item of work on which the small business will participate, provide the following information:

- **BID ITEM NUMBER:** Enter the number of the bid item as shown on the contract.
- **BID ITEM DESCRIPTION:** Enter the bid item description as shown on the contract.
- **PERCENTAGE OF BID AMOUNT:** Enter the percentage of the bid amount that the small business will perform or furnish materials.
- **AMOUNT:** Enter the dollar amount of the work, services, or materials furnished by the small business.
- **SMALL BUSINESS NAME:** Enter the name of the small business performing work, services, or materials.
- **DESCRIPTION OF WORK, SERVICES, OR MATERIALS:** If 100% of an item is not to be performed or furnished by the small business, describe the portion of the item to be performed or furnished.
- **TOTAL COMMITMENT FOR SBE PARTICIPATION GOAL REQUIREMENT:** Calculate the total dollar amount of work, services, or materials furnished by the committed small businesses.

SMALL BUSINESS ENTERPRISE INFORMATION

For each small business that will perform work, services, or materials provide the following information:

- **SMALL BUSINESS NAME:** Enter the name of the small business performing work, services, or materials.
- **SMALL BUSINESS CERTIFICATION NUMBER:** Enter the small business certification number issued by the Department of General Services, Office of Small Business and DVBE Services as either a small business or a small business for the purpose of public works.
- **SMALL BUSINESS ADDRESS:** Enter the business address of the small business.
- **SMALL BUSINESS REPRESENTATIVE NAME:** Enter the name of the small business representative.
- **SMALL BUSINESS PHONE NUMBER:** Enter the phone number of the small business representative.
- **SMALL BUSINESS EMAIL ADDRESS:** Enter email address for small business representative.

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

SMALL BUSINESS ENTERPRISES-COMMITMENT INSTRUCTIONS
OCR-SBE 01 (REV 01/2024)

BIDDER'S SBE PARTICIPATION GOAL REQUIREMENT CERTIFICATION

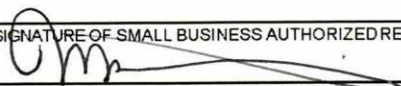
- **BIDDER'S AUTHORIZED REPRESENTATIVE SIGNATURE:** Signature of bidder authorized representative.
- **BIDDER'S AUTHORIZED REPRESENTATIVE PRINTED NAME:** Printed name of bidder's authorized representative.
- **DATE:** Date bidder representative signed the form.
- **CONTACT PERSON NAME:** Print the name of the person that should be contacted for questions on the completed form.
- **EMAIL ADDRESS CONTACT PERSON:** Enter the email address of the contact person.
- **PHONE NUMBER CONTACT PERSON:** Enter the phone number of the contact person.
- **ATTACHMENTS:** Attach SMALL BUSINESS ENTERPRISE - Confirmation (OCR-SBE-02) form and price quote from each small business shown on this form. Failure to submit a signed Small Business Enterprise - Confirmation form and copy of the small business quote may result in disallowance of the small business's participation in meeting the contract's SBE participation goal requirement percentage.

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

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION
SMALL BUSINESS ENTERPRISE - CONFIRMATION
 OCR-SBE 02 (REV/01/2024)

PAGE 1 OF 2

CONTRACT NUMBER 04-0X6304		DATE 5/1/2025
NAME OF SMALL BUSINESS Interstate Civil Construction		SMALL BUSINESS CERTIFICATION NUMBER 2023604
NAME OF SMALL BUSINESS REPRESENTATIVE Mark Bates		
NAME OF BIDDER Interstate Civil Construction		NAME OF BIDDER REPRESENTATIVE Mark Bates
SMALL BUSINESS ENTERPRISE CONFIRMATION		
Bid Item Number	Item of Work ¹	Amount (\$)
1-14	BID ITEM DESCRIPTION All Bid Items	\$595,240.40
19-20	DESCRIPTION OF WORK, SERVICES, OR MATERIALS TO BE PROVIDED Performing all work	
15	BID ITEM DESCRIPTION Individual Slab Replacement	\$792,287.12
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS TO BE PROVIDED Individual Slab Replacement	
	BID ITEM DESCRIPTION	
	DESCRIPTION OF WORK, SERVICES, OR MATERIALS TO BE PROVIDED	
TOTAL \$		1,387,527.52
¹ If 100% of an item is not to be performed or furnished by the SBE, describe the portion of the item to be performed or furnished.		
SMALL BUSINESS ENTERPRISE CERTIFICATION		
As an authorized representative of a certified small business, I confirm that my business was contacted by the bidder shown above regarding the contract shown above. If the bidder is awarded the contract, my business will enter into a contractual agreement with the bidder or prime contractor to perform the type and dollar amount of work shown on the Small Business Enterprise - Commitment form. The work to be performed in fulfillment of the contract requirements will be Commercially Useful Function (CUF) compliant in accordance with the requirements in Government Code section 14837, subdivision (d)(4). I certify under penalty of perjury that the foregoing is true and correct.		
SIGNATURE OF SMALL BUSINESS AUTHORIZED REPRESENTATIVE 		PRINTED NAME OF SMALL BUSINESS AUTHORIZED REPRESENTATIVE Mark Bates
TITLE OF SMALL BUSINESS AUTHORIZED REPRESENTATIVE President		DATE 5/1/2025

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

SMALL BUSINESS ENTERPRISE - CONFIRMATION INSTRUCTIONS

OCR-SBE 02 (REV 01/2024)

GENERAL INFORMATION

This form is to provide confirmation documentation that a small business has committed to performing work, services, or materials if the bidder is awarded the contract.

FORM

- **CONTRACT NUMBER:** Enter the project's contract number.
- **DATE:** Enter the date the form was completed.
- **NAME OF SMALL BUSINESS:** Enter the name of the small business.
- **SMALL BUSINESS CERTIFICATION NUMBER:** Enter the small business certification number issued by the Department of General Services, Office of Small Business and DVBE Services as either a small business or a small business for the purpose of public works.
- **NAME OF SMALL BUSINESS REPRESENTATIVE:** Enter the name of the small business representative.
- **NAME OF BIDDER:** Enter the name of the prime contractor that is bidding the contract.
- **NAME OF BIDDER REPRESENTATIVE:** Enter the name of the bidder representative that contacted the small business for a bid quote.

SMALL BUSINESS ENTERPRISE CONFIRMATION

For each item of work on which the small business will participate, provide the following information:

- **BID ITEM NUMBER:** Enter the number of the bid item as shown on the contract.
- **BID ITEM DESCRIPTION:** Enter the bid item description as shown on the contract.
- **AMOUNT:** Enter the dollar amount of the work, services, or the value of the materials furnished by the small business.
- **DESCRIPTION OF WORK, SERVICES OR MATERIALS TO BE PROVIDED:** If 100% of an item is not to be performed or furnished by the small business, describe the portion of the item to be performed or furnished.
- **TOTAL:** Provide the total dollar amount of work, services, or materials to be furnished by the small business.

SMALL BUSINESS ENTERPRISE CERTIFICATION

- **SIGNATURE OF SBE AUTHORIZED REPRESENTATIVE:** Signature of small business authorized representative.
- **PRINTED NAME OF SBE AUTHORIZED REPRESENTATIVE:** Printed name of small business authorized representative.
- **DATE:** Date small business representative signed the form

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