

06-05-24A10:51 RCVD

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION

CERTIFIED SMALL BUSINESS LISTING FOR THE NON-SMALL BUSINESS PREFERENCE

DOT OCR-0011 (REV 01/2024)

BIDDER NAME MARINA LANDSCAPE, INC.

CONTRACT NO. 08 . 1 P 0 6 0 4

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

Submit to:

MS 43

OFFICE ENGINEER

DEPARTMENT OF TRANSPORTATION 1727 30TH STREET

SACRAMENTO, CA 95816-7005

Bid Item Number	Description of Work, Service, or Materials	Certified Small Business (Name, Telephone No., and Certification No.)	\$ Amount
0003	CONSTRUCTION AREA SIGNS	SAFETY NETWORK, INC. (661) 623-6533 SBE No. 34573	\$12,584.00
0004	TRAFFIC CONTROL SYSTEM		\$19,750.00
0005 - 0007	STATIONARY IMPACT ATTENUATOR VEHICLE, PORTABLE RADAR SPEED FEEDBACK SIGN SYSTEM, PORTABLE CHANGEABLE MESSAGE SIGN		\$18,100.00
0001, 0008, 0009	LEAD COMPLIANCE PLAN, JOB SITE MANAGEMENT, WPCP	GLOBAL ENVIRONMENTAL NETWORK, INC. 800-230-6944 SBE No. 24765	\$7,090.00

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, subjection(d)(4). I certify under penalty of the perjury that the foregoing is true and correct.

Hue Ta - Vice President of Estimating Bidder's Authorized Representative

(Please Type or Print)

Bidder's Application resentative Signature 06/03/2024

estimator@marinaco.com

Email Address

ADA Notice For individuals with sensory disabilities, this document is available in alternate formats. For alternate format information, contact the Forms Management Unit at (916) 445-1233, TTY 711, or write to Records and Forms Management, 1120 N Street, MS-89, Sacramento, CA 95814.