

# Third Bidder

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE - COMMITMENT**  
 OCR-0006 (REV 11/2020)

RECEIVED  
 CALTRANS

CONTRACT NO.  
**12-0U9104**

2025 APR 18 A 10:53

BID AMOUNT  
**\$1,031,577.70**

BID OPENING DATE  
**4/16/2025**

CONSTRUCTION  
 CONTRACT AWARDS

BIDDER'S NAME  
**Interstate Civil Construction**

DBE GOAL FROM CONTRACT %  
**21%**

DBE PRIME CONTRACTOR CERTIFICATION <sup>1</sup>	TOTAL NUMBER OF ALL SUBCONTRACTS (DBE & NON-DBE)	TOTAL VALUE OF ALL SUBCONTRACTS (DBE & NON-DBE)
None	6	\$218,769.13

BID ITEM NO.	ITEM OF WORK AND DESCRIPTION OF SERVICES TO BE SUBCONTRACTED OR MATERIALS TO BE PROVIDED <sup>2</sup>	NAICS AND/OR WORK CATEGORY CODES <sup>3</sup>	NAME OF DBEs (Must be certified on the date bids are opened. Include Caltrans' certification no., DBE address, and phone number. Show 2nd and lower tier subcontractors.)	AMOUNT (\$)
33	Form & Pour Concrete Barrier	237310, 238110	Dees Burke Engineering Constructors Inc. 207 W State ST Ontario, CA 91762 626-228-3670 DBE# 43430	\$72,210.00
34	Form & Pour Concrete Barrier Transition	237310, 238110	Dees Burke Engineering Constructors Inc. 207 W State ST Ontario, CA 91762 626-228-3670 DBE# 43430	\$1,540.00
26	Rebar	238120	Legacy Reinforcing Steel 1057 Tierra Del Ray STE F Chula Vista, CA 91910 619-646-0205 DBE# 47116	\$4,975.23
33	Rebar	238120	Legacy Reinforcing Steel 1057 Tierra Del Ray STE F Chula Vista, CA 91910 619-646-0205 DBE# 47116	\$16,821.14
34	Rebar	238120	Legacy Reinforcing Steel 1057 Tierra Del Ray STE F Chula Vista, CA 91910 619-646-0205 DBE# 47116	\$1,673.32
27	36" Reinforced Concrete Pipe	237310, C7112	RE Chaffe Construction Inc. 6025 Park DR Wrightwood, CA 92397 760-249-8068 DBE# 49013	\$95,700.00

Show all DBE firms being claimed for credit, regardless of tier. Attach written confirmation from each DBE shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

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

Failure to submit a signed DBE Confirmation form and submit copies of the DBE quotes will result in disallowance of the DBE's participation.

<sup>1</sup>Each DBE prime contractor must enter its certification number and show all work to be performed by DBEs, including work performed by its own forces.

<sup>2</sup>If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

<sup>3</sup>Use NAICS and/or Work Category Codes from the California Unified Certification Program database.

\* NAICS: North American Industry Classification System.

Total Claimed  
 Participation

\$ See Page 2

See Page 2 %

The bidder acknowledges that it is committed to use the DBEs shown on this form to meet the contract goal (49 CFR 26.53).

Signature of Bidder

4/16/2025

760-281-0188

Date

(Area Code) Tel. No.

Mark Bates

Person to Contact

(Please Type or Print)

**ADA Notice** This document is available in alternative accessible formats. For more information, please contact the Forms Management Unit at (279) 234-2284, TTY 711, in writing at Forms Management Unit, 1120 N Street, MS-89, Sacramento, CA 95814, or by email at Forms.Management.Unit@dot.ca.gov.

