

OTAY WATER DISTRICT

**SAN DIEGO COUNTY
CALIFORNIA**

**CONTRACT DOCUMENTS
FOR**



624 ZONE PRSs & 944-R PRS IMPROVEMENTS

CIP P2541 & R2110

APRIL 2015

SECTION 00400
BID PROPOSAL
(FORM A)

To: Otay Water District
2554 Sweetwater Springs Boulevard
Spring Valley, California 91978-2004

Project Title: **624 ZONE PRSs & 944-R PRS IMPROVEMENTS (CIP P2541 & R2110)**

Bidder: CCL CONTRACTING INC
Address: 1938 DON LEE PLACE ESCONDIDO CA. 92029
Date: 5/20/15

Bidder's contract person for additional information on this Proposal:

Name: Bryan Lusky Telephone: (760) 743-2254
Contractor's license number and class: 798819 Expiration date: 8/31/15

BIDDER'S DECLARATION AND UNDERSTANDING

The undersigned, hereinafter called the "Bidder," declares that the only persons or parties interested in this proposal are those named herein, that this proposal is, in all respects, fair and without fraud, that it is made without collusion with any official of the District, and that the proposal is made without any connection or collusion with any person submitting another proposal on this contract.

The Bidder further declares that the contract documents for the construction of the project were carefully reviewed, including materials and equipment, conditions of work involved, and including the fact that the description of the quantities of work and materials, as included herein, is brief and is intended only to indicate the general nature of the work and to identify the said quantities with the detailed requirements of the contract documents, and that this proposal is made according to the provisions and under the terms of the contract documents, which documents are hereby made a part of this proposal.

Submission of this proposal shall be conclusive evidence that the Bidder has investigated the availability of all equipment and materials required for the work specified and is satisfied that deliveries of equipment and materials can be scheduled so as to complete the work in all respects within the completion times specified herein.

The Bidder understands and agrees that if a contract is awarded, the employees of Bidder and Bidder's subcontractors shall be paid wages which are no less than the prevailing wage rates as determined by the California Department of Industrial Relations pursuant to the California Labor Code. The Bidder who is awarded the contract shall post at the job site a copy of the prevailing rates of per diem wages as determined by the California Department of Industrial Relations at the job site.

The Bidder understands that the District reserves the right to reject any and all bids and to waive any information in the bidding.

CONTRACT EXECUTION AND BONDS

After receiving the Notice of Award (NOA), the Bidder shall comply with the terms set forth in Section 00100, Article 23. The Bidder will, to the extent of this proposal, furnish all machinery, tools, apparatus, other means of construction, and do the work and furnish all the materials necessary to complete all work as specified or indicated in the contract documents.

If awarded a contract by the District's Board of Directors, the Bidder shall sign the contract in the blank space(s) provided therefore. If the Bidder is a sole proprietor, the true name of the fictitious business shall be set forth above, if operating under a fictitious name, together with the signature of the sole proprietor. If the Bidder is a partnership, the true name of the partnership shall be set forth above, together with the signature of the general partner authorized to sign contracts on behalf of the partnership. If the bidder is a corporation, the legal name of the corporation shall be set forth above, together with the signature of the president and secretary of the corporation. If the Bidder is another entity, the true name of the entity shall be set forth above, together with the signature of two senior officials authorized to sign contracts on behalf of the entity.

CONTRACT COMPLETION TIME

The Bidder further agrees to begin work and to complete the construction, in all respects, for which the proposal is accepted within **175 (one hundred seventy five)** calendar days from the date stated in the Notice to Proceed.

LIQUIDATED DAMAGES

Failure of the Contractor to complete the work within the time allowed will result in damages being sustained by the District. Such damages are, and will continue to be, impracticable and extremely difficult to determine. For each consecutive calendar day that the contractor fails to substantially complete all work in excess of the time period specified for the completion of the work, as may be adjusted in accordance with these contract documents, the contractor shall pay the District, or have withheld from monies due it, liquidated damages in the sum of **ONE THOUSAND DOLLARS (\$1,000)** per calendar day.

By execution of the contract, the Contractor and District agree that these liquidated damages and amounts are not unreasonable under the circumstances that exist at that time the invitations for bid were requested and at the time the contract was entered into and that the amount specified above per calendar day is the minimum value of the costs of actual damage caused by the failure of the contractor to complete the work within the allotted time. The liquidated damages shall not be construed as a penalty, and may be deducted from payments due the contractor if such delay occurs.

ADDENDA

The Bidder hereby acknowledges that he has received Addenda numbers 1 , , , , , to these contract documents by inserting the number of each Addendum in the spaces provided above.

SALES AND USE TAXES

The bidder agrees that all sales and use taxes are included in the stated bid prices for the work, unless provision is made herein for the Bidder to separately itemize the estimated amount of sales tax.

BID LIST REQUIREMENTS AND UNDERSTANDING

Bids are to be submitted for the entire work. All bid items must be filled out, and extension carried out as appropriate. **A blank space will be considered non responsive, if zero is intended then a "0" must be entered for both unit price and amount.** In case of discrepancy between the unit and lump sum prices and in the total amounts set forth in extension, the unit and lump sum price shall prevail. For purposes of comparison, the total bid amount of the bid will be the total of the base bid plus additive bid item(s). In the event the total bid amount does not agree with the sum of the total amounts for each item, the unit and lump sum price bid for each item along with its corrected/uncorrected total amount extension, shall govern. The total bid amount will be corrected accordingly, and the contractor shall be bound by said correction. The Bidder further agrees to accept as full payment for the work specified herein, the amounts computed below based on the following lump sum and unit price amounts, it being expressly understood that the unit prices are independent of the exact quantities involved. The Bidder agrees that the lump sum amounts and unit price amounts represent a true measure of the labor, material, and equipment required to perform the work, including all allowances for overhead and profit. If so requested by the District, the Contractor shall substantiate any price or prices with additional detailed price breakdown.

During or after the award of the contract, the District reserves the right to increase or diminish the amount of any item of work or item(s) as may be deemed necessary. The unit prices shall remain unchanged for the duration of this contract even if the unit quantities are decreased by any amount or increased up to 150%. The District also reserves the right to delete any bid item(s) in its entirety.

Quantities for lump sum items are shown as "LS" under the unit column and shown as one (1), however all required work for that item is inclusive. For example, a lump sum item, for potholing may involve several potholes in order to perform the required work, and the unit price of that lump sum item shall remain unchanged for the duration of this contract.

If Bidder uses add/deduct items, the Bidder will be required to identify the specific item(s) being changed and amount(s) for each in order to be considered a responsive bidder.

THE UNDERSIGNED DELCARES UNDER PENALTY OF PURJURY under the laws of the State of California that the representations made in this Bid are true and correct.

The Bidder is a (circle one):

Principal Corporation Partnership* LLC Proprietorship

Named: CCL CONTRACTING INC

Address: 1938 DON LEE PI. ESCONDIDO CA. 92029

Name: Bryan Lusk

Title: Secretary

Contractor's License No.: 798819

Class of License: A

Expiration Date: 8/31/15

Treasury I.D.: 33-0970168

Corporate Seal: _____



*If the Bidder is a partnership, all partners must sign on a separate piece of paper, which must be attached to the Bid.

624 ZONE PRSs & 944-R PRS IMPROVEMENTS (CIP P2541 & R2110)

BID LIST

Bid items are described in the Specifications, Section 01010 – Summary of Work, and the contract documents.

ITEM NO.	DESCRIPTION	QTY	UNIT	UNIT PRICE	AMOUNT
CIP P2541: PRESSURE REDUCING STATION NO. 1 (TERRA NOVA DRIVE)					
1.01	Mobilization / Demobilization	1	LS	\$ 13,800	\$ 13,800
1.02	Sheeting, Shoring, and Bracing	1	LS	\$ 300	\$ 300
1.03	Pressure Reducing Station No. 1	1	LS	\$ 94,700	\$ 94,700
1.04	2-Inch Blowoff Assembly	1	EA	\$ 9,400	\$ 9,400
1.05	2-Inch Combination Air Release and Vacuum Valve	2	EA	\$ 6,700	\$ 13,400
1.06	Asphalt Concrete Pavement Replacement	100	SF	\$ 29	\$ 2,900
1.07	Curb & Gutter Replacement	33	LF	\$ 70	\$ 2,310
1.08	Site Restoration and Erosion Control	1	LS	\$ 600	\$ 600
1.09	Cathodic Protection	1	LS	\$ 6,400	\$ 6,400
1.10	Traffic Control	1	LS	\$ 600	\$ 600
CIP P2541: PRESSURE REDUCING STATION NO. 2 (SEQUOIA STREET)					
2.01	Mobilization / Demobilization	1	LS	\$ 13,800	\$ 13,800
2.02	Sheeting, Shoring, and Bracing	1	LS	\$ 600	\$ 600
2.03	Locate, protect, temporarily support existing 30-inch steel recycled water transmission main and 30-inch RCP storm drain	1	LS	\$ 1,700	\$ 1,700
2.04	Pressure Reducing Station No. 2	1	LS	\$ 92,700	\$ 92,700
2.05	12-Inch Cement Mortar Lined and Coated Steel Pipe	74	LF	\$ 1,189	\$ 87,986
2.06	2-Inch Blowoff Assembly	1	EA	\$ 9,300	\$ 9,300
2.07	2-Inch Combination Air Release and Vacuum Valve	2	EA	\$ 6,650	\$ 13,300
2.08	12-Inch Gate Valve	3	EA	\$ 3,200	\$ 9,600
2.09	Asphalt Concrete Pavement Replacement	920	SF	\$ 12	\$ 11,040

ITEM NO.	DESCRIPTION	QTY	UNIT	UNIT PRICE	AMOUNT
2.10	Curb & Gutter Replacement	40	LF	\$ 58	\$ 2320
2.11	4" Sidewalk Replacement	155	SF	\$ 19	\$ 2945
2.12	6" Sidewalk Behind Vault	132	SF	\$ 19	\$ 2508
2.13	Retaining Wall	1	LS	\$ 16,000	\$ 16,000
2.14	Site Restoration and Erosion Control	1	LS	\$ 600	\$ 600
2.15	Cathodic Protection	1	LS	\$ 6400	\$ 6400
2.16	Traffic Control	1	LS	\$ 1700	\$ 1700
R2110: PRESSURE REDUCING STATION NO. 3 (OTAY LAKES ROAD)					
3.01	Mobilization / Demobilization	1	LS	\$ 3200	\$ 3200
3.02	Sump Pump Retrofit	1	LS	\$ 5800	\$ 5800
3.03	Ventilation System Retrofit	1	LS	\$ 11,800	\$ 11,800
3.04	Hatch Drain Retrofit	1	LS	\$ 2,300	\$ 2,300
3.05	4" Sidewalk Replacement	80	SF	\$ 25	\$ 2,000
3.06	Site Restoration and Erosion Control	1	LS	\$ 300	\$ 300
3.07	Traffic Control	1	LS	\$ 2900	\$ 2900

UNIT PRICE AND ALLOWANCE ITEMS INCLUDED IN THE CONTRACT DOCUMENTS AND INCLUDED IN THE CONTRACT SCOPE FOR THE 624 PRESSURE ZONE PRSs

Note: Quantities are an estimate for the purposes of comparing Bids only. Payment of these items will be based on actual quantities furnished, installed, disposed or constructed in accordance with the Contract Documents

4	Unknown or Unidentified Utilities	1	LS	Allowance	\$ 10,000
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SUBTOTAL ITEMS NOS. 1 THROUGH 4: \$ 455,209

ADDITIONS OR DEDUCTIONS *	CHANGE (+) or (-)	ADJUSTED BID ITEM AMOUNT
Addition (+) or Deduction (-) to Bid Item _____	\$	\$
Addition (+) or Deduction (-) to Bid Item _____	\$	\$
Addition (+) or Deduction (-) to Bid Item _____	\$	\$

*** Note Regarding Use of Addition (+) or Deduction (-) Items Above:**
Provision is made for the Bidder to include an addition or deduction in the Bid, if so desired, to reflect any last minute adjustments in prices. The addition or deduction, if made, will be applied to the Bid Items listed. **It is the Bidders responsibility to identify any ADDITIONS OR DELETIONS with a (+) or (-), accordingly.**

Should the bidder elect not adjust his bid, the bidder shall enter the words "NONE" for each of the Addition/Deduction blocks above.

TOTAL ITEMS NOS. 1 THROUGH 4:

\$ 455,209

TOTAL ITEMS NOS. 1 THROUGH 4 IN WORDS IS:

FOUR HUNDRED FIFTY-FIVE THOUSAND TWO HUNDRED
AND NINE

Bid evaluations shall be based upon bid items 1 through 4. District reserves the right to implement any alternative bid items.

SURETY

If the Bidder is awarded a construction contract pursuant to this proposal, the surety who provides the Performance Bond and the Labor and Materials Bond will be

LIBERTY MUTUAL INSURANCE COMPANY whose address is

175 BERKELEY ST. BOSTON MA 02116
Street City State Zip

BIDDER

The name of the Bidder submitting this proposal is CCL CONTRACTING INC,

doing business at 1938 DON LEE PI. ESCONDIDO CA. 92029
Street City State Zip

which is the address to which all communications concerned with this proposal and with the contract shall be sent. The names of the principal officers of the corporation submitting this proposal, or of the partnership, or of the entity, or of all persons interested in this proposal as principals are as follows:

Tom Carmichael _____
Jim Corbett _____
Bryan Lusky _____

The Bidder swears under penalty of perjury that all information provided by the Bidder is true and correct.

IF A SOLE PROPRIETOR OR PARTNERSHIP, SIGN HERE:

IN WITNESS hereto the undersigned has set his (its) hand this

_____ day of _____ 2015.

Name of Firm

Signature

Title

IF CORPORATION, SIGN HERE:

IN WITNESS WHEREOF the undersigned corporation has caused this instrument to be executed and its seal affixed by its duly authorized officers this 20 day of May 2015.

(SEAL)

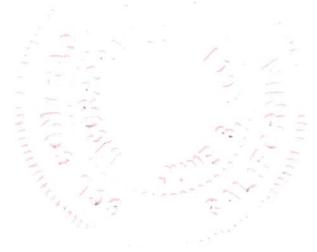
CLL CONTRACTING INC
Name of Corporation

By Thomas W Carmichael

President

By [Signature]

Secretary



IF OTHER ENTITY, SIGN HERE:

IN WITNESS hereto the undersigned has set his (its) hand this _____ day of _____ 2015.

Name of Entity

By _____

Title

By _____

Title

Attest _____

SECTION 00410
BID BOND
(FORM B)

BOND NO. _____

AMOUNT: \$ 10% _____

Know all men by these presents, that CCL CONTRACTING, INC.

as Principal, and LIBERTY MUTUAL INSURANCE COMPANY

a corporation duly organized under the laws of the State of MASSACHUSETTS

having its principal place of business at 175 BERKELEY STREET, BOSTON, MA 02116

in the State of MASSACHUSETTS and authorized to do business in the State of California, as _____

LIBERTY MUTUAL INSURANCE COMPANY

Surety, are held and firmly bound unto Otay Water District, hereinafter "Obligee", in the penal sum of TEN PERCENT OF GREATER AMOUNT BID

_____ Dollars (\$ 10% _____), for the payment of which we bind

ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THIS BOND IS SUCH THAT:

Whereas the Principal is herewith submitting his or its bid proposal for Contractor Services, said bid proposal, by reference thereto, being hereby made a part hereof.

Now, therefore, if the bid proposal submitted by the Principal is accepted, and the contract awarded to the Principal, and if the Principal shall execute the proposed contract and shall furnish such Performance Bond and Labor and Materials Bond as required by the contract documents, insurance certificates and policies, certification of worker's compensation insurance and other required documents within the time fixed by the contract documents, then this obligation shall be void. If the Principal shall fail to execute the proposed contract, furnish the required bonds and other required documents within the time specified in the contract documents, the Surety hereby agrees to pay to the Obligee the penal sum as liquidated damages.

Signed and sealed this 19TH day of MAY, 2015.

CCL CONTRACTING, INC.

PRINCIPAL

By *Bryan Lusky*

BRYAN LUSKY, SECRETARY
LIBERTY MUTUAL INSURANCE COMPANY
SURETY

By *Mark D. Iatarola*

Attorney-in-fact, MARK D. IATAROLA

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of SAN DIEGO)
On 5/20/15 before me, MICHELLE M. BASUIL, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer
personally appeared BRYAN LUSKY
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Michelle M. Basuil
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: BRYAN LUSKY
 Corporate Officer — Title(s): SECRETARY
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of SAN DIEGO)
On 5/19/2015 before me, MICHELLE M. BASUIL, NOTARY PUBLIC,
Date Here Insert Name and Title of the Officer
personally appeared MARK D. IATAROLA
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Michelle M. Basuil
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: MARK D. IATAROLA
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

THIS POWER OF ATTORNEY IS NOT VALID UNLESS IT IS PRINTED ON RED BACKGROUND.

This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

Certificate No. 6959256

American Fire and Casualty Company
The Ohio Casualty Insurance Company

Liberty Mutual Insurance Company
West American Insurance Company

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That American Fire & Casualty Company and The Ohio Casualty Insurance Company are corporations duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Helen Maloney; John G. Maloney; Mark D. Iatarola; Michelle M. Basuil

all of the city of Escondido state of CA each individually if there be more than one named, its true and lawful attorney-in-fact to make, execute, seal, acknowledge and deliver, for and on its behalf as surety and as its act and deed, any and all undertakings, bonds, recognizances and other surety obligations, in pursuance of these presents and shall be as binding upon the Companies as if they have been duly signed by the president and attested by the secretary of the Companies in their own proper persons.

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 22nd day of April, 2015.



American Fire and Casualty Company
The Ohio Casualty Insurance Company
Liberty Mutual Insurance Company
West American Insurance Company

By: David M. Carey
David M. Carey, Assistant Secretary

STATE OF PENNSYLVANIA ss
COUNTY OF MONTGOMERY

On this 22nd day of April, 2015, before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of American Fire and Casualty Company, Liberty Mutual Insurance Company, The Ohio Casualty Insurance Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my notarial seal at Plymouth Meeting, Pennsylvania, on the day and year first above written.



COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Teresa Pastella, Notary Public
Plymouth Twp., Montgomery County
My Commission Expires March 28, 2017
Member, Pennsylvania Association of Notaries

By: Teresa Pastella
Teresa Pastella, Notary Public

This Power of Attorney is made and executed pursuant to and by authority of the following By-laws and Authorizations of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company which resolutions are now in full force and effect reading as follows:

ARTICLE IV – OFFICERS – Section 12. Power of Attorney. Any officer or other official of the Corporation authorized for that purpose in writing by the Chairman or the President, and subject to such limitation as the Chairman or the President may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Corporation to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact, subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Corporation by their signature and execution of any such instruments and to attach thereto the seal of the Corporation. When so executed, such instruments shall be as binding as if signed by the President and attested to by the Secretary. Any power or authority granted to any representative or attorney-in-fact under the provisions of this article may be revoked at any time by the Board, the Chairman, the President or by the officer or officers granting such power or authority.

ARTICLE XIII – Execution of Contracts – SECTION 5. Surety Bonds and Undertakings. Any officer of the Company authorized for that purpose in writing by the chairman or the president, and subject to such limitations as the chairman or the president may prescribe, shall appoint such attorneys-in-fact, as may be necessary to act in behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations. Such attorneys-in-fact subject to the limitations set forth in their respective powers of attorney, shall have full power to bind the Company by their signature and execution of any such instruments and to attach thereto the seal of the Company. When so executed such instruments shall be as binding as if signed by the president and attested by the secretary.

Certificate of Designation – The President of the Company, acting pursuant to the Bylaws of the Company, authorizes David M. Carey, Assistant Secretary to appoint such attorneys-in-fact as may be necessary to act on behalf of the Company to make, execute, seal, acknowledge and deliver as surety any and all undertakings, bonds, recognizances and other surety obligations.

Authorization – By unanimous consent of the Company's Board of Directors, the Company consents that facsimile or mechanically reproduced signature of any assistant secretary of the Company, wherever appearing upon a certified copy of any power of attorney issued by the Company in connection with surety bonds, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

I, Gregory W. Davenport, the undersigned, Assistant Secretary, of American Fire and Casualty Company, The Ohio Casualty Insurance Company, Liberty Mutual Insurance Company, and West American Insurance Company do hereby certify that the original power of attorney of which the foregoing is a full, true and correct copy of the Power of Attorney executed by said Companies, is in full force and effect and has not been revoked.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 19TH day of MAY, 2015.



By: Gregory W. Davenport
Gregory W. Davenport, Assistant Secretary

Not valid for mortgage, note, loan, letter of credit, currency rate, interest rate or residual value guarantees.

To confirm the validity of this Power of Attorney call 1-610-832-8240 between 9:00 am and 4:30 pm EST on any business day.

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of SAN DIEGO)
On 5/20/15 before me, MICHELLE M. BASUIL, NOTARY PUBLIC,
Date Here Insert Name and Title of the Officer
personally appeared BRYAN LUSKY
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Michelle M. Basuil
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: BRYAN LUSKY
 Corporate Officer — Title(s): SECRETARY
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

**SECTION 00420
NONCOLLUSION AFFIDAVIT
(FORM C)**

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**SECTION 00430
CONTRACTOR LICENSE AFFIDAVIT
(FORM D)**

BUSINESS AND PROFESSIONAL CODE 7028.15:

"A licensed contractor shall not submit a bid to a public agency unless his or her contractor's license number appears clearly on the bid, the license expiration date is stated, and the bid contains a statement that the representations made therein are made under penalty of perjury. Any bid not containing this information, or a bid containing information which is subsequently proven false, shall be considered nonresponsive and shall be rejected by the public agency."

State of California)
) ss
)

Bryan Lusky being first duly sworn, deposes and says that he is Secretary
of CCL CONTRACTING INC, the party making the foregoing bid, is a
licensed contractor and understands the information shown below shall be included with the bid
and understands that any bid not containing this information, or if this information is
subsequently proven to be false, shall be considered nonresponsive and shall be rejected by
the District _____

798819 8/31/15

(State license number and classification) License Expiration Date

I certify under the penalty of Perjury under the laws of the State of California that the foregoing is true and correct.

Subscribed at:
ESCONDIDO SAN DIEGO CO.

(City) (County) (State)
on 5/20/15, 2015.

(Date)

NOTARY TO AFFIX SEAL
AND CERTIFICATE OF
ACKNOWLEDGMENT

798819 A

(State license number and classification)
1938 POW LES PL.

(Address)
ESCONDIDO CA. 92029

(City) (State) (Zip Code)
760 743-2254

(Telephone)

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of SAN DIEGO)
On 5/13/15 before me, MICHELLE M. BASUIL, NOTARY PUBLIC
Date Here Insert Name and Title of the Officer
personally appeared BRYAN LUSKY
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Michelle M. Basuil
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: BRYAN LUSKY
 Corporate Officer — Title(s): SECRETARY
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

**SECTION 00430
CONTRACTOR LICENSE AFFIDAVIT
(FORM D)**

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**SECTION 00440
LIST OF SUBCONTRACTORS
(FORM E)**

The Bidder shall identify all proposed subcontractors and subconsultants who will be performing work that has a value in excess of one-half (0.5) of one (1) percent of the total amount of this proposal. The Bidder certifies that the following subcontracting firms or businesses will be awarded subcontracts for the indicated portions of the work in the event that the Bidder is awarded the contract.

The Bidder shall identify the type of work the subcontractor shall perform; include the specific bid item(s) that the subcontractor(s) will perform work on; and state the percent (%) of the bid item that the subcontractor will perform.

TYPE OF WORK:

Bid Item Percent

Name

Street City

License No. /Type _____

TYPE OF WORK:

Bid Item Percent

Name

Street City

License No. /Type _____

TYPE OF WORK:

Bid Item Percent

Name

Street City

License No. /Type _____

TYPE OF WORK:

Bid Item

Percent

Name

Street

City

License No. /Type _____

TYPE OF WORK:

Bid Item

Percent

Name

Street

City

License No. /Type _____

TYPE OF WORK:

Bid Item

Percent

Name

Street

City

License No. /Type _____

BIDDER: CCL CONTRACTING INC

Signature: *By [Signature]*

Date: 5/26/15

**SECTION 00450
LIST OF REFERENCES
(FORM F)**

A minimum of five (5) project references are required for the Contractor and a minimum of three (3) project references are required for the Project Manager to be assigned to the subject work. The referenced projects must have been completed within the past five (5) years and be similar in scope including type, size, duration, value, etc. to the aforementioned project. Bidder's failure to provide current reference contact information could impact District's ability to check references. Lack of valid references could delay award of a contract to Bidder and jeopardize award.

CONTRACTOR

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Santa Margarita WD 26111 Antonio Pkwy Mission Viejo, CA 92690	Las Flores Oso Pkwy	Water 16" steel, 36" Casing (140 LF) 8" PVC	\$2,271,972	8/31/08	Bart Lantz 949 459-6504
City of Escondido 201 North Broadway Escondido, Ca	Alexander Pipeline	Water/Sewer 24" CML&C (11,000 LF) 8" VCP (2600 LF) 42" casing (240 LF)	\$3,861,659	10/30/08	Mark Lewis 760 839-4664
Santa Fe Irrigation District 5920 Linea Del Cielo Rancho Santa Fe, Ca 92067	Fairbanks	Water Valve Replacement Project	\$1,818,006	1/30/09	Bill Hunter 858 756-2424
Sweetwater Authority 505 Garrett Ave Chula Vista, CA	Chula Vista	Water	\$980,774	4/7/09	Jason Mettler 619 409-6755 Jmettler@sweetwater.org
South Coast Water District 31592 West Street Laguna Beach, CA	Dana Point	Water 36" CML&C (5,600 LF) 54" Jack and Bore (310 LF)	\$3,300,000	9/1/09	John 949 499-4555
Otay Water District 2554 Sweetwater Springs Blvd Spring Valley, CA 91978	El Cajon	Water / SD 36" CML&C (27,000 LF) 12" VCP (4,500 LF) 54" Jack and Bore (460LF) 24" RCP (245 LF)	\$14,407,033	10/15/10 NOC filed 12/14/10	Ron Ripperger 619 670-2279 RonR@otaywater.gov
Yuima Municipal Water District 34928 Valley Center Road Pauma Valley, CA 92061		Water 12" CML&C (160 LF)	\$85,812	10/8/10	Todd Engstrand 760 742-3704
City of Huntington Beach 2000 Main Street Huntington Beach CA 92648		Water Various size (5200 LF)	\$1,776,320	9/8/11	Duane Wentworth (714) 536-5517 Dwentworth@surfcity-hb.org
City of Huntington Beach 2000 Main Street Huntington Beach CA 92648		Water / SD 30" CML&C (18000 LF) 3-Deep Wells \$2,738,989 8" VCP (1420 LF)		9/26/11	Andrew Ferrigno (714) 536-5291 Aferrigno@surfcity-hb.org
Rancho California Water District 42135 Winchester Rd Temecula, CA 92589		Raise Manhole \$126,507		9/21/11	Cooly Smith 951 296-6989

Helix Water District 7811 University Ave La Mesa, Ca	La Mesa	Water 8", 10"	\$1,242,143	2/3/12	Ernie 619 596-1325 Ernesto.Vergara@helixwater.org
City of Carlsbad 1635 Faraday Ave Carlsbad, CA 92008 Joseph.mcmahon@carlsbadca.gov	Carlsbad	Sewer & Storm Drain 24" HDPE (3,000LF) 24" DIP (560 LF) 8" VCP (1680LF) 24" CIPP (3200 LF)	\$4,309,300	11/9/12	Joe McMahon 760 802-8785 NOC filed 1/8/13
Rincon del Diablo MWD 1920 North Iris Lane Escondido, Ca 92026	Escondido	Water 8"/12"/24" DIP 12,500LF	\$2,846,557	NOC 7/11/13	Clint Baze 760 745-5522 Cbaze@rinconwater.org
City of Huntington Beach 2000 Main Street Huntington Beach CA 92648		Water, Sewer, & Street Improvements 30" CML&C (12000 LF) 10" VCP (2100 LF) 30" casing (60 LF) 2-Deep Wells \$6,436,798			Andrew Ferrigno (714) 536-5291 <i>PM Rod CHILCOTE</i>
Fallbrook P U D 990 East Mission Rd. Fallbrook, Ca	Fallbrook	Water Valve replacement project 24", 16", 10", 8", CML&C piping	\$348,210	9/23/13	Jack Bebee 760 728-1125 <i>PM Bryan Lushy</i>
Rancho California Water District 42135 Winchester Rd Temecula, CA 92589		Install 1966LF 36" CML&C Install 985 LF of 24" CML&C Install 7850 CY Soil Cement Grading improvement 98 acres Discharge structures & flow control stations \$2,524,871 NOC 2/21/14			Cooly Smith 951 296-6989 <i>PM Bryan Lushy Rod CHILCOTE</i>
South Coast Water District 31592 West Street Laguna Beach, CA	Dana Point	Water, Sewer, Storm Drain 8" & 10" PVC (6,057 LF) 8", 12", 15" Sewer (1170 LF) 24", 36", 48" RCP (1024LF) NOC 4/1/14	\$2,609,796		John 949 499-4555 <i>PM Rod CHILCOTE</i>
Santa Fe Irrigation District 5920 Linea Del Cielo Rancho Santa Fe, Ca 92067	Rancho Santa Fe	Water Group 2 Pipeline Replacement Project (four locations) NOC 7/17/14	\$1,475,000	11/21/13	Bill Hunter 858 756-2424 <i>PM Bryan Lushy</i>
Santa Fe Irrigation District 5920 Linea Del Cielo Rancho Santa Fe, Ca 92067	Rancho Santa Fe	Water Pressure Reducing Stations (eight each) 1050 LF of 8" pipeline NOC 3/18/15	\$3,461,200	3/28/14	Bill Hunter 858 756-2424 <i>PM Bryan Lushy</i>
Rincon del Diablo MWD 1920 North Iris Lane Escondido, Ca 92026	Escondido	Water Northwest Quadrant recycled water 4" & 6" 3750LF	\$588,700	6/18/14 NOC 9/26/14	Clint Baze 760 745-5522 Cbaze@rinconwater.org <i>PM Bryan Lushy</i>

PROJECT MANAGER

Project Manager: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

Project Title: _____ Year Completed: _____

Type of Project _____ Contract Amount: \$ _____

Company Name: _____

Address: _____

Contact Person: _____ Tel: _____

BIDDER: CCL CONTRACTING INC

Signature: By [Signature]

Date: 5/20/15

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**SECTION 00460
COMPANY BACKGROUND QUESTIONNAIRE
(FORM G)**

Company Name: CCL CONTRACTING INC

Person Completing Form (Print): Bryon Lusk

Signature: *Bryon Lusk* Date: 5/20/15

Title: Secretary Phone Number: 760 743-2254

IMPORTANT: Falsifying information or failure to provide known information could jeopardize or delay award of a contract.

1. COMPANY HISTORY

	Yes	No
1. Have there been any previous changes to the company name or changes in ownership that have occurred within the past ten (10) years?		✓
2. Has any owner or officer of the company operated as a contractor under any other name or license number in the last ten (10) years?		✓
3. Have there been any previous changes to the company's license number(s) in the past ten (10) years?		✓
4. Is your company a subsidiary, parent, holding company or affiliate of another construction company?		✓

If 'Yes' to any of the above provide details for each on the lines below including, but not limited to, previous company name and/or number, date of name change, date of change in ownership.

2. COMPANY FINANCIAL RECORD

	Yes	No
1. Was your company in bankruptcy at any time during the last ten (10) years or currently filing for bankruptcy?		<input checked="" type="checkbox"/>

If 'Yes' to the above provide details on the lines below including, but not limited to, case number, bankruptcy court, and the date the petition was filed.

3. CIVIL COURT ACTIONS

	Yes	No
1. Has your company, or any owner or officer of your company, ever been found liable in a civil suit?		<input checked="" type="checkbox"/>
2. Have there been any judgments against your company or any owner or officer of your company within the past ten (10) years?		<input checked="" type="checkbox"/>
3. In the past ten (10) years, has your company or any owner or officer of your company made any claim in excess of \$50,000 against a project owner and filed that claim in court or arbitration?		<input checked="" type="checkbox"/>
4. In the past ten (10) years, have there been any claims in excess of \$50,000 that have been filed in court or arbitration against your company?		<input checked="" type="checkbox"/>

If 'Yes' to any of the above provide details for each on the lines below including, but not limited to, project name, date of the claim, name of the claimant, name of the entity (or entities) against whom the claim was filed, brief description of the claim, the court and case number, if applicable, brief description of the status (i.e. pending, resolved, a description of the resolution, etc.).

4. CRIMINAL ACTIONS

	Yes	No
1. Has your company or any owner or officer of your company ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?		✓
2. Has your company or any owner or officer of your company ever been found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity?		✓
3. Has any state or local agency taken any disciplinary action against your company or any owner or officer of your company?		✓

If 'Yes' to any of the above provide details for each on the lines below including, but not limited to, the person or persons convicted, the name of the victim, the date of conviction, the court and case number, the crime and year convicted.

5. CONTRACT AWARD

	Yes	No
1. Has your company ever been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?		✓
2. In the past ten (10) years, has your company or any owner or officer of your company been listed on the Excluded Parties List System (EPLS), debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?		✓

If 'Yes' to any of the above provide details for each on the lines below including, but not limited to, year of the event, the owner, the project, entity denying the award, the basis for the finding by the public agency, name of the organization debarred.

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**SECTION 00470
COMPANY SAFETY QUESTIONNAIRE
(FORM H)**

Company Name: CCL CONTRACTING INC
 Person Completing Form (Print): Bryan Lusky
 Signature: *Bryan Lusky* Date: 5/20/15
 Title: Secretary Phone Number: 760 743-2254

IMPORTANT: Falsifying information or failure to provide known information could jeopardize or delay award of a contract.

SAFETY PERFORMANCE

1. List your company's Interstate Experience Rating Modifier (ERM) for the three most recent years.

20	<u>15</u>	<u>.89</u>
20	<u>14</u>	<u>.72</u>
20	<u>13</u>	<u>.99</u>

2. List your company's number of injuries/illnesses from your OSHA 300 logs for the three most recent years.

	20	<u>15</u>	20	<u>14</u>	20	<u>13</u>
a. Fatalities		<u>0</u>		<u>0</u>		<u>0</u>
b. OSHA recordable incidents		<u>0</u>		<u>0</u>		<u>0</u>
c. Lost work day incidents		<u>1</u>		<u>0</u>		<u>0</u>
d. Total lost work days		<u>2</u>		<u>0</u>		<u>0</u>
e. Total hours worked		<u>on going</u>		<u>31,765</u>		<u>30,505</u>

3. Please provide copies of the following upon award: Check if Available

- a. OSHA 300 logs for the most recent three years and current year-to-date
- b. Verification of ERM from your insurance carrier
- c. Injury/Illness Report
- d. Complete written Safety Program
- e. Training Plans
- f. Training Certificates for Employees
- g. Emergency Response Training

*Primary contractors must submit all information requested on No. 3 (a-g) to the District.
 Subcontractors must submit information (a-c) to the District and d-g to the primary contractor and should be made available to the District upon request.*

4. Company Safety Contact

a. Name: Bryan Lusky

b. Phone: 760 743-2254

SAFETY PROGRAM

1. SAFETY PROGRAM DOCUMENTATION

Circle One

a. Do you have a written safety program manual?

Yes No

Last revision date 2014

b. Do you have a written safety field manual?

Yes No

c. Are all workers given a booklet that contains work rules, responsibilities and other appropriate information?

Yes No

2. POLICY AND MANAGEMENT SUPPORT

a. Do you have a safety policy statement from an officer of the company?

Yes No

b. Do you have a disciplinary process for enforcement of your safety program?

Yes No

c. Does management set corporate safety goals?

Yes No

d. Does executive management review:

- Accident reports?
- Inspection reports?
- Safety statistics?

e. Do you safety pre-qualify subcontractors?

Yes No

f. Do you have a written policy on accident reporting and investigation?

Yes No

g. Do you have a light-duty, return-to-work policy?

Yes No

h. Is safety part of your supervisor's performance evaluation?

Yes No

i. Do you have a personal protective equipment (PPE) policy?

Yes No

j. Do you have a written substance abuse program?

Yes No

If yes, check which apply:

- | | |
|---|---|
| <input type="checkbox"/> Pre-employment testing | <input type="checkbox"/> Return to duty testing |
| <input type="checkbox"/> Random testing | <input type="checkbox"/> Disciplinary process |
| <input type="checkbox"/> Reasonable cause testing | <input type="checkbox"/> Alcohol Testing |
| <input type="checkbox"/> Post accident testing | <input type="checkbox"/> National Institute on Drug Abuse |
| <input type="checkbox"/> Panel Screen | |

k. Does each level of management have assigned safety duties and responsibilities?

Yes No

3. TRAINING AND ORIENTATION

Circle One

- a. Do you conduct safety orientation training for each employee? Yes No
- b. Do you conduct site safety orientation for every person new to the job? Yes No
- c. Does your safety program require safety training meetings for each supervisor (foreman and above)? How often? Yes No
 Weekly Monthly Quarterly Annually
- d. Do you hold tool box/tailgate safety meetings focused on your specific work operations/exposures? Yes No
 Weekly Daily
- e. Do you require equipment operation/certification training? Yes No

4. ADMINISTRATION AND PROCEDURES

- a. Does your written safety program address administrative procedures? Yes No

If yes, check which apply:

- | | |
|---|--|
| <input type="checkbox"/> Pre-project/task planning | <input type="checkbox"/> Emergency procedures |
| <input type="checkbox"/> Record keeping | <input type="checkbox"/> Audits/inspections |
| <input type="checkbox"/> Safety committees | <input type="checkbox"/> Accident investigations/reporting |
| <input type="checkbox"/> HAZCOM | <input type="checkbox"/> Training documentation |
| <input type="checkbox"/> Substance abuse prevention | <input type="checkbox"/> Hazardous work permits |
| <input type="checkbox"/> Return-to work | <input type="checkbox"/> Subcontractor prequalification |

- b. Do you have project safety committees? Yes No
- c. Do you conduct job site safety inspections? How often? Yes No
 Daily Weekly Monthly
- d. Do these inspections include a routine safety inspection of equipment (e.g. scaffold, ladders, fire extinguishers, etc.)? Yes No
- e. Do you investigate accidents? How are they reported? Yes No
 Total company By superintendent
 By project By project manager
 By foreman In accordance with OSHA
- f. Do you discuss safety at all preconstruction and progress meetings? Yes No
- g. Do you perform rigging and lifting checks prior to lifting? Yes No
 For personnel For equipment Heavy lifts (more than 10,000 lbs)

5. WORK RULES

Circle One

a. Do you periodically update work rules?

Yes No

When was the last update? _____

b. What work practices are addressed by your work rules?
Check all that apply.

- | | |
|--|--|
| <input checked="" type="checkbox"/> CPR/first aid | <input type="checkbox"/> Access-entrances/stairs |
| <input checked="" type="checkbox"/> Barricades, signs, and signals | <input type="checkbox"/> Respiratory protection |
| <input type="checkbox"/> Blasting | <input type="checkbox"/> Material handling/storage |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Temporary heat |
| <input type="checkbox"/> Compressed air and gases | <input type="checkbox"/> Vehicle Safety |
| <input type="checkbox"/> Concrete work | <input checked="" type="checkbox"/> Traffic control |
| <input type="checkbox"/> Confined-space entry | <input type="checkbox"/> Site visitor escorting |
| <input type="checkbox"/> Cranes/rigging and hoisting | <input checked="" type="checkbox"/> Public protection |
| <input type="checkbox"/> Electrical grounding | <input type="checkbox"/> Equipment guards and grounding |
| <input type="checkbox"/> Environmental controls and
Occupational health | <input type="checkbox"/> Monitoring Equipment |
| <input type="checkbox"/> Emergency procedures | <input type="checkbox"/> Flammable material handling/storage |
| <input type="checkbox"/> Fire protection and prevention | <input checked="" type="checkbox"/> Site sanitation |
| <input type="checkbox"/> Floor and wall openings | <input checked="" type="checkbox"/> Trenching and excavating |
| <input type="checkbox"/> Fall protection | <input checked="" type="checkbox"/> Lockout/Tagout |
| <input type="checkbox"/> Housekeeping | <input type="checkbox"/> Energized/pressurized equipment |
| <input checked="" type="checkbox"/> Ladders and scaffolds | <input type="checkbox"/> Personal protective equipment |
| <input type="checkbox"/> Mechanical equipment | <input type="checkbox"/> Tools, power and hand |
| <input checked="" type="checkbox"/> Welding and cutting (hot work) | <input type="checkbox"/> Electrical power lines |
| | <input type="checkbox"/> Other _____ |

6. OSHA INSPECTIONS

a. Have you been inspected by OSHA in the last three years?

Yes No

b. Were these inspections in response to complaints?

Yes No

c. Have you been cited as a result of these inspections?

Yes No

If yes, describe the citations:
