

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

## **DBE - COMMITMENT** OCR-0006 (REV 11/2020) CONTRACT NO. 04-1Q2004 **BID AMOUNT** \$ 7,868,089.00 BID OPENING DATE 10.01.24 BIDDER'S NAME PTM General Engineering Services, Inc. DBE GOAL FROM CONTRACT % 22 TOTAL NUMBER OF ALL SUBCONTRACTS TOTAL VALUE OF ALL SUBCONTRACTS DBE PRIME CONTRACTOR CERTIFICATION<sup>1</sup> (DBE & NON-DBE) (DBE & NON-DBE) 3 633,396,28 38118 NAME OF DBEs NAICS AND/OR (Must be certified on the date bids are ITEM OF WORK AND DESCRIPTION OF AMOUNT BID SERVICES TO BE SUBCONTRACTED OR WORK CATEGORY opened. Include Caltrans' certification no., ITEM NO. (\$) MATERIALS TO BE PROVIDED<sup>2</sup> CODES<sup>3</sup> DBE address, and phone number. Show 2nd and lower tier subcontractors.) NAICS 238210 100% = labor, material, & equipment PTM General Engineering Services, Inc. 36 for "Rectangular Rapid Flasing Beacon Item Code037568 5942 Acorn St. Riverside, CA 92504 3,946,000.00 Systems. #38118 951.722.5678 Show all DBE firms being claimed for credit, regardless of tier. Attach written confirmation \$ 3,946,000.00 from each DBE shown stating that it will be participating in the contract to perform the specific Total Claimed work shown for the specific amount agreed to. **Participation** The names of the 1st tier DBE subcontractors and items of work must be consistent with the 50 Subcontractor List (Pub Cont Code § 4100 et seq.). The bidder acknowledges that it is committed to use the Failure to submit a signed DBE Confirmation form and submit copies of the DBE quotes will DBEs shown on this form to meet the contract goal (49 result in disallowance of the DBE's participation. CFR-26.53).

'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.

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.

Signature of Bidde

10.01.24

951.722.5678

Date

(Area Code) Tel. No.

Elizabeth H. Mendoza de McRae, President/CFO

Person to Contact

(Please Type or Print)

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STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION **DBE CONFIRMATION** OCR-0007 (REV 11/2020) CONTRACT NO. 04-1Q2004 NAME OF DBE BUSINESS PTM General Engineering Services, Inc. NAME OF DBE REPRESENTATIVE Elizabeth H. Mendoza de McRae, President/CFO DBE CERTIFICATION NUMBER 38118 NAME OF BIDDER PTM General Engineering Services, Inc. NAME OF PRIME CONTRACTOR IF DIFFERENT FROM THE BIDDER NAME OF REPRESENTATIVE OF BIDDER OR CONTRACTOR Elizabeth H. Mendoza de McRae, President/CFO DATE Date of Bid: 10.01.24 Amount Item of work and description of services to be subcontracted or materials to be provided 1 (\$) Bid item number 100% = labor, material, & equipment for "Rectangular Rapid Flasing Beacon 3,946,000.00 36 Systems.' <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. 3,946,000.00 Total 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

Elizabeth H. Mendoza de McRae

Printed Name of DBE's Authorized Representative

President/CFO

Title of DBE's Authorized Representative

10.01.24

Date

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## STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION DBE GOOD FAITH EFFORTS DOCUMENTATION

Co OCR-0008 (REV 10/2022)

dder's Name:	
ontract No.:	
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List items of work the Bidder made available to Disadvantaged Business Enterprise (DBE) firms. Identify items of work the Bidder might otherwise perform
with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has
established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed,
show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

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Item of Work Offered, Services Offered, or Materials Supplied	Bidder No Perform: Yes/I	s Item	Item Broken Down to Facilitate Participation Yes/No		Established Flexible Timeframes for Performance and Delivery Schedules Yes/No		Amount (\$)	Percentage of Total Bid
	YES	Пио	YES	Пио	YES	NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ №		
	YES	Пио	YES	NO	YES	Пио		
	YES	NO	YES	NO	YES	Пио		
	YES	NO	YES	Пио	YES	NO		
	YES	NO	YES	NO	YES	Пио		
	YES	Пио	YES	NO	YES	NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	□ №	YES	Пио	YES	NO		
	YES	Пио	YES	NO	YES	NO		
	YES	NO	YES	NO	YES	NO		
	YES	Пио	YES	Пио	YES	NO		
	YES	□ NO	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	No	YES	NO	YES	NO		
	YES	□ NO	YES	NO	YES	NO		

ATE OF CALIFOR	NIA · DEPARTME	NT OF TRANS	UMENT.	ATION		Bidder's Name: Contract No.:		
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methods used f	of certified DBEs or following up inits, telephone recor	ial and follow-u	ip solicitation	they were soli is to determine	cited to bid on with certainty	this project. Include the ite whether the DBEs were int	ms of work offere erested. Attach co	d and the dates ar opies of solicitation
Name of DB		Date of Initial Solicitation			Items of Wor	k Offered	Follow Up Methods and Dates	
				_				
								-
						ifications specific to the items ad the price difference for eac BE firm was selected over a		
Items of Work	Provided Specifications for Yes/	Plans/ r Work Offered	Name of Selected Firm		DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Differenc
	YES	NO						
	YES	□NO						
	☐ YES	NO						

YES NO If the firm selected for the item is not a DBE, provide the reasons for the selection on a separate sheet and attach names, addresses, and phone numbers for the firms listed above. Provide evidence as to why additional agreements could not be reached for DBEs to perform work.

YES NO

YES NO

YES NO

YES NO

YES NO

## STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

## DBE GOOD FAITH EFFORTS DOCUMENTATION

Bidder's Name:	
Contract No.:	
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4.	Describe the Bidder's outreach efforts Provide copies of supporting documents		st of all certified DBEs that have the capal	bility to perform the work of the Contract.				
	Description of Outreach	Dates	Location (if applicable)	Results				
5.	Describe the Bidder's efforts made to pr assist them in responding to a solicitat supporting documents.	ovide interested DBEs with adei ion. Identify the DBEs assisted	quate information about the plans, specifica , the type of information provided, and the	ations, and requirements of the Contract to e date of the contracts. Provide copies of				
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6.	Describe the Bidder's efforts made to assoftered, and the dates. Provide copies of	sist interested DBEs in obtaining supporting documents.	bonding, lines of credit, or insurance. Identif	y the DBEs assisted, the type of assistance				
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7.	Describe the Bidder's efforts made to assist interested DBEs in obtaining necessary equipment, supplies, materials, or related assistance or services, excludin supplies and equipment the DBE purchases or leases from the prime contractor or its affiliate. Identify the DBEs assisted, the type of assistance offered, and the dates. Provide copies of supporting documents. List efforts made to assist interested DBEs in obtaining bonding, lines of credit, insurance, necessar equipment, supplies, materials, or related assistance or services, excluding supplies and equipment the DBE subcontractor purchases or leases from the prim contractor or its affiliate. Identify the DBE assisted, the assistance offered, and the date. Provide copies of supporting documents.							
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8.	<ol> <li>List the names of agencies and the dates on which they were contacted to provide assistance in contacting, recruiting, and using DBE firms. If the agencies were contacted in writing, provide copies of supporting documents.</li> </ol>							
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9.	Include additional data to support a del	monstration of good faith efforts.	2					
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N	OTE: USE ADDITIONAL SHEETS OF PA	APER IF NECESSARY.						

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