Contract No. 12-0U9104

STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION  
**DBE - COMMITMENT**  
 OCR-0006 (REV 11/2020)

CONTRACT NO. <b>12-0U9104</b>
BID AMOUNT <b>\$1,031,577.70</b>
BID OPENING DATE <b>4/16/2025</b>
BIDDER'S NAME <b>Interstate Civil Construction</b>
DBE GOAL FROM CONTRACT % <b>21%</b>

DBE PRIME CONTRACTOR CERTIFICATION¹ <b>None</b>	TOTAL NUMBER OF ALL SUBCONTRACTS (DBE & NON-DBE) <b>6</b>	TOTAL VALUE OF ALL SUBCONTRACTS (DBE & NON-DBE) <b>\$218,769.13</b>
----------------------------------------------------	-----------------------------------------------------------------	---------------------------------------------------------------------------

BID ITEM NO.	ITEM OF WORK AND DESCRIPTION OF SERVICES TO BE SUBCONTRACTED OR MATERIALS TO BE PROVIDED²	NAICS AND/OR WORK CATEGORY CODES³	NAME OF DBEs (Must be certified on the date bids are opened. Include Caltrans' certification no., DBE address, and phone number. Show 2nd and lower tier subcontractors.)	AMOUNT (\$)
8	Trucking	484220	Los Morales Trucking Inc. 11038 Washington Blvd #A Whittier, CA 90606 562-368-1029 DBE# 51728	\$18,480.00
16	Trucking	484220	Los Morales Trucking Inc. 11038 Washington Blvd #A Whittier, CA 90606 562-368-1029 DBE# 51728	\$2,240.00
18	Trucking	484220	Los Morales Trucking Inc. 11038 Washington Blvd #A Whittier, CA 90606 562-368-1029 DBE# 51728	\$2,240.00
19	Trucking	484220	Los Morales Trucking Inc. 11038 Washington Blvd #A Whittier, CA 90606 562-368-1029 DBE# 51728	\$2,080.00

Show all DBE firms being claimed for credit, regardless of tier. Attach written confirmation from each DBE shown stating that it will be participating in the contract to perform the specific work shown for the specific amount agreed to.

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

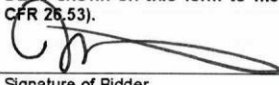
Failure to submit a signed DBE Confirmation form and submit copies of the DBE quotes will result in disallowance of the DBE's participation.

¹Each DBE prime contractor must enter its certification number and show all work to be performed by DBEs, including work performed by its own forces.

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

³Use NAICS and/or Work Category Codes from the California Unified Certification Program database.

\* NAICS: North American Industry Classification System.

<b>Total Claimed Participation</b>	<b>\$217,899.13</b>
	<b>21.12 %</b>
<b>The bidder acknowledges that it is committed to use the DBEs shown on this form to meet the contract goal (49 CFR 26.53).</b>  Signature of Bidder	
4/16/2025	760-281-0188
Date	(Area Code) Tel. No.
Mark Bates Person to Contact (Please Type or Print)	

**ADA Notice** This document is available in alternative accessible formats. For more information, please contact the Forms Management Unit at (279) 234-2284, TTY 711, in writing at Forms Management Unit, 1120 N Street, MS-89, Sacramento, CA 95814, or by email at Forms.Management.Unit@dot.ca.gov.

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE CONFIRMATION**  
OCR-0007 (REV 11/2020)

CONTRACT NO.

12-0U9104

NAME OF DBE BUSINESS

Dees Burke Engineering Constructors Inc.

NAME OF DBE REPRESENTATIVE

Todd Wingo

DBE CERTIFICATION NUMBER

43430

NAME OF BIDDER

Interstate Civil Construction

NAME OF PRIME CONTRACTOR IF DIFFERENT FROM THE BIDDER

NAME OF REPRESENTATIVE OF BIDDER OR CONTRACTOR

Mark Bates

DATE

4/16/2025

Bid item number	Item of work and description of services to be subcontracted or materials to be provided <sup>1</sup>	Amount (\$)
33	Form & Pour Concrete Barrier	\$72,210.00
34	Form & Pour Concrete Barrier Transition	\$1,540.00

<sup>1</sup> If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

Total

\$73,750.00

As an authorized representative of a certified disadvantaged business enterprise, I confirm that my business was contacted by the bidder or prime contractor 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 DBE Commitment form.

I certify under penalty of perjury that the foregoing is true and correct.

Signature of DBE's Authorized Representative

Printed Name of DBE's Authorized Representative

Title of DBE's Authorized Representative

Date

ADA Notice This document is available in alternative accessible formats. For more information, please contact the Forms Management Unit at (279) 234-2284, TTY 711, in writing at Forms Management Unit, 1120 N Street, MS-89, Sacramento, CA 95814, or by email at Forms.Management.Unit@dot.ca.gov.



STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE CONFIRMATION**  
OCR-0007 (REV 11/2020)

CONTRACT NO.

**12-0U9104**

NAME OF DBE BUSINESS

**Legacy Reinforcing Steel**

NAME OF DBE REPRESENTATIVE

**Brian Briggs**

DBE CERTIFICATION NUMBER

**47116**

NAME OF BIDDER

**Interstate Civil Construction**

NAME OF PRIME CONTRACTOR IF DIFFERENT FROM THE BIDDER

NAME OF REPRESENTATIVE OF BIDDER OR CONTRACTOR

**Mark Bates**

DATE

**4/16/2025**

Bid item number	Item of work and description of services to be subcontracted or materials to be provided <sup>1</sup>	Amount (\$)
26	Rebar	\$4,975.23
33	Rebar	\$16,821.14
34	Rebar	\$1,673.32

<sup>1</sup> If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

Total

**\$23,469.68**

As an authorized representative of a certified disadvantaged business enterprise, I confirm that my business was contacted by the bidder or prime contractor 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 DBE Commitment form.

I certify under penalty of perjury that the foregoing is true and correct.



Signature of DBE's Authorized Representative

**Brian Briggs**

Printed Name of DBE's Authorized Representative

**President**

Title of DBE's Authorized Representative

**04-17-2025**

Date

**ADA Notice** This document is available in alternative accessible formats. For more information, please contact the Forms Management Unit at (279) 234-2284, TTY 711, in writing at Forms Management Unit, 1120 N Street, MS-89, Sacramento, CA 95814, or by email at Forms.Management.Unit@dot.ca.gov.

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**DBE CONFIRMATION**  
OCR-0007 (REV 11/2020)

CONTRACT NO.

**12-0U9104**

NAME OF DBE BUSINESS

**RE Chaffee Construction Inc.**

NAME OF DBE REPRESENTATIVE

**Ronald Chaffee**

DBE CERTIFICATION NUMBER

**49013**

NAME OF BIDDER

**Interstate Civil Construction**

NAME OF PRIME CONTRACTOR IF DIFFERENT FROM THE BIDDER

NAME OF REPRESENTATIVE OF BIDDER OR CONTRACTOR

**Mark Bates**

DATE

**4/16/2025**

Bid item number	Item of work and description of services to be subcontracted or materials to be provided <sup>1</sup>	Amount (\$)
27	36" Reinforced Concrete Pipe	\$95,700.00

<sup>1</sup> If 100% of an item is not to be performed or furnished by the DBE, describe the exact portion of the item to be performed or furnished.

Total

**\$95,700.00**

As an authorized representative of a certified disadvantaged business enterprise, I confirm that my business was contacted by the bidder or prime contractor 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 DBE Commitment form.

I certify under penalty of perjury that the foregoing is true and correct.

Signature of DBE's Authorized Representative

**Ronald Chaffee**

Printed Name of DBE's Authorized Representative

**President**

Title of DBE's Authorized Representative

**4/17/2025**

Date

**ADA Notice** This document is available in alternative accessible formats. For more information, please contact the Forms Management Unit at (279) 234-2284, TTY 711, in writing at Forms Management Unit, 1120 N Street, MS-89, Sacramento, CA 95814, or by email at [Forms.Management.Unit@dot.ca.gov](mailto:Forms.Management.Unit@dot.ca.gov).





