## Second' Bidder

## STATE OF CALIFORNIA DEPARTMENT OF TRANSPORTATION CERTIFIED DVBE SUMMARY

DES-OE-0102.5 (REV 3/2008)

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DISTRICT-COUNTY-ROUTE: 07 - LA - 210

CONTRACT NO: 07-4V5004

TOTAL BID: \$838,865.25

BID OPENING DATE: 5/28/2025

BIDDER'S NAME: Interstate Civil Construction

DVBE PRIME CONTRACTOR CERTIFICATION 1 N/A

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Bid Item Number	Description of Work to Be Subcontracted to DVBE or Materials to Be Supplied by DVBE <sup>2</sup>	For Caltrans Only	DVBE (Name, Telephone No., and Certification No.)	\$ Amount
3	Supply Construction Area Sign Panels		American Highway Services Inc 909-347-5010 DVBE#2010116	\$4,500.00
4	CMS Board Rental (monthly)			\$9,000.00
	Arrow Board Rental (monthly)			\$6,000.00
9	Supply Temporary Concrete Washout (kit)			\$1,300.00
17	Supply Dowel Bars & Epoxy			\$800.00
18	Supply Curing Compound			\$300.00
	(5 Gal Buckets)			\$800.00
3,4,9,17 &18	Tax & Shipping			\$4,453.00
Names of first tier D	DVBE subcontractors and their items	s of work listed mus	st	<b>\$</b> 27,153.00

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. 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 percent DVBE participation and need not complete the above table).

2. If 100% of an item is not performed or supplied by the DVBEs, describe the exact part, including the planned location of work to be performed, of item to be performed or supplied by DVBE.

Signature of Bidder

Date

5/28/2025

%

3.23

Submit to:

MSC 43 OFFICE ENGINEER DEPARTMENT OF TRANSPORTATION 1727 30TH STREET SACRAMENTO, CA 95816-7005 760-281-0188 (Area Code) Telephone Number

**Total Claimed** 

**Participation** 

Mark Bates

Contact Person (Type or Print)

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STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION CERTIFIED SMALL BUSINESS LISTING FOR THE NON-SMALL BUSINESS PREFERENCE DOT OCR-0011 (REV 01/2024) BIDDER NAME CONTRACT NO. List the description of work, name, telephone number, certification number, and dollar amount of each certified small business who will be used for non-small business preference on this project. Failure to submit a completed Certified Small Business Listing for the Non-Small Business Preference form by 4 p.m. on the 4th business day after bid opening will result in a nonresponsive bid. Attach additional sheets if necessary CONTRACT AWARDS Submit to MS 43 OFFICE ENGINEER DEPARTMENT OF TRANSPORTATION 1727 30TH STREET SACRAMENTO, CA 95816-1005 Description of Work, Service, Certified Small Business \$ Amount Number or Materials (Name, Telephone No, and Certification No.) Total Claimed Participation for Non-Small Business Preference Total Claimed Participation for Non-Small Business Preference Non-Small Business Preference-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 non-small business preference. The work to be performed in fulfillment of the contract requirements will be Commercially Useful Function (CUF) complaint in accordance with the requirements in Government Code section 14837, subdivision(d)(4). I certify under penalty of the perjury that the foregoing is true and correct. Bidder's Authori ed Representative (Please Type or Print) Bidder's Authorized Representative Signature DATE Name Email Add For individuals with sensory disabilities, this document is available in alternate formats. For alternate format information, contact the Forms nagement Unit at (916) 445-1233, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacrame