

GOLDEN GATE BRIDGE, HIGHWAY AND TRANSPORTATION DISTRICT

**LIST OF SUBCONTRACTORS** **Attachment E**

In compliance with the provisions of Sections 4100-4114, inclusive, of the California Public Contract Code, each Bidder shall set forth the name, location of the place of business and Contractor's license number of each subcontractor whom Bidder proposes to have perform work or labor or render service to him in or about the construction of the Work in an amount in excess of one-half of one percent (1/2%) of the total amount of Bidder's Proposal and the portion of the Work that will be done by each such subcontractor.

List below the name, location of the place of business and Contractor's license number of each subcontractor and the portion of the Work to be done by each subcontractor:

Name of Subcontractor	License Number	Location of Place of Business	Portion of Work
-----------------------	----------------	-------------------------------	-----------------

- |   |        |                                |                                    |
|---|--------|--------------------------------|------------------------------------|
| (1) <del>Subcontractor</del> (MS)<br>Liam Moloney | 750278 | 880 Jones Ave<br>S.F. CA 94124 | Coating / Resurfacing<br>(Partial) |
| (2) _____   | _____  | _____                          | _____                              |
| (3) _____   | _____  | _____                          | _____                              |
| (4) _____   | _____  | _____                          | _____                              |
| (5) _____   | _____  | _____                          | _____                              |
| (6) _____   | _____  | _____                          | _____                              |
| (7) _____   | _____  | _____                          | _____                              |
| (8) _____   | _____  | _____                          | _____                              |
| (9) _____   | _____  | _____                          | _____                              |
| (10) _____  | _____  | _____                          | _____                              |
| (11) _____  | _____  | _____                          | _____                              |
| (12) _____  | _____  | _____                          | _____                              |
| (13) _____  | _____  | _____                          | _____                              |
| (14) _____  | _____  | _____                          | _____                              |
| (15) _____  | _____  | _____                          | _____                              |

Attachment F

GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT

Prime Contractor and Subcontractor/Subconsultant/Supplier Report

Bidder's Name: JMB Construction, Inc.  
 Address: South San Francisco, CA 94080  
 Owner or Contact Person: MARGARET BURKE  
 Contract # and Name: 2011-FT-3, Larkspur Ferry Terminal Utility Rehabilitation  
 Is your firm a Disadvantaged Business Enterprise: Yes  No   
 Phone: (650) 267-5300 Fax: (650) 267-5301

Instructions:

(1) Bidder is required to furnish the following information on ALL subcontractors that will perform work, provide labor or render services in connection with this Contract pursuant to §§4100-4114 of the Public Contract Code of the State of California and District's sub-bid reporting requirements.

(2) In addition, Bidder MUST provide the following information on ALL subcontractors/subconsultants/suppliers that provided Bidder a bid, quote, or proposal for work, services or supplies associated with this Contract. This information shall be provided for all sub-bidders regardless of tier for both DBEs and non-DBEs alike. Include all bid acceptance(s) AND rejection(s). Signature is required on page two of this form.

