

# Third Bidder

03-13-24A11:33 RCVD

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION  
**CERTIFIED DVBE SUMMARY**  
 DES-OE-0102.5 (REV 3/2008)

DISTRICT-COUNTY-ROUTE: 03 - Sie-49-15.6 - 17.0  
 CONTRACT NO.: 03-3G0104  
 TOTAL BID: \$1,129,549.70  
 BID OPENING DATE: 03/12/24  
 BIDDER'S NAME: Mountain Cascade, Inc.  
 DVBE PRIME CONTRACTOR CERTIFICATION <sup>1</sup> N/A

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
12,13,16	trucking		Iron Response 877-988-4766 Cert # 2032883	\$244,380
16	HMA		Teichert Agg/ Dependable Petroleum Products 209-483-2713 Cert # 31779	\$25,500
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.			<b>Total Claimed Participation</b>	\$ <u>269,880</u>  <u>23.9</u> %

1. 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.

Submit to:

MSC 43  
 OFFICE ENGINEER  
 DEPARTMENT OF TRANSPORTATION  
 1727 30TH STREET  
 SACRAMENTO, CA 95816-7005

 03/12/24  
 Signature of Bidder Date

925-373-8370

(Area Code) Telephone Number

David Hicks :V.P. of Estimating/Secretary

Contact Person (Type or Print)

**ADA Notice**

For individuals with sensory disabilities, this document is available in alternate formats. For information, call (916) 654-6410, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.

**STATE OF CALIFORNIA - DEPARTMENT OF TRANSPORTATION  
CERTIFIED DVBE SUMMARY  
DES-OE-0102.5 (REV 3/2008)**

DVBE Prime Contractor certification:

Contact Person: David Hicks

(Type or Print)

(Area Code) Telephone Number: 925-373-8370

Total Claimed Participation \$ 269880

Total Claimed Participation % 23.9

Submit to:

MS 43  
Office Engineer  
Department of Transportation  
1727 30th Street  
Sacramento, CA 95816-7005

Names of first tier DVBE subcontractors and their items of work listed must be consistent with the names and items of work in the Subcontractors 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 table below).

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Bid Item Number: 12,13,16

Description of Work to Be Subcontracted to DVBE or Materials to be Supplied by DVBE:  
trucking

DVBE Name: Iron Response DVBE Telephone Number: 877-988-4766

DVBE Certification Number: 2032883 \$ Amount: 244,380

Bid Item Number: 16

Description of Work to Be Subcontracted to DVBE or Materials to be Supplied by DVBE:  
hma

DVBE Name: Teichert Agg/Dependable Petroleum Products DVBE Telephone Number: 209-483-2713

DVBE Certification Number: 31779 \$ Amount: 25500

Bid Item Number:

Description of Work to Be Subcontracted to DVBE or Materials to be Supplied by DVBE:

DVBE Name: DVBE Telephone Number:

DVBE Certification Number: \$ Amount:

Bidder: Mountain Cascade Inc

Contract ID: 03-3G0104

CALIFORNIA DEPARTMENT OF TRANSPORTATION

Letting ID: 03-3G0104  
Bidder ID: VC1300002423

Bid Item Number:

Description of Work to Be Subcontracted to DVBE or Materials to be Supplied by DVBE:

DVBE Name: DVBE Telephone Number:

DVBE Certification Number: \$ Amount:

Bid Item Number:

Description of Work to Be Subcontracted to DVBE or Materials to be Supplied by DVBE:

DVBE Name: DVBE Telephone Number:

DVBE Certification Number: \$ Amount:

Bid Item Number:

Description of Work to Be Subcontracted to DVBE or Materials to be Supplied by DVBE:

DVBE Name: DVBE Telephone Number:

DVBE Certification Number: \$ Amount:

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DVBE Name: DVBE Telephone Number:

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DVBE Certification Number: \$ Amount:

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DVBE Certification Number: \$ Amount: