

-5 A II: 24

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

ADA Notice

OCR-SBE 01 (REV 01/2024)	001/11/11/11					R	ECFIVED
CONTRACT NUMBER BID AMOUNT			BID OPENING DATE				C)	LIBANG
BIDDER NAM	7-0Y1604 \$5,348,091.80 6/3/2025							
	te Civil Construction	า					2025 JUI	-5 A 11: 2
	NESS BIDDER CERTIFICATION 1		3604			ot applicable		1 11 2
CONTRACT SBE PARTICIPATION GOAL REQUIREMENT				TOTAL NUMBER OF	OF ALL SUBCONTRACTS		6 ONTR	TRUCTION
SBE PARTIC	IPATION GOAL REQUIREMENT	COMMITMENT	37%	TOTAL AMOUNT OF	ALL SUBCO	NTRACTS	\$2,683,672.69	CIAMARUS
	SBE PARTICIPAT	TION GOAL RE	EQUIRI	EMENT COMMIT	MENTS			
Bid Item Number		ork ^{1,2}	k ^{1,2}		Percentage of Bid Amount	Amount ³ (\$)	1	
	BIDITEM DESCRIPTION							
	SMALL BUSINESS NAME							
	DESCRIPTION OF WORK, SERV	CRIPTION OF WORK, SERVICES, OR MATERIALS						
	BIDITEM DESCRIPTION							
	SMALL BUSINESS NAME							
	DESCRIPTION OF WORK, SERV	SCRIPTION OF WORK, SERVICES, OR MATERIALS						
	BIDITEM DESCRIPTION							
	SMALL BUSINESS NAME							
	DESCRIPTION OF WORK, SERV	ICES, OR MATER						
	BIDITEM DESCRIPTION							
	SMALL BUSINESS NAME							
	DESCRIPTION OF WORK, SERV	ICES, OR MATER						
	MMITMENT FOR SBE PARTIC							
List (Pu	nes of the 1st tier small busi b Cont Code § 4100 et seq.),						
² If 100% be perf	of an item is not to be perfor ormed or furnished.	med or furnishe	d by the	e small business, d	escribe the	portion of the it	em to	
	ritten confirmation and quote					e participating i	in the	
contract	to perform the specific work	shown for the s	pecific a	amount agreed to.				

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 - COMMITMENT OCR-SBE 01 (REV 01/2024)

CONTRACT NUMBER BIDAMOUNT BID OPENING DATE 07-0Y1604 \$5,348,091.80 6/3/2025 BIDDER NAME Interstate Civil Construction SMALL BUSINESS ENTERPRISE INFORMATION SMALL BUSINESS NAME SMALL BUSINESS CERTIFICATION NUMBER Interstate Civil Construction 2023604 SMALL BUSINESS ADDRESS SMALL BUSINES REPRESENTATIVE NAME Mark Bates PO Box 2819 Wrightwood, CA 92397 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 REPRESENTITAIVE NAME SMALL BUSINESS PHONE NUMBER SMALL BUSINESS EMAIL ADDRESS SMALL BUSINESS NAME SMALL BUSINESS CERTIFICATION NUMBER SMALL BUSINESS ADDRESS SMALL BUSINESS REPRESENTIATIVE NAME SMALL BUSINESS PHONE NUMBER SMALL BUSINESS EMAIL ADDRESS BIDDER'S SBE PARTICIPATION GOAL REQUIREMENT CERTIFICATION 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) I certify under penalty of perjury that the foregoing is true and correct. BIDDER'S AUTHORIZED REPRESENTATIVE SIGNATURE BIDDER'S AUTHORIZED REPRESENTATIVE PRINTED NAME Mark Bates DATE CONTACT PERSON NAME

EMAIL ADDRESS CONTACT PERSON
mark@Interstate-Inc.com

Attachments: Small Business Enterprise - Confirmation (OCR-SBE-02) form from each small business shown.

Small Business Enterprise - Confirmation (OCR-SBE-02) form from each small business
Shown. Quote from each small business shown.

ADA Notice

6/3/2025

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 NStreet, MS-89, Sacramento, CA 95814

Mark Bates

PAGE 3 OF 4

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 RQUIREMENT" 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 dollaramount 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

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

PAGE 4 OF 4

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.

ADA Notice

- CONTACT PERSON NAME: Print the name of the person that should be contacted for questions on the completed form.
- EMAIL ADRESS 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.

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

PAGE 1 OF 2

OCR-SBE 02 (REV01/2024)

CONTRACT				DATE						
07-0Y160			6/3/2025							
	MALL BUSINESS			SMALL BUSINESS CERTIFICATION NUMBER						
Interstate	2023604									
	MALL BUSINESS RE	SPRESENTATIVE								
Mark Bat			NAME OF BIDDER REF	DECEMBATIVE						
Interstate	RESENTATIVE									
microtate		ALL BUSINESS ENTERPR	Mark Bates SECONFIRMATION	N						
Bid Item		ltem of		(82.0)	Amount					
Number			(\$)							
	BID ITEM DESCRIP									
2-10	All Bid Items	\$827,631.00								
13-14	DESCRIPTION OF V									
20	Dfi	II It 1000/								
	Performing all Items 100%									
	BID ITEM DESCRIP	** *** ***								
21	Individual Slab F	Replacement			\$1,132,299.20					
	DESCRIPTION OF V									
	Individual Slab R	teplacement								
		1								
-	BID ITEM DESCRIP	PTION								
39	Mobilization	(MISSES)			\$68,310.00					
	DESCRIPTION OF V	VORK, SERVICES, OR MATERIALS	TO BE PROVIDED							
	Mobilization									
		į.								
				TOTAL \$	2.028,240.20					
11f 100% of ar	item is not to be per	formed or furnished by the SBE, desc	riba the parties of the item t		12,020,230.20					
11 100% Of al	i item is not to be per	offied of furnished by the SBE, desc	nibe the portion of the item t	to be performed or turnished.						
					ARMITAGE THE					
	SN	IALL BUSINESS ENTERP	RISE CERTIFICAT	ION						
		f a certified small business, I confir								
		ve. If the bidder is awarded the con								
		orm the type and dollar amount of vi ment of the contract requirements v								
		in Government Code section 1483		ar randian (oor) dampiian						
I certify unde	r penalty of periury	that the foregoing is true and cor	rect							
	,, ,,,									
SIGNATURE OF	SMALL BUSINESS	AUTHORIZEDREPRESENTATIVE	I DOINTED NAME OF CASE	UL BUONECO AUTUODIZE	DEDDECEMENT					
SIGNA UKE PH	SWALL BUSINESS	MUTHORIZEDREPRESENTATIVE	PRINTED NAME OF SMALL BUSINESS AUTHORIZED REPRESENTATIV							
2	1		Mark Bates							
	ALL BUSINESS AUT	HORIZED REPRESENTATIVE		DATE						
President				6/3/2025						

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 contact.

 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

- 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