

COUNTY OF LOS ANGELES

FIRE DEPARTMENT

1320 NORTH EASTERN AVENUE LOS ANGELES, CALIFORNIA 90063-3294 (323) 881-2401

P. MICHAEL FREEMAN FIRE CHIEF FORESTER & FIRE WARDEN

July 5, 2006

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:

APPROVAL OF CONTRACTS FOR FIRE FLEET MAINTENANCE AND REPAIR SERVICES (ALL DISTRICTS) (3 VOTES)

IT IS RECOMMENDED THAT YOUR BOARD ACTING AS THE GOVERNING BODY OF THE CONSOLIDATED FIRE PROTECTION DISTRICT:

- 1. Find that these contracts are exempt from the provisions of the California Environmental Quality Act (CEQA).
- 2. Approve and instruct the Mayor to sign three-year contracts, in substantially the form of Attachment A, with the attached list of selected vendors, to provide fire fleet maintenance and repair services on an as needed and intermittent basis. The initial term of the contracts will be for three (3) years, with two (2) one-year extensions, and also include an additional twelve (12) month-to-month extensions, not to exceed a total possible contract term of six (6) years for each contract.

SERVING THE UNINCORPORATED AREAS OF LOS ANGELES COUNTY AND THE CITIES OF:

- 3. Authorize the Fire Chief, or his designee, to amend, suspend and/or terminate these contracts, if deemed necessary, in accordance with the District's contracts for Fire Fleet Maintenance and Repair Services. In addition, authorize the Fire Chief or his designee to amend these contracts by way of extension, not to exceed two (2) year extensions and an additional twelve (12) month-to-month extensions, and grant rate increases which are in accordance with the terms and conditions as set forth above and in accordance with the District's contracts for Fire Fleet Maintenance and Repair Services.
- 4. Authorize these contracts, in total, expenditures for the first three (3) contract years of \$10,500,000 in an amount not to exceed \$3,500,000 per year, representing the total annual cost based on the District's previous and current fiscal year expenditures. In addition, authorize total expenditures for the two (2) additional one-year periods and an additional twelve (12) month-to-month extensions at \$3,500,000 per year. The expenditure authority for all six (6) contract years is \$3,500,000 per year. Cost of Living Adjustment (COLA) requests for multi-year service contracts will be applicable to these Contracts after the first year. (Policy No. 5.070 of the Board of Supervisors Policy Manual.)

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Since 1987, the District has contracted for vehicle and equipment repair services to respond to periods of peak workload and when the repairs are needed on a part-time or intermittent basis. In addition, the District provides fire protection services in 58 contract cities, with 158 stations located throughout Los Angeles County.

On May 8, 2006, thirty-one (31) fleet services contracts with the District expired. Through the current bid process, the District received fifty-six (56) vendor bids which will improve the District's ability to receive a variety of fleet services for the Districts vehicles and boats, on an as needed, part-time or intermittent basis.

Annually and upon the contracts' anniversary dates, these contracts will be subject to COLA requests for multi-year service contracts, allowing for increases based upon the CPI that shall not exceed the general salary movement granted to County employees as determined by the CAO as of each July 1 for the prior 12-month period.

Furthermore, should fiscal circumstances ultimately prevent the Board of Supervisors from approving any increase in County employee salaries, no COLAs will be granted.

The Honorable Board of Supervisors July 5, 2006 Page 3

Implementation of Strategic Plan Goals

These contracts are consistent with the County's Strategic Plan Goal of Service Excellence and Public Safety.

The services are to be provided on an intermittent basis and the vendors have the appropriate expertise to complete the work, which will allow the Consolidated Fire Protection District to provide services to the public in a more responsive manner. It is consistent with the overall County Strategic Plan Goal, Goal 8, under Public Safety.

ENVIRONMENTAL DOCUMENTATION

The services provided through these contracts will not have significant effect on the environment and therefore these contracts are exempt from CEQA, pursuant to Section 15061 (b) (3) of the CEQA Guidelines

FISCAL IMPACT/FINANCING

Budget appropriations have been made and approved for the current 2006-2007 fiscal year.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The District is authorized to contract for these services under California Health and Safety Code section 13861.

The Statement of Work covers categories of services required by the District, which are in compliance with the Bureau of Automotive Repair, California State Department of Consumer Affairs (BAR), the National Institute for Automotive Service Excellence (ASE), and by all Original Equipment Manufacturer Part (OEM) specifications.

As the District provides services in fifty-eight (58) contracted cities and has one hundred fifty-eight (158) stations located throughout Los Angeles County, the usage of its fleet is a vital factor in the goal of the Department.

In addition to the maintenance and repair services of the District's fleet, these contracts will also provide the maintenance and repair of the Lifeguard Division fleets and boats. The approval of the attached list of contractors will enable the District to continue its mission without affecting the quality of service we provide.

On final analysis and consideration of the awards, these vendors were selected without regard to race, color, creed, or national origin.

The Honorable Board of Supervisors July 5, 2006 Page 4

CONTRACTING PROCESS

On March 14, 2006, the District issued an Invitation for Bid (IFB) seeking qualified vendors who could perform fire fleet maintenance and repair services. In addition to posting the announcement on the County's WebVen, advertisements were posted in six (6) local community newspapers. One hundred and sixty-six (166) Invitation for Bids were distributed.

The District has determined that all the vendors submitted for award of these contracts have confirmed, through their Statement of Hourly Rates, Costs, and Fixed Fees (price list – Attachment B), fees that are conducive with creating a savings to the District for contracting these services with the private sector versus having these services carried out by County employees.

The District has evaluated and determined that the vendors comply with the District's policy of compliance with the Community Business Enterprises Program (Attachment C), Child Support Compliance Program and Contractor's Responsibility and Debarment Program, the Safely Surrendered Baby Law, and the Contractor Employee Jury Services-Program, and agree to maintain compliance with all requirements throughout the term of their contracts.

The District has reviewed the Better Business Bureaus and the State's Business License websites to assess the proposed contractors past performances, negative experiences, and complaints with other agencies and find that they are currently not in any violations.

The contracts include COLAs which will be applicable after the initial contract year and thereafter on a yearly basis, including the two (2) one year extensions and the twelve (12) one-month extensions. This will allow the amounts on the contracts to be adjusted annually, based on the increase or decrease in the U.S. Department of Labor, Bureau of Labor Statistics' Consumer Price Index. Also, any increase shall not exceed the general salary movement granted to County employees as determined by the Chief Administrative Office as of each July 1 for the prior 12-month period. Furthermore, should fiscal circumstances ultimately prevent the Board of Supervisors from approving any increases in County employee's salaries; no COLAs will be granted.

The vendors were evaluated and deemed capable of performing the services requested, based on their qualifications and experience as stated in their bids.

IMPACT ON CURRENT SERVICES

There will be no significant impact on current services as there will be no displacement of any County employees. These services are presently contracted with the private sector.

The Honorable Board of Supervisors July 5, 2006 Page 5

CONCLUSION

Upon execution by your Honorable Board, the District will need two (2) original certified copies of the adopted Board letter and Contract. It is requested that the Executive Office of the Board notify the District's Contract Administrator, Lucy Guadiana, at (323) 838-2275 when the documents become available.

Respectfully submitted,

P. MICHAEL FREEMAN

PMF:slr

Enclosures (3)

c: Chief Administrative Office

County Counsel

Executive Office, Board of Supervisors



COUNTY OF LOS ANGELES

FIRE DEPARTMENT

1320 NORTH EASTERN AVENUE LOS ANGELES, CALIFORNIA 90063-3294 (323) 881-2401

P. MICHAEL FREEMAN FIRE CHIEF FORESTER & FIRE WARDEN

June 22, 2006

Agenda Date: July 5, 2006

APPROVAL OF CONTRACTS FOR FIRE FLEET MAINTENANCE AND REPAIR SERVICES

List of Selected Vendors

	VENDOR NAME	CONTRACT NUMBER		
1.	A.V. Auto Body & Truck, Inc.			
2.	2. A-1 Transmission			
3.	Advanced Electronics, Inc.			
4.	Advanced Systems Services, Inc.			
5.	Atlas Radiator, Inc.			
6.	Baldwin Auto Body			
7.	BECS A Division of ADP (USA), Inc.			
8.	Betts Spring Co.			
9.	Bob Wondries Ford			
10.	California's Best Radiator, Inc.			
11.	City Terrace Service, Inc.			

SERVING THE UNINCORPORATED AREAS OF LOS ANGELES COUNTY AND THE CITIES OF:

	VENDOR NAME	CONTRACT NUMBER
12.	Clark & Howard Towing	
13.	Collins Trim Shop	
14.	Ed Butts Ford	
15.	Ellis Truck & Bus Repair Inc.	
16.	Ford of Montebello	
17.	Get Tires	
18.	Glass Doctor of Montebello	
19.	Green's OK Tire, Inc.	
20.	H.W. Hunter Inc.	
21.	Harbor Diesel & Equipment, Inc.	
22.	Interstate Tire Distributor, Inc.	
23.	Jay's Automatic Transmissions	
24.	Keystone Towing	
25.	Lancaster Auto Interiors	
26.	Los Angeles Freightliner	
27.	Lynn's Auto Air Inc.	
28.	Markham and Boling, Inc.	
29.	Master Body Sales & Service, Inc.	
30.	Morgan Attwood & Son, Inc.	
31.	Northstar Electronics, LLC.	
32.	Olympic Top Shop	
33.	Ostrom Chevrolet	
34.	Palmdale Uni-Body & Paint	
35.	Parkhouse Tire Inc.	
36.	Peck Road Ford Truck Center	

	VENDOR NAME	CONTRACT NUMBER
37.	Pepe's Towing Service Inc.	
38.	Peterson Hydraulics, Inc.	
39.	Powertrain Reman Industries	
40.	PTO Sales, Corporation	
41.	Quinn Power Systems	
42.	Rush Truck Centers of California	
43.	Safelite AutoGlass	
44.	Smith and Hartford Coach Works	
45.	South Bay Ford, Inc.	
46.	Speedo Electric Inc.	
47.	The BoatYard	
48.	Truck Specialty Service, Inc.	
49.	United Auto & Truck, Inc.	
50.	United Transmission Exchange	
51.	Valco Transmission Ltd.	
52.	Vision Communications	
53.	Western Automatic Transmission Exchange, Inc.	
54.	Wondries Chevrolet	
55.	Wondries Nissan	
56.	Wondries Toyota	



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1320 NORTH EASTERN AVENUE LOS ANGELES, CALIFORNIA 90063-3294 (323) 881-2401

P. MICHAEL FREEMAN FIRE CHIEF FORESTER & FIRE WARDEN

Fire Fleet Maintenance and Repair Services CONTRACT FORM

ATTACHMENT A

SERVING THE UNINCORPORATED AREAS OF LOS ANGELES COUNTY AND THE CITIES OF:

Contract No.:	



CONTRACT

BY AND BETWEEN

CONSOLIDATED FIRE PROTECTION DISTRICT OF LOS ANGELES COUNTY

AND

(CONTRACTOR)

FOR

FIRE FLEET MAINTENANCE AND REPAIR SERVICES

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CONTRACT

- STANDARD EXHIBITS -

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Statement of Work - Attachment 1

- **B** Statement of Hourly Rates, Costs, and Fixed Fees
- C Contractor's EEO Certification
- **D** District's Administration
- **E** Contractor's Administration
- **F** Forms Required at the Time of Contract Execution
 - F1 Contractor Employee Acknowledgement & Confidentiality Agreement
 - F2 Contractor Non-Employee Acknowledgment & Confidentiality Agreement
- **G** Jury Service Ordinance
- H Safely Surrendered Baby Law

Contract	No.:	

CONTRACT BETWEEN

CONSOLIDATED FIRE PROTECTION DISTRICT OF LOS ANGELES COUNTY AND

	AND
	FOR
FIRE FLEET N	MAINTENANCE AND REPAIR SERVICES
This Contract, including	all Exhibits, is made and entered into this
day of	, 2006,
by and between	CONSOLIDATED FIRE PROTECTION DISTRICT
	OF LOS ANGELES COUNTY
	(hereafter "District")
and	
	(hereafter "Contractor") RECITALS
	is authorized by the Health and Safety Code Section
	h public or private companies to provide fire fleet services on an intermittent and temporary basis; and
WHEREAS, the District I	nas the responsibility for maintaining and repairing its fleet

NOW THEREFORE, in consideration of the mutual covenants contained herein, and for good and valuable consideration, the parties agree as follows:

to ensure the safety of its employees and to achieve its mission to protect lives and

property; and

1.0 APPLICABLE DOCUMENTS

Exhibits A, B, C, D, E, F, G, and H, are attached to and form a part of this Contract. In the event of any conflict or inconsistency in the definition or interpretation of any word, responsibility, schedule, or the contents or description of any task, deliverable, goods, service, or other work, or otherwise between the base Contract and the Exhibits, or between Exhibits, such conflict or inconsistency shall be resolved by giving precedence first to the Contract and then to the Exhibits according to the following priority:

1.1 STANDARD EXHIBITS

- EXHIBIT A STATEMENT OF WORK <u>and</u>
 STATEMENT OF WORK Attachment 1
- EXHIBIT B STATEMENT OF HOURLY RATES, Costs, and Fixed
 Fees
- EXHIBIT C CONTRACTOR'S EEO CERTIFICATION
- EXHIBIT D **DISTRICT'S ADMINISTRATION**
- EXHIBIT E Contractor's Administration
- EXHIBIT F FORMS REQUIRED AT THE TIME OF CONTRACT
 EXECUTION
- EXHIBIT G Jury Service Ordinance
- EXHIBIT H SAFELY SURRENDERED BABY LAW

This Contract and the Exhibits hereto constitute the complete and exclusive statement of understanding between the parties, and supersedes all previous Contracts, written and oral, and all communications between the parties relating to the subject matter of this Contract. No change to this Contract shall be valid unless prepared pursuant to Sub-paragraph 8.4 - Change Notices and Amendments and signed by both parties.

2.0 DEFINITIONS

The headings herein contained are for convenience and reference only and are not intended to define the scope of any provision thereof. The following words as used herein shall be construed to have the following meaning, unless otherwise apparent from the context in which they are used.

- 2.1 CONTRACT: Agreement executed between District and Contractor. It sets forth the terms and conditions for the issuance and performance of the Statement of Work, Exhibit A.
- **2.2 CONTRACTOR:** The sole proprietor, partnership, or corporation that has entered into a contract with the District to perform or execute the work covered by the *Statement of Work*, *Exhibit A*.
- 2.3 CONTRACTOR PROJECT MANAGER: The individual designated by the Contractor to administer the Contract operations after the Contract award.
- **2.4 COUNTY:** Refers to the County of Los Angeles.
- **2.5 DISTRICT:** Refers to the Consolidated Fire Protection District of Los Angeles County.
- 2.6 DISTRICT CONTRACT DIRECTOR: Person designated by District with authority for District on contractual or administrative matters relating to this contract that cannot be resolved by the District Contract Administrator.
- 2.7 DISTRICT CONTRACT ADMINISTRATOR: Person designated by District's Contract Director to manage the operations under this Contract.
- 2.8 DISTRICT CONTRACT PROJECT MANAGER: Person with responsibility to oversee the day to day activities of this Contract for the District. Responsibility for inspections of any and all tasks, deliverables, goods, services and other work provided by Contractor.

- **2.9 DAY(S):** Calendar day(s) unless otherwise specified.
- **2.10 FISCAL YEAR:** The twelve (12) month period beginning July 1st and ending the following June 30th.

3.0 STATEMENT OF WORK

- **3.1** Pursuant to the provisions of this Contract, the Contractor shall fully perform, complete and deliver on time, all tasks, deliverables, services and other work as set forth in the *Statement of Work, Exhibit A.*
- 3.2 If the Contractor provides any tasks, deliverables, goods, services, or other work, other than as specified in this Contract, the same shall be deemed to be a gratuitous effort on the part of the Contractor, and the Contractor shall have no claim whatsoever against the District.

4.0 TERM OF CONTRACT

- **4.1** The term of this Contract shall be for a period of three (3) years commencing after execution by the Board of Supervisors, unless sooner terminated or extended, in whole or in part, as provided in this Contract.
- 4.2 The District shall have the sole and exclusive option to extend the Contract term for two (2) one-year periods and additional twelve (12) month-to-month extensions, for a maximum total Contract term of six (6) years. The District, through the Fire Chief, shall have the option to extend the Contract. Renewal options shall be exercised individually and separately at the sole discretion of the Fire Chief or authorized designee.
- 4.3 Contractor shall notify District when this Contract is within six (6) months from the expiration of the term as provided for hereinabove. Upon occurrence of this event, Contractor shall send written notification to District at the address herein provided in Exhibit D District's Administration.

5.0 CONTRACT SUM

- 5.1 The amount the District shall expend from its own funds during the Contract's entire term for Fire Fleet Maintenance and Repair Services for all Contractors shall not exceed, in aggregate, \$3,500,000 per year. Effective upon the expiration of the Contract's third year, the Contract allows for the renewal options that include two (2) one-year periods and twelve (12) month-to-month extensions. In accordance with Sub-Paragraph 5.6, Cost of Living Adjustments (COLA's) are allowed after the first year of the Contract.
- 5.2 The Contractor shall not be entitled to payment or reimbursement for any tasks or services performed, nor for any incidental or administrative expenses whatsoever incurred in or incidental to performance hereunder, except as specified herein. Assumption or takeover of any of the Contractor's duties, responsibilities, or obligations, or performance of same by any entity other than the Contractor whether through assignment, subcontract, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever, shall occur only with the District's express prior written approval.
- 5.3 Contractor shall maintain a system of record keeping that will allow Contractor to determine when it has incurred seventy-five percent (75%) of the total contract authorization under this Contract. Upon occurrence of this event, Contractor shall send written notification to District at the address herein provided in *Exhibit D, District's Administration*.

5.4 NO PAYMENT FOR SERVICES PROVIDED FOLLOWING EXPIRATION/ TERMINATION OF CONTRACT

Contractor shall have no claim against District for payment of any money or reimbursement, of any kind whatsoever, for any service provided by Contractor after the expiration or other termination of this Contract. Should Contractor receive any such payment, it shall immediately notify District and shall immediately repay all such funds to District. Payment by District for services rendered after expiration or termination of this Contract shall not constitute a waiver of District's right to recover such payment from Contractor. This provision shall survive the expiration or other termination of this Contract.

5.5 INVOICES AND PAYMENTS

- 5.5.1 The Contractor shall invoice the District only for providing the tasks, deliverables, goods, services, and other work specified in *Exhibit A Statement of Work* and elsewhere hereunder. The Contractor shall prepare invoices, which shall include the charges owed to the Contractor by the District under the terms of this Contract. The Contractor's payments shall be as provided in *Exhibit B Statement of Hourly Rates, Costs, and Fixed Fees*, and the Contractor shall be paid only for the tasks, deliverables, goods, services, and other work approved in writing by the District. If the District does not approve work in writing no payment shall be due to the Contractor for that work.
- **5.5.2** The Contractor's invoices shall be priced in accordance with Exhibit B Statement of Hourly Rates, Costs, and Fixed Fees.
- 5.5.3 The Contractor's invoices shall contain the information set forth in Exhibit A - Statement of Work describing the tasks, deliverables, goods, services, work hours, and facility and/or other work for which payment is claimed.
- **5.5.4** Payment to Contractor shall be made on an arrears basis, upon acceptance of completed work by District, provided that the Contractor is not in default under any provisions of this

Contract. Contractor is to provide the completed **ORIGINAL** invoice, along with one (1) copy to the following address:

Consolidated Fire Protection District of Los Angeles County Financial Management Division – Expenditure Management P.O. Box 910901

Commerce, California 90091-0901

- 5.5.5 District Approval of Invoices. All invoices submitted by the Contractor for payment must have the written approval of the District Contract Project Manager prior any payment thereof. In no event shall the District be liable or responsible for any payment prior to such written approval. Approval for payment will not be unreasonably withheld, and in no instance will such approval take more than two (2) weeks from receipt of properly prepared invoices by the District. To assist the District in making timely payment for services provided hereunder, Contractor's invoice shall contain the following:
 - (1) Contract number
 - (2) Date of Service
 - (3) A breakdown of labor hours, hourly rate and material costs as separate items, e.g., Labor: 3 hours @ \$30/hour = \$90.00

This detail is required when job price is quoted as time and material at the beginning of any individual work item.

- (4) Fixed fees (e.g., any flat rate job) authorized by the District's Project Manager or authorized designee
- (5) Employee Name and Employee Number of District Employee who ordered or authorized service

- (6) A copy of subcontractor or sublet cost with invoice if a portion of work is contracted out
- (7) Signature of authorized District employee. Contractor's failure to obtain the signature of the District employee authorizing the work shall invalidate the repair order and will result in non-payment.
- 5.5.6 Contractor shall send one (1) copy of the invoice to the District representative authorizing the work, which shall review and approve all invoices of payment. Copy shall be mailed or faxed to:

William Watkins, Assistant Chief or

Craig Weeks, Acting Assistant Chief

Consolidated Fire Protection District of Los Angeles County

Fire Fleet Services Division

1104 North Eastern Avenue, Door 33

Los Angeles, California 90063

Fax: (323) 261-1472

5.6 COST OF LIVING ADJUSTMENTS (COLA'S)

The Contract (hourly, daily, monthly, etc.) amount may be adjusted annually based on the increase or decrease in the U.S. Department of Labor, Bureau of Labor Statistics' Consumer Price Index (CPI) for the Los Angeles-Riverside-Orange County Area for the most recently published percentage change for the 12-month period preceding the contract anniversary date which shall be the effective date for any cost of living adjustment. However, any increase shall not exceed the general salary movement granted to County employees as determined by the Chief Administrative Office as of each July 1 for the prior 12-month period. Furthermore, should fiscal circumstances ultimately prevent the Board of Supervisors from approving any increase in County employee salaries, no cost of living adjustments will be granted. Contractor must submit

proposed adjustment to District's Contract Administrator. All price increases shall be subject to acceptance and approval by the District's Contract Administrator. After approval by the District's Contract Administrator, the revised price may not be increased for a period of one year from the date of District's approval.

6.0 ADMINISTRATION OF CONTRACT – DISTRICT

DISTRICT ADMINISTRATION

A listing of all District Administration referenced in the following Subparagraphs are designated in *Exhibit D*, *District's Administration*. The District shall notify the Contractor in writing of any change in the names or addresses shown.

6.1 DISTRICTS CONTRACT DIRECTOR

The responsibilities of the District's Contract Director include:

 Making authoritative decisions on contractual or administrative matters relating to this Contract that cannot be resolved by the District Contract Administrator.

6.2 DISTRICTS CONTRACT ADMINISTRATOR

The responsibilities of the District's Contract Administrator include:

- ensuring that the objectives of this Contract are met;
- making changes in the terms and conditions of this Contract in accordance with Sub-paragraph 8.4, Change Notices and Amendments; and
- providing direction to Contractor in the areas relating to District policy, information requirements, and procedural requirements.
- meeting with Contractor's Project Manager on a regular basis;
 and

• inspecting any and all tasks, deliverables, goods, services, or other work provided by or on behalf of Contractor.

6.3 DISTRICTS CONTRACT PROJECT MANAGER

The District's Contract Project Manager is responsible for overseeing the day-to-day administration of this Contract. These responsibilities include:

- Meeting with Contractor's Project Manager on a regular basis and
- Inspecting any and all task, deliverable, goods, services, or other work provided by or on behalf of Contractor.

The District's Contract Project Manager is not authorized to make any changes in any of the terms and conditions of this contract and is not authorized to further obligate District in any respect whatsoever.

7.0 ADMINISTRATION OF CONTRACT – CONTRACTOR

CONTRACTORS ADMINISTRATION

7.1 CONTRACTORS PROJECT MANAGER

- 7.1.1 Contractor's Project Manager is designated in Exhibit E-Contractor's Administration. The Contractor shall notify the District in writing of any change in the name or address of the Contractor's Project Manager.
- 7.1.2 Contractor's Project Manager shall be responsible for Contractor's day-to-day activities as related to this Contract and shall coordinate with District's Contract Project Manager on a regular basis.

7.2 APPROVAL OF CONTRACTORS STAFF

District has the absolute right to approve or disapprove all of Contractor's staff performing work hereunder and any proposed changes in Contractor's staff, including, but not limited to, Contractor's Project Manager.

7.3 CONFIDENTIALITY

Contractor shall maintain the confidentiality of all records obtained from the District under this Contract in accordance with all applicable Federal, State or local laws, ordinances, regulations and directives relating to confidentiality.

The Contractor shall inform all of its officers, employees, agents and subcontractors providing services hereunder of the confidentiality provisions of this Contract. The Contractor shall cause each employee performing services covered by this Contract to sign at time of hire and adhere to the "Contractor Employee Acknowledgment & Confidentiality Agreement", Exhibit F1.

Contractor shall cause each non-employee performing reoccurring services covered by this Contract to sign before beginning service and adhere to the "Contractor Non-Employee Acknowledgment & Confidentiality Agreement", Exhibit F2.

8.0 STANDARD TERMS AND CONDITIONS

8.1 ASSIGNMENT BY CONTRACTOR

8.1.1 Contractor shall not assign its rights or delegate its duties under this Contract, or both, whether in whole or in part, without the prior written consent of the District, in its discretion, and any attempted assignment or delegation without consent shall be null and void. For purposes of this paragraph, District consent shall require a written amendment to the Contract, which is formally approved and executed by the parties. Any payments by the District to any approved delegate or assignee on any claim under this Contract shall be deductible, at District's sole discretion, against the claims,

which the Contractor may have against the District.

- 8.1.2 Shareholders, partner, members, or other equity holders of Contractor may transfer, sell, exchange, assign, or divest themselves of any interest they may have therein. However, in the event any such sale, transfer, exchange, assignment, or divestment is effected in such a way as to give majority control of Contractor to any person(s), corporation, partnership, or legal entity other than the majority controlling interest therein at the time of execution of the Contract, such disposition is an assignment requiring the prior written consent of District in accordance with applicable provisions of this Contract.
- 8.1.3 Any assumption, assignment, delegation, or takeover of any of the Contractor's duties, responsibilities, obligations, or performance of same by any entity other than the Contractor, whether through assignment, subcontract, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever without District's express prior written approval, shall be a material breach of the Contract which may result in the termination of this Contract. In the even of such termination, District shall be entitled to pursue the same remedies against Contractor as it could pursue in the even of default by Contractor.

8.2 AUTHORIZATION WARRANTY

The Contractor represents and warrants that the person executing this Contract for the Contractor is an authorized agent who has actual authority to bind the Contractor to each and every term, condition, and obligation of this Contract and that all requirements of the Contractor have been fulfilled to provide such actual authority.

8.3 BUDGET REDUCTIONS

In the event that the Board of Supervisors adopts, in any fiscal year, a County Budget which provides for reductions in the salaries and benefits paid to the majority of County employees and imposes similar reductions with respect to District Contracts, the District reserves the right to reduce its payment obligation correspondingly for that fiscal year and any subsequent fiscal year services provided by the Contractor under the Contract. The District's notice to the Contractor regarding said reduction in payment obligation shall be provided within 30 calendar days of the Board's approval of such actions. The Contractor shall continue to provide all of the services set forth in the Contract.

8.4 CHANGE NOTICES AND AMENDMENTS

- 8.4.1 The District reserves the right to initiate Change Notices that do not affect the scope, term, Contract Sum or payments. All such changes shall be accomplished with an executed Change Notice signed by the Contractor and by District's Contract Administrator.
- 8.4.2 For any change which affects the scope of work, term, Contract Sum, payments, or any term or condition included under this Contract, an Amendment shall be prepared and executed by the District's Contract Administrator.
- 8.4.3 The Board of Supervisors or Chief Administrative Officer or designee may require the addition and/or change of certain terms and conditions in the Contract during the term of this Contract. The District reserves the right to add and/or change such provisions as required by the Board of Supervisors or Chief Administrative Officer. To implement such changes, an Amendment to the Contract shall be prepared and executed by the Contractor and by District's Fire Chief or designee.

8.4.4 The District's Contract Administrator, may at his/her sole discretion, authorize extensions of time as defined in Paragraph 4.0 - Term of Contract. The Contractor agrees that such extensions of time shall not change any other term or condition of this Contract during the period of such extensions. To implement an extension of time, an Amendment to the Contract shall be prepared and executed by the Contractor and by District.

8.5 COMPLAINTS

The Contractor shall develop, maintain and operate procedures for receiving, investigating and responding to complaints. Within thirty (30) business days after Contract's effective date, the Contractor shall provide the District with the Contractor's policy for receiving, investigating and responding to user complaints.

- **8.5.1** The District will review the Contractor's policy and provide the Contractor with approval of said plan or with requested changes.
- **8.5.2** If the District requests changes in the Contractor's policy, the Contractor shall make such changes and resubmit the policy within five (5) business days.
- **8.5.3** If, at any time, the Contractor wishes to change the Contractor's policy, the Contractor shall submit proposed changes to the District for approval before implementation.

The Contractor shall preliminarily investigate all complaints and notify the District's Contract Director of the status of the investigation within five (5) business days of receiving the complaint.

When complaints cannot be resolved informally, a system of followthrough shall be instituted which adheres to formal plans for specific actions and strict time deadlines. Copies of all written responses shall be sent to the District's Contract Director within three (3) business days of mailing to the complainant.

8.6 COMPLIANCE WITH APPLICABLE LAW

- 8.6.1 The Contractor shall comply with all applicable Federal, State, and local laws, rules, regulations, ordinances, and directives, and all provisions required thereby to be included in this Contract are hereby incorporated herein by reference.
- 8.6.2 The Contractor shall indemnify and hold harmless the District from and against any and all liability, damages, costs, and expenses, including, but not limited to, defense costs and attorneys' fees, arising from or related to any violation on the part of the Contractor or its employees, agents, or subcontractors of any such laws, rules, regulations, ordinances, or directives.

8.7 COMPLIANCE WITH CIVIL RIGHTS LAWS

The Contractor hereby assures that it will comply with Subchapter VI of the Civil Rights Act of 1964, 42 USC Sections 2000 (e) (1) through 2000 (e) (17), to the end that no person shall, on the grounds of race, creed, color, sex, religion, ancestry, age, condition of physical handicap, marital status, political affiliation, or national origin, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under this Contract or under any project, program, or activity supported by this Contract. The Contractor shall comply with *Exhibit C - Contractor's EEO Certification*.

8.8 COMPLIANCE WITH THE COUNTY'S JURY SERVICE PROGRAM

8.8.1 Jury Service Program

This Contract is subject to the provisions of the County's ordinance entitled Contractor Employee Jury Service ("Jury

Service Program") as codified in Sections 2.203.010 through 2.203.090 of the Los Angeles County Code, a copy of which is attached as *Exhibit G* and incorporated by reference into and made a part of this Contract.

8.8.2 Written Employee Jury Service Policy

- 1. Unless Contractor has demonstrated to the District's satisfaction either that Contractor is not a "Contractor" as defined under the Jury Service Program (Section 2.203.020 of the County Code) or that Contractor qualifies for an exception to the Jury Service Program (Section 2.203.070 of the County Code), Contractor shall have and adhere to a written policy that provides that its Employees shall receive from the Contractor, on an annual basis, no less than five days of regular pay for actual jury service. The policy may provide that Employees deposit any fees received for such jury service with the Contractor or that the Contractor deduct from the Employee's regular pay the fees received for jury service.
- 2. For purposes of this Sub-paragraph, "Contractor" means a person, partnership, corporation or other entity which has a contract with the County, District or a subcontract with a County or District Contractor and has received or will receive an aggregate sum of \$50,000 or more in any 12-month period under one or more District contracts or subcontracts. "Employee" means any California resident who is a full time employee of Contractor. "Full-time" means 40 hours or more worked per week, or a lesser number of hours if: 1) the lesser number is a recognized industry standard as determined by the County, or 2)

Contractor has a long-standing practice that defines the lesser number of hours as full-time. Full-time employees providing short-term, temporary services of 90 days or less within a 12-month period are not considered full-time for purposes of the Jury Service Program. If Contractor uses any subcontractor to perform services for the District under the Contract, the subcontractor shall also be subject to the provisions of this Sub-paragraph. The provisions of this Sub-paragraph shall be inserted into any such subcontract agreement and a copy of the Jury Service Program shall be attached to the agreement.

3. If Contractor is not required to comply with the Jury Service Program when the Contract commences, Contractor shall have a continuing obligation to review the applicability of its "exception status" from the Jury Service Program, and Contractor shall immediately notify District if Contractor at any time either comes within the Jury Service Program's definition of "Contractor" or if Contractor no longer qualifies for an exception to the Jury Service Program. event, Contractor shall immediately implement a written policy consistent with the Jury Service Program. The District may also require, at any time during the Contract and at its sole discretion, that Contractor demonstrate to the District's satisfaction that Contractor either continues to remain outside of the Jury Service Program's definition of "Contractor" and/or that Contractor continues to qualify for an exception to the Program.

4. Contractor's violation of this Sub-paragraph of the Contract may constitute a material breach of the Contract. In the event of such material breach, District may, in its sole discretion, terminate the Contract and/or bar Contractor from the award of future District contracts for a period of time consistent with the seriousness of the breach.

8.9 CONFLICT OF INTEREST

- 8.9.1 No District employee whose position with the District enables such employee to influence the award of this Contract or any competing Contract, and no spouse or economic dependent of such employee, shall be employed in any capacity by the Contractor or have any other direct or indirect financial interest in this Contract. No officer or employee of the Contractor who may financially benefit from the performance of work hereunder shall in any way participate in the District's approval, or ongoing evaluation, of such work, or in any way attempt to unlawfully influence the District's approval or ongoing evaluation of such work.
- 8.9.2 The Contractor shall comply with all conflict of interest laws, ordinances, and regulations now in effect or hereafter to be enacted during the term of this Contract. The Contractor warrants that it is not now aware of any facts that create a conflict of interest. If the Contractor hereafter becomes aware of any facts that might reasonably be expected to create a conflict of interest, it shall immediately make full written disclosure of such facts to the District. Full written disclosure shall include, but is not limited to, identification of all persons implicated and a complete description of all relevant circumstances. Failure to comply

with the provisions of this Sub-paragraph shall be a material breach of this Contract.

8.10 CONSIDERATION OF HIRING COUNTY EMPLOYEES TARGETED FOR LAYOFF OR RE-EMPLOYMENT LIST

Should the Contractor require additional or replacement personnel after the effective date of this Contract to perform the services set forth herein, the Contractor shall give **first consideration** for such employment openings to qualified, permanent County employees who are targeted for layoff or qualified, former County employees who are on a re-employment list during the life of this Contract.

8.11 CONSIDERATION OF HIRING GAIN/GROW PROGRAM PARTICIPANTS

Should the Contractor require additional or replacement personnel after the effective date of this Contract, the Contractor shall give consideration for any such employment openings to participants in the County's Department of Public Social Services Greater Avenues for Independence (GAIN) Program or General Relief Opportunity for Work (GROW) Program who meet the Contractor's minimum qualifications for the open position. For this purpose, consideration shall mean that the Contractor will interview qualified candidates. The County will refer GAIN/GROW participants by job category to the Contractor.

In the event that both laid-off County employees and GAIN/GROW participants are available for hiring, County employees shall be given first priority.

8.12 CONTRACTOR'S RESPONSIBILITY AND DEBARMENT

8.12.1 Responsible Contractor

A responsible Contractor is a Contractor who has demonstrated the attribute of trustworthiness, as well as

quality, fitness, capacity and experience to satisfactorily perform the Contract. It is the District's policy to conduct business only with responsible Contractors.

8.12.2 Chapter 2.202 of the County Code

The Contractor is hereby notified that, in accordance with Chapter 2.202 of the County Code, if the District acquires information concerning the performance of the Contractor on this or other Contracts which indicates that the Contractor is not responsible, the District may, in addition to other remedies provided in the Contract, debar the Contractor from bidding or proposing on, or being awarded, and/or performing work on any District Contracts for a specified period of time, which generally will not exceed five (5) years but may exceed five years or be permanent if warranted by the circumstances, and terminate any or all existing Contracts the Contractor may have with the District.

8.12.3 Non-responsible Contractor

The County or District may debar a Contractor if the Board of Supervisors finds, in its discretion, that the Contractor has done any of the following: (1) violated a term of a contract with the County or a nonprofit corporation created by the County, (2) committed an act or omission which negatively reflects on the Contractor's quality, fitness or capacity to perform a contract with the County, any other public entity, or a nonprofit corporation created by the County, or engaged in a pattern or practice which negatively reflects on same, (3) committed an act or offense which indicates a lack of business integrity or

business honesty, or (4) made or submitted a false claim against the County or any other public entity.

8.12.4 Contractor Hearing Board

If there is evidence that the Contractor may be subject to debarment, the County will notify the Contractor in writing of the evidence that is the basis for the proposed debarment and will advise the Contractor of the scheduled date for a debarment hearing before the Contractor Hearing Board.

The Contractor Hearing Board will conduct a hearing where evidence on the proposed debarment is presented. The Contractor and/or the Contractor's representative shall be given an opportunity to submit evidence at that hearing. After the hearing, the Contractor Hearing Board shall prepare a tentative proposed decision, which shall contain a recommendation regarding whether the Contractor should be debarred, and, if so, the appropriate length of time of the debarment. The Contractor and the District shall be provided an opportunity to object to the tentative proposed decision prior to its presentation to the Board of Supervisors.

After consideration of any objections, or if no objections are submitted, a record of the hearing, the proposed decision, and any other recommendation of the Contractor Hearing Board shall be presented to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny, or adopt the proposed decision and recommendation of the Contractor Hearing Board.

8.12.5 Contractor Reinstatement

If a Contractor has been debarred for a period longer than five years, the Contractor may, after the debarment has been in effect for at least five years, submit a written request for review of the debarment determination to reduce the period of debarment or terminate the debarment. The District may, in its discretion, reduce the period of debarment or terminate the debarment if it finds that the Contractor has adequately demonstrated one or more of the following: (1) elimination of the grounds for which the debarment was imposed; (2) a bona fide change in ownership or management; (3) material evidence discovered after debarment was imposed; or (4) any other reason that is in the best interests of the District.

The Contractor Hearing Board will consider a request for review of a debarment determination only where (1) the Contractor has been debarred for a period longer than five years; (2) the debarment has been in effect for a least five years; and (3) the request is in writing, states one or more of the grounds for reduction of the debarment period or termination of the debarment, and includes support documentation. Upon receiving an appropriate request, the Contractor Hearing Board will provide notice of the hearing on the request. At the hearing, the Contractor Hearing Board shall conduct a hearing where evidence on the proposed reduction of debarment period or termination of debarment is presented. This hearing shall be conducted and the request for review decided by the Contractor Hearing Board pursuant to the same procedures as for a debarment hearing.

The Contractor Hearing Board's proposed decision shall contain a recommendation on the request to reduce the period of debarment or terminate the debarment. The Contractor Hearing Board shall present its proposed decision and recommendation to the Board of Supervisors. The Board of Supervisors shall have the right to modify, deny, or adopt the proposed decision and recommendation of the Contractor Hearing Board.

8.12.6 Subcontractors of Contractor

These terms shall also apply to Subcontractors of District Contractors.

8.13 CONTRACTOR'S ACKNOWLEDGEMENT OF DISTRICT'S COMMITMENT TO THE SAFELY SURRENDERED BABY LAW

The Contractor acknowledges that the District places a high priority on the implementation of the Safely Surrendered Baby Law. The Contractor understands that it is the District's policy to encourage all District Contractors to voluntarily post the District's "Safely Surrendered Baby Law" poster in a prominent position at the Contractor's place of business. The Contractor will also encourage its Subcontractors, if any, to post this poster in a prominent position in the Subcontractor's place of business. The County's Department of Children and Family Services will supply the Contractor with the poster to be used.

8.14 CONTRACTOR'S WARRANTY OF ADHERENCE TO DISTRICT'S CHILD SUPPORT COMPLIANCE PROGRAM

8.14.1 The Contractor acknowledges that the District has established a goal of ensuring that all individuals who benefit financially from the District through Contract or Purchase Order are in compliance with their court-ordered child, family and spousal support obligations in order to mitigate the economic burden otherwise imposed upon the County and its taxpayers.

- 8.14.2 As required by the District's Child Support Compliance Program (County Code Chapter 2.200) and without limiting the Contractor's duty under this Contract to comply with all applicable provisions of law, the Contractor warrants that it is now in compliance and shall during the term of this Contract maintain compliance with employment and wage reporting requirements as required by the Federal Social Security Act (42 USC Section 653a) and California Unemployment Insurance Code Section 1088.5, and shall implement all lawfully served Wage and Earnings Withholding Orders or Child Support Services Department Notices of Wage and Earnings Assignment for Child or Spousal Support, pursuant to Code of Civil Procedure Section 706.031 and Family Code Section 5246(b).
- 8.14.3 Contractors Acknowledgement of District's

 Commitment to Child Support Enforcement: The

 Contractor acknowledges that the District places a high
 priority on the enforcement of child support laws and the
 apprehension of child support evaders. The Contractor
 understands that it is the District's policy to encourage all
 District Contractors to voluntarily post the District's "L.A.'s
 Most Wanted: Delinquent Parents" poster in a prominent
 position at the Consultant's place of business. The
 County's Child Support Services Department will supply
 the Contractor with the poster to be used.