Subcontractor/Subconsultant/Supplier Firm Name/Address/Contact Information	Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
Name: <u>Lord &amp; Sons</u> Address: <u>9056 Reservoir Ave</u> <u>Belvedere, CA 94026</u> Contact Person: <u>Tamiko Kirkland</u> Phone & Fax: <u>(662) 527-2500 (562) 527-2115</u> Name: <u>CORE REASON PRODUCTS</u> Address: <u>3300 E 19th St</u> <u>Sunnyvale, CA 94085</u> Contact Person: <u>Jeff Keesee</u> Phone & Fax: <u>(510) 986-5238 (510) 986-5246</u> Name: <u>Superior Steel Products Inc.</u> Address: <u>1604 Industrial Way</u> <u>Calwall, ID 83405</u> Contact Person: <u>Brian Giattas</u> Phone & Fax: <u>530 957-3713 530 783-9550</u> Name: <u>Highland Tanks Manufacturing</u> Address: <u>One Highland Road</u> <u>Stoughton, PA 15563</u> Contact Person: <u>Larry Tomkowski</u> Phone & Fax: <u>(814) 898-5701 (814) 893-6816</u>		No	<u>Partial Pipe Support (Materials)</u>	<u>12,180</u>	<u>Yes</u>	<u>0</u>
Name: <u>Lord &amp; Sons</u> Address: <u>9056 Reservoir Ave</u> <u>Belvedere, CA 94026</u> Contact Person: <u>Tamiko Kirkland</u> Phone & Fax: <u>(662) 527-2500 (562) 527-2115</u> Name: <u>CORE REASON PRODUCTS</u> Address: <u>3300 E 19th St</u> <u>Sunnyvale, CA 94085</u> Contact Person: <u>Jeff Keesee</u> Phone & Fax: <u>(510) 986-5238 (510) 986-5246</u> Name: <u>Superior Steel Products Inc.</u> Address: <u>1604 Industrial Way</u> <u>Calwall, ID 83405</u> Contact Person: <u>Brian Giattas</u> Phone & Fax: <u>530 957-3713 530 783-9550</u> Name: <u>Highland Tanks Manufacturing</u> Address: <u>One Highland Road</u> <u>Stoughton, PA 15563</u> Contact Person: <u>Larry Tomkowski</u> Phone & Fax: <u>(814) 898-5701 (814) 893-6816</u>		No	<u>Bigc Tanks - Furnish</u>	<u>\$20,090</u>	<u>No</u>	<u>0</u>
Name: <u>Lord &amp; Sons</u> Address: <u>9056 Reservoir Ave</u> <u>Belvedere, CA 94026</u> Contact Person: <u>Tamiko Kirkland</u> Phone & Fax: <u>(662) 527-2500 (562) 527-2115</u> Name: <u>CORE REASON PRODUCTS</u> Address: <u>3300 E 19th St</u> <u>Sunnyvale, CA 94085</u> Contact Person: <u>Jeff Keesee</u> Phone & Fax: <u>(510) 986-5238 (510) 986-5246</u> Name: <u>Superior Steel Products Inc.</u> Address: <u>1604 Industrial Way</u> <u>Calwall, ID 83405</u> Contact Person: <u>Brian Giattas</u> Phone & Fax: <u>530 957-3713 530 783-9550</u> Name: <u>Highland Tanks Manufacturing</u> Address: <u>One Highland Road</u> <u>Stoughton, PA 15563</u> Contact Person: <u>Larry Tomkowski</u> Phone & Fax: <u>(814) 898-5701 (814) 893-6816</u>		No	<u>Bigc Tanks - Furnish</u>	<u>\$24,859</u>	<u>Yes</u>	<u>-</u>
Name: <u>Lord &amp; Sons</u> Address: <u>9056 Reservoir Ave</u> <u>Belvedere, CA 94026</u> Contact Person: <u>Tamiko Kirkland</u> Phone & Fax: <u>(662) 527-2500 (562) 527-2115</u> Name: <u>CORE REASON PRODUCTS</u> Address: <u>3300 E 19th St</u> <u>Sunnyvale, CA 94085</u> Contact Person: <u>Jeff Keesee</u> Phone & Fax: <u>(510) 986-5238 (510) 986-5246</u> Name: <u>Superior Steel Products Inc.</u> Address: <u>1604 Industrial Way</u> <u>Calwall, ID 83405</u> Contact Person: <u>Brian Giattas</u> Phone & Fax: <u>530 957-3713 530 783-9550</u> Name: <u>Highland Tanks Manufacturing</u> Address: <u>One Highland Road</u> <u>Stoughton, PA 15563</u> Contact Person: <u>Larry Tomkowski</u> Phone & Fax: <u>(814) 898-5701 (814) 893-6816</u>		No	<u>Bigc Tanks - Furnish</u>	<u>\$35,896</u>	<u>No</u>	<u>-</u>

Attachment F

GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT

Prime Contractor and Subcontractor/Subconsultant/Supplier Report

Bidder's Name: JMB Construction, Inc.

Address: South San Francisco, CA 94080

Owner or Contact Person: MARGARET BURKE

Contract # and Name: 2011-FT-3, Larkspur Ferry Terminal Utility Rehabilitation

Is your firm a Disadvantaged Business Enterprise: Yes ( ) No ( )

Phone: ( ) (650) 267-5300 Fax: ( ) (650) 267-5301

Instructions:

(1) Bidder is required to furnish the following information on ALL subcontractors that will perform work, provide labor or render services in connection with this Contract pursuant to §§4100-4114 of the Public Contract Code of the State of California and District's sub-bid reporting requirements.

(2) In addition, Bidder MUST provide the following information on ALL subcontractors/subconsultants/suppliers that provided Bidder a bid, quote, or proposal for work, services or supplies associated with this Contract. This information shall be provided for all sub-bidders regardless of tier for both DBEs and non-DBEs alike. Include all bid acceptance(s) AND rejection(s). Signature is required on page two of this form.

	Subcontractor/Subconsultant/Supplier Firm Name/Address/Contact Information	Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
1	Name: <u>Planetank + Fueling Equipment</u> Address: <u>6703 E. Marginal Way S.</u> <u>Seattle, WA 98108</u> Contact Person: <u>Brian Van Wagoner</u> Phone & Fax: <u>(509) 319-2588 (802) 279-7855</u> Name: <u>GR Metals Fabric</u> Address: <u>6954 Basista Ave.</u> Contact Person: <u>Jeberny Silva</u> Phone & Fax: <u>(805) 443-7903 (805) 443-7705</u>		No	<u>Barge Tank - Fabrication</u>	<u>\$39,300</u>	No	-
2	Name: <u>Hayward Pipe Supply Co. Inc.</u> Address: <u>3818 Diablo Avenue</u> Hayward, CA 94545 Contact Person: <u>Greg Peddic</u> Phone & Fax: <u>(510) 887-2700 (510) 785-6894</u>	<u>919544</u>	Yes	<u>Partial Fabricated Metals - Fabrication</u>	<u>\$15,081</u>	Yes	<u>\$9,048</u>
3	Name: <u>Hayward Pipe Supply Co. Inc.</u> Address: <u>3818 Diablo Avenue</u> Hayward, CA 94545 Contact Person: <u>Greg Peddic</u> Phone & Fax: <u>(510) 887-2700 (510) 785-6894</u>	-	Yes	<u>Pipe Material - Fabrication</u>	<u>\$89,513</u>	Yes	<u>\$58,541</u>
4	Name: <u>Pa B Company</u> Address: <u>939 Broadway</u> Redwood City, CA 94063 Contact Person: <u>Miguel Barriga</u> Phone & Fax: <u>(650) 316-3883 (650) 316-1134</u>	-	No	<u>Pipe Material - Fabrication</u>	<u>\$126,136</u>	No	-

**Attachment F**

**GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT**

Prime Contractor and Subcontractor/Subconsultant/Supplier Report

Bidder's Name: **JMB Construction, Inc.**

Address: **South San Francisco, CA 94080**

Owner or Contact Person: **MARGARET BURKE**

Contract # and Name: **2011-FT-3, Larkspur Ferry Terminal Utility Rehabilitation**

Is your firm a Disadvantaged Business Enterprise: Yes  No

Phone: **(650) 267-5300** Fax: **(650) 267-5301**

**Instructions:**

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Subcontractor/Subconsultant/Supplier Firm Name/Address/Contact Information	Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
Name: <b>TFT Value &amp; Instrument</b> Address: <b>1181 Quincey Lane, Ste 150 Pleasanton, CA 94566</b> Contact Person: <b>Peter Shong</b> Phone & Fax: <b>(925) 963-3341 (925) 484-4277</b>		No	Pipe Material - Furnish	\$97,587	No	-
Name: <b>Orment Support Services, Inc</b> Address: <b>480 Vandal Way Campbell, CA 95008</b> Contact Person: <b>Bob Cabalan</b> Phone & Fax: <b>(408) 718-3881 (707) 447-7834</b>		No	Partial Pipe Supports	\$14,785	No	-
Name: <b>The Rodriguez Corp.</b> Address: <b>11130 SW Barbours Blvd. Ste 100 Portland, OR 97219</b> Contact Person: <b>Fernando Rodriguez</b> Phone & Fax: <b>(503) 245-0619 (503) 245-5766</b>	86468	Yes	Coating/Resurfacing (Partial)	\$47,477	No	-
Name: <b>Liam Moloney Painting</b> Address: <b>850 Linn Ave. San Francisco, CA 94124</b> Contact Person: <b>Liam Moloney</b> Phone & Fax: <b>(415) 350-5373 (415) 695-1494</b>	750278	No	Coating/Resurfacing (Partial)	\$10,000	Yes	-

GOLDEN GATE BRIDGE, HIGHWAY AND TRANSPORTATION DISTRICT

**LIST OF SUBCONTRACTORS**

**Attachment E**

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List below the name, location of the place of business and Contractor's license number of each subcontractor and the portion of the Work to be done by each subcontractor:

Name of Subcontractor	License Number	Location of Place of Business	Portion of Work
-----------------------	----------------	-------------------------------	-----------------

(1) Zappetini+Son 202133 San Rafael, CA Install Metals

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

(5) \_\_\_\_\_

(6) \_\_\_\_\_

(7) \_\_\_\_\_

(8) \_\_\_\_\_

(9) \_\_\_\_\_

(10) \_\_\_\_\_

(11) \_\_\_\_\_

(12) \_\_\_\_\_

(13) \_\_\_\_\_

(14) \_\_\_\_\_

(15) \_\_\_\_\_

**GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT**

**Prime Contractor and Subcontractor/Subconsultant/Supplier Report**

**Attachment F**

Bidder's Name: Valentine Corporation  
 Address: 111 Pelican Way, San Rafael, CA 94901  
 Owner or Contact Person: Robert O. Valentine, Jr.  
 Contract # and Name: 2011-FT-3, Larkspur Ferry Terminal Utility Rehabilitation  
 Is your firm a Disadvantaged Business Enterprise: Yes      No   X    
 Phone: (415) 453-3732 Fax: (415) 457-5820

**Instructions:**

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	Subcontractor/Subconsultant/Supplier Firm Name/Address/Contact Information	Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
1	Name: <u>Zappetini + Son</u> Address: <u>1112 Second Street</u> <u>San Rafael, CA</u> Contact Person: <u>Dave Zappetini</u> Phone & Fax: <u>(415) 451-2511 / 454-2120</u>	<u>202133</u>	<u>No</u>	<u>Install Metals</u>	<del>\$17,500</del> <u>\$13,640</u>	<u>Yes</u>	<u>None</u>
2	Name: <u>T T Walk + Instrument</u> Address: <u>1181 Quarry Ln, # 150</u> <u>Pleasanton, CA 94566</u> Contact Person: <u>Pat Stong</u> Phone & Fax: <u>(925) 963-3341 / 484-4727</u>	<u>N/A</u>	<u>No</u>	<u>Supplier - Valves</u>	<u>\$ 12,000</u>	<u>No</u>	<u>None</u>
3	Name: <u>Pumpings Solutions</u> Address: <u>43268 Chnsty Street</u> <u>Fremont, CA 94538</u> Contact Person: <u>Fred Frey</u> Phone & Fax: <u>(510) 226-1715 / 226-1735</u>	<u>N/A</u>	<u>No</u>	<u>Supplier - Pumps</u>	<u>\$ 7,400</u>	<u>Yes</u>	<u>None</u>
4	Name: <u>Superior Steel Products</u> Address: <u>1604 Industrial Way</u> <u>Caldwell, ID 83605</u> Contact Person: <u>P.L. Questad</u> Phone & Fax: <u>(208) 454-8000 / 454-8184</u>	<u>N/A</u>	<u>No</u>	<u>Supplier - Tanks</u>	<u>\$24,859</u>	<u>Yes</u>	<u>None</u>

GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT

Prime Contractor and Subcontractor/Subconsultant/Supplier Report

Bidder's Name: Valentine Corporation Contract # and Name: 2011-FT-3, Larkspur Ferry Terminal Utility Rehabilitation  
 Address: 111 Pelican Way, San Rafael, CA 94901 Is your firm a Disadvantaged Business Enterprise: Yes  No   
 Owner or Contact Person: Robert O. Valentine, Jr. Phone: (415) 453-3732 Fax: (415) 457-5820

Instructions:

(1) Bidder is required to furnish the following information on ALL subcontractors that will perform work, provide labor or render services in connection with this Contract pursuant to SS4100-4114 of the Public Contract Code of the State of California and District's sub-bid reporting requirements.

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Subcontractor/Subconsultant/Supplier Firm Name/Address/Contact Information	Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
Name: <u>Core-Rosion</u> Address: <u>3300 E. 19th Street</u> Contact Person: <u>Jeff Keese</u> Phone & Fax: <u>(562) 986-5238/986-524</u>	<u>n/a</u>	<u>NO</u>	<u>Supplier Tank</u>	<u>\$20,090</u>	<u>NO</u>	<u>None</u>
Name: <u>Eagle Engineer + Construction</u> Address: <u>1175 Palomar Drive #100</u> Contact Person: <u>Curtis Brooks</u> Phone & Fax: <u>(650) 367-8000 / 367-8282</u>	<u>674471</u>	<u>Yes</u>	<u>Temp. Utilities, Replace conduit</u>	<u>\$475,000</u>	<u>NO</u>	<u>None</u>
Name: <u>Professional Concrete Sawing</u> Address: <u>P.O. Box 3348</u> Contact Person: <u>Murray, CA</u> Phone & Fax: <u>(209) 357-2228 / 357-2287</u>	<u>did not</u>	<u>Yes</u>	<u>Saw Cuttings</u>	<u>\$500</u>	<u>NO</u>	<u>None</u>
Name: <u>Ace Tank + Fueling Equip.</u> Address: <u>6703 E. Marschal Way S</u> Contact Person: <u>Seahle Van Wagner</u> Phone & Fax: <u>(800) 426-2887</u>	<u>n/a</u>	<u>NO</u>	<u>Supplier Tank</u>	<u>39,309.50</u>	<u>NO</u>	<u>None</u>

(888) 475-1418

**GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT**  
**Prime Contractor and Subcontractor/Subconsultant/Supplier Report**

Attachment F

Bidder's Name: Valentine Corporation Contract # and Name: 2011-FT-3, Larkspur Ferry Terminal Utility Rehabilitation  
 Address: 111 Pelican Way, San Rafael, CA 94901 Is your firm a Disadvantaged Business Enterprise: Yes      No X  
 Owner or Contact Person: Robert O. Valentine, Jr. Phone: (415) 453-3732 Fax: (415) 457-5820

**Instructions:**

- (1) Bidder is required to furnish the following information on ALL subcontractors that will perform work, provide labor or render services in connection with this Contract pursuant to §§4100-4114 of the Public Contract Code of the State of California and District's sub-bid reporting requirements.
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Subcontractor/Subconsultant/Supplier Firm Name/Address/Contact Information	Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
Name: <u>Rodriguez Paintings</u> Address: <u>1430 S.W. Babur Blvd</u> Contact Person: <u>Bob Rodriguez</u> Phone & Fax: <u>(503) 245-0769</u>	<u>864268</u>	<u>Yes</u>	<u>Painting</u>	<u>\$30,000</u>	<u>Yes</u>	<u>\$30,000</u>
Name: _____ Address: _____ Contact Person: _____ Phone & Fax: _____						
Name: _____ Address: _____ Contact Person: _____ Phone & Fax: _____						
Name: _____ Address: _____ Contact Person: _____ Phone & Fax: _____						
Name: _____ Address: _____ Contact Person: _____ Phone & Fax: _____						

Prime Contractor and Subcontractor/Subconsultant/Supplier Report (Continued)

Subcontractor/Subconsultant/Supplier		Contractor's License No. (if applicable)	DBE (Yes*/No)	Portion of Work or Type of Materials/Supplies	Dollar Amount of Work/ Materials/Supplies	Bid/Quote Accepted (Yes**/No)	DBE Amount***
#9	Firm Name/Address/Contact Information	N/A	NO	Supplier - Pipe & Materials	\$89,513.86	No	None
	Name: Hayward Pipe & Supply						
	Address: 3818 Diablo Avenue Hayward, CA 94145						
	Contact Person: Ron						
Phone & Fax: (510) 867-2700/785-6294							
#10	Firm Name/Address/Contact Information	N/A	NO	Supplier - Sub Products	\$2,189.32	Yes	None
	Name: White Cap Construction Supply						
	Address: 300 East 10th Road Santa Rosa, CA 95407						
	Contact Person: Clark						
Phone & Fax: (707) 586-4330							
#11	Firm Name/Address/Contact Information	N/A	NO	Supplier - Supplies	\$200,000 <del>\$17,700 (Rev)</del>	No	None
	Name: Clements Support Services						
	Address: 8790 Fruitridge Road Sacramento, CA 95826						
	Contact Person: Sales						
Phone & Fax: (916) 388-7880/388-21401							

Attach additional sheets as necessary.

DBE Amount: \$ \_\_\_\_\_ = \_\_\_\_\_ % Bidder's DBE Achievement  
 Total Bid Amount: \$ \_\_\_\_\_

\* If Yes, please also provide Unified Certification Program certification number in box. Bidders need to be aware that state and local governments may have other types of certifications with different requirements.

\*\* Do not indicate more than one "Yes" for alternative subcontractors for the same work.

\*\*\* DBE participation includes that portion of the Work actually performed by a certified DBE with its own forces. For example, for DBE supplier, count 60% of the costs of materials and supplies.

The undersigned will enter into a formal agreement with the subcontractor(s), subconsultant(s) and/or supplier(s) whose bid/quote was accepted conditioned upon execution of a contract with the Golden Gate Bridge, Highway & Transportation District. I certify under penalty of perjury that the information included on this form is accurate and true.

*Robert O. Valentine*

Signature of Owner or Authorized Representative

Robert O. Valentine, Jr. - President  
 Title

August 31, 2010  
 Date