8.15 DISTRICT'S QUALITY ASSURANCE PLAN

The District or its agent will evaluate the Contractor's performance under this Contract on not less than an annual basis. Such

evaluation will include assessing the Contractor's compliance with all Contract terms and conditions and performance standards. Contractor deficiencies which the District determines are severe or continuing and that may place performance of the Contract in jeopardy if not corrected will be reported to the Board of Supervisors. The report will include improvement/corrective action measures taken by the District and the Contractor. If improvement does not occur consistent with the corrective action measures, the District may terminate this Contract or impose other penalties as specified in this Contract.

8.16 DAMAGE TO DISTRICT FACILITIES, BUILDINGS OR GROUNDS

- 8.16.1 Contractor shall repair, or cause to be repaired, at its own cost, any and all damage to District facilities, buildings, or grounds caused by Contractor or employees or agents of Contractor. Such repairs shall be made immediately after Contractor has become aware of such damage, but in no event later than thirty (30) days after the occurrence.
- 8.16.2 If Contractor fails to make timely repairs, District may make any necessary repairs. All costs incurred by District, as determined by District, for such repairs shall be repaid by Contractor by cash payment upon demand.

8.17 EMPLOYMENT ELIGIBILITY VERIFICATION

The Contractor warrants that it fully complies with all Federal and State statutes and regulations regarding the employment of aliens and others and that all its employees performing work under this Contract meet the citizenship or alien status requirements set forth in Federal and State statutes and regulations. The Contractor shall obtain, from all employees performing work hereunder, all verification and other documentation of employment eligibility status required by Federal and State statutes and regulations including,

but not limited to, the Immigration Reform and Control Act of 1986, (P.L. 99-603), or as they currently exist and as they may be hereafter amended. The Contractor shall retain all such documentation for all covered employees for the period prescribed by law. The Contractor shall indemnify, defend, and hold harmless, the District, its agents, officers, and employees from employer sanctions and any other liability which may be assessed against the Contractor or the District or both in connection with any alleged violation of any Federal or State statutes or regulations pertaining to the eligibility for employment of any persons performing work under this Contract.

8.18 FACSIMILE REPRESENTATIONS

The District and the Contractor hereby agree to regard facsimile representations of original signatures of authorized officers of each party, when appearing in appropriate places on the Change Notices and Amendments prepared pursuant to Sub-paragraph 8.4, and received via communications facilities, as legally sufficient evidence that such original signatures have been affixed to Change Notices and Amendments to this Contract, such that the parties need not follow up facsimile transmissions of such documents with subsequent (non-facsimile) transmission of "original" versions of such documents.

8.19 FAIR LABOR STANDARDS

The Contractor shall comply with all applicable provisions of the Federal Fair Labor Standards Act and shall indemnify, defend, and hold harmless the District and its agents, officers, and employees from any and all liability, including, but not limited to, wages, overtime pay, liquidated damages, penalties, court costs, and attorneys' fees arising under any wage and hour law, including, but not limited to, the Federal Fair Labor Standards Act, for work

performed by the Contractor's employees for which the District may be found jointly or solely liable.

8.20 GOVERNING LAW, JURISDICTION, AND VENUE

This Contract shall be governed by, and construed in accordance with, the laws of the State of California. The Contractor agrees and consents to the exclusive jurisdiction of the courts of the State of California for all purposes regarding this Contract and further agrees and consents that venue of any action brought hereunder shall be exclusively in the County of Los Angeles.

8.21 INDEPENDENT CONTRACTOR STATUS

- 8.21.1 This Contract is by and between the District and the Contractor and is not intended, and shall not be construed, to create the relationship of agent, servant, employee, partnership, joint venture, or association, as between the District and the Contractor. The employees and agents of one party shall not be, or be construed to be, the employees or agents of the other party for any purpose whatsoever.
- 8.21.2 The Contractor shall be solely liable and responsible for providing to, or on behalf of, all persons performing work pursuant to this Contract all compensation and benefits. The District shall have no liability or responsibility for the payment of any salaries, wages, unemployment benefits, disability benefits, Federal, State, or local taxes, or other compensation, benefits, or taxes for any personnel provided by or on behalf of the Contractor.
- 8.21.3 The Contractor understands and agrees that all persons performing work pursuant to this Contract are, for purposes of Workers' Compensation liability, solely employees of the Contractor and not employees of the District. The Contractor shall be solely liable and responsible for furnishing any and

all Workers' Compensation benefits to any person as a result of any injuries arising from or connected with any work performed by or on behalf of the Contractor pursuant to this Contract.

8.21.4 As previously instructed in Sub-paragraph 7.3 Confidentiality, the Contractor shall cause each employee performing services covered by this Contract to sign and adhere to the "Contractor Employee Acknowledgment, & Confidentiality," Exhibit F1. The Contractor shall cause each non-employee performing services covered by this Contract to sigh and adhere to the "Contractor Non-Employee Acknowledgment, & Confidentiality," Exhibit F2.

8.22 INDEMNIFICATION

The Contractor shall indemnify, defend and hold harmless the District, the County, its Special Districts, elected and appointed officers, employees, and agents from and against any and all liability, including but not limited to demands, claims, actions, fees, costs, and expenses (including attorney and expert witness fees), arising from or connected with the Contractor's acts and/or omissions arising from and/or relating to this Contract.

8.23 GENERAL INSURANCE REQUIREMENTS

Without limiting the Contractor's indemnification of the District and during the term of this Contract, the Contractor shall provide and maintain, and shall require all of its subcontractors to maintain, the following programs of insurance specified in this Contract. Such insurance shall be primary to and not contributing with any other insurance or self-insurance programs maintained by the District. Such coverage shall be provided and maintained at the Contractor's own expense.

8.23.1 Evidence of Insurance: Certificate(s) or other evidence of coverage satisfactory to the County shall be delivered to:

Consolidated Fire Protection District of
Los Angeles County
Materials Management Division / Contracts Section
5801 S. Eastern Avenue, Suite 100
Commerce, California 90040-4001

prior to commencing services under this Contract. Such certificates or other evidence shall:

- Specifically identify this Contract;
- Clearly evidence all coverage's required in this Contract;
- Contain the express condition that the District is to be given written notice by mail at least thirty (30) days in advance of cancellation for all policies evidenced on the certificate of insurance;
- Include copies of the additional insured endorsement to the commercial general liability policy, adding the County of Los Angeles, its Special Districts, its officials, officers and employees as insured for all activities arising from this Contract; and
- Identify any deductibles or self-insured retentions for the District's approval. The District retains the right to require the Contractor to reduce or eliminate such deductibles or self-insured retentions as they apply to the District, or, require the Contractor to provide a bond guaranteeing payment of all such retained losses and related costs, including, but not limited to, expenses or fees, or both, related to investigations, claims

administrations, and legal defense. Such bond shall be executed by a corporate surety licensed to transact business in the State of California.

- 8.23.2 Insurer Financial Ratings: Insurance is to be provided by an insurance company acceptable to the District with an A.M. Best rating of not less than A:VII unless otherwise approved by the District.
- 8.23.3 Failure to Maintain Coverage: Failure by the Contractor to maintain the required insurance, or to provide evidence of insurance coverage acceptable to the District, shall constitute a material breach of the Contract upon which the District may immediately terminate or suspend this Contract. The District, at its sole option, may obtain damages from the Contractor resulting from said breach. Alternatively, the District may purchase such required insurance coverage, and without further notice to the Contractor, the District may deduct from sums due to the Contractor any premium costs advanced by the District for such insurance.

8.23.4 Notification of Incidents, Claims or Suits: Contractor shall report to the District:

- Any accident or incident relating to services performed under this Contract which involves injury or property damage which may result in the filing of a claim or lawsuit against the Contractor and/or the District. Such report shall be made in writing within 24 hours of occurrence.
- Any third party claim or lawsuit filed against the Contractor arising from or related to services performed by the Contractor under this Contract.

- Any injury to a Contractor employee that occurs on District property. This report shall be submitted on a District "Non-employee Injury Report" to the District's Contract Administrator.
- Any loss, disappearance, destruction, misuse, or theft of any kind whatsoever of District property, monies or securities entrusted to the Contractor under the terms of this Contract.
- 8.23.5 Compensation for District Costs: In the event that the Contractor fails to comply with any of the indemnification or insurance requirements of this Contract, and such failure to comply results in any costs to the District, the Contractor shall pay full compensation for all costs incurred by the District.

8.23.6 Insurance Coverage Requirements for Subcontractors:

The Contractor shall ensure any and all subcontractors performing services under this Contract meet the insurance requirements of this Contract by either:

- The Contractor providing evidence of insurance covering the activities of subcontractors, or
- The Contractor providing evidence submitted by subcontractors evidencing that subcontractors maintain the required insurance coverage. The District retains the right to obtain copies of evidence of subcontractor insurance coverage at any time.

8.24 INSURANCE COVERAGE REQUIREMENTS

Without limiting the Contractor's indemnification of the County or District and during the term of this Contract, the Contractor shall provide and maintain, and shall require all of its subcontractors to maintain, the following programs of insurance specified in this Contract. Such insurance shall be primary to and not contributing with any other insurance or self-insurance programs maintained by the County. Such coverage shall be provided and maintained at the Contractor's own expense:

8.24.1 General Liability insurance written on ISO policy form CG 00 01 or its equivalent with limits of not less than the following:

General Aggregate: \$2 million

Products/Completed Operations Aggregate: \$2 million

Personal and Advertising Injury: \$1 million

Each Occurrence: \$1 million

8.24.2 *Automobile Liability* written on ISO policy form CA 00 01 or its equivalent with a limit of liability of not less than \$1 million for each accident. Such insurance shall include coverage for all "owned," "hired" and "non-owned" vehicles, or coverage for "any auto." This insurance shall also provide garagekeepers coverage with a limit of not less than \$1 million per occurrence covering physical damage and theft of District vehicles left with Contractor for servicing, repair, storage or safekeeping.

OR

8.24.3 <u>Garage Liability</u> insurance written on standard ISO policy form or its equivalent and includes, without limitation, Covered Autos for "any auto" with limits of not less than \$1 million per accident, Liability Coverage that provides premises/operations, products/completed operations, contractual and broad form property damage with limits not less than \$1 million per occurrence and Garage Keepers Coverage with limits of not less than \$1 million per occurrence covering physical damage and theft of District's vehicles left with Contractor for servicing, repair, storage

or safekeeping. The policy shall have an aggregate limit of two times the per occurrence limit.

Exception: If Contractor provides component repairs which do not require the Contractor to take possession of any District vehicles to complete such repairs, then Contractor may have insurance limits of \$500,000 per occurrence and a \$500,000 aggregate for General Liability, Automobile Liability and Garage Liability.

8.24.4 Workers' Compensation and Employers' Liability insurance providing workers' compensation benefits, as required by the Labor Code of the State of California or by any other state, and for which the Contractor is responsible. If the Contractor's employees will be engaged in maritime employment, coverage shall provide workers' compensation benefits as required by the U.S. Longshore and Harbor Workers' Compensation Act, Jones Act or any other federal law for which the Contractor is responsible.

In all cases, the above insurance also shall include Employers' Liability coverage with limits of not less than the following:

Each Accident: \$1 million

Disease - policy limit: \$1 million

Disease - each employee: \$1 million

8.24.5 For Contractors that provide sea craft maintenance and repair services, the requirements of their Contract must also include:

Ship Repairers' Liability insurance of at least \$1 million with a minimum aggregate of \$2 million covering loss and/or damage to Districts sea craft(s), including the sea

craft's equipment and contents left in the care/custody and control of Contractor for maintenance, alterations and/or repair services. (This insurance would replace the requirement for Garage Liability or Garage Keepers Liability unless the Contractor also provides maintenance and repair services to the Districts fleet vehicles.)

8.25 LIQUIDATED DAMAGES

- 8.25.1 If, in the judgment of the District, the Contractor is deemed to be non-compliant with the terms and obligations assumed hereby, the District, or his/her designee, at his/her option, in addition to, or in lieu of, other remedies provided herein, may withhold the entire monthly payment or deduct pro rata from the Contractor's invoice for work not performed. The work not performed and the amount to be withheld or deducted from payments to the Contractor from the District, will be forwarded to the Contractor by the District, or his/her designee, in a written notice describing the reasons for said action.
- 8.25.2 If the District determines that there are deficiencies in the performance of this Contract that the District deems are correctable by the Contractor over a certain time span, the District will provide a written notice to the Contractor to correct the deficiency within specified time frames. Should the Contractor fail to correct deficiencies within said time frame, the District may:
 - (a) Deduct from the Contractor's payment, pro rata, those applicable portions of the Monthly Contract Sum; and/or
 - (b) Deduct liquidated damages. The parties agree that it will be impracticable or extremely difficult to fix the extent of actual damages resulting from the failure of the

Contractor to correct a deficiency within the specified time frame. The parties hereby agree that under the current circumstances a reasonable estimate of such damages is One Hundred Dollars (\$100) per day per infraction, or as specified in the *Performance Requirements Summary (PRS) Chart*, as defined in *Appendix C, Technical Exhibit* 2, hereunder, and that the Contractor shall be liable to the District for liquidated damages in said amount. Said amount shall be deducted from the District's payment to the Contractor; and/or

- (c) Upon giving five (5) days notice to the Contractor for failure to correct the deficiencies, the District may correct any and all deficiencies and the total costs incurred by the District for completion of the work by an alternate source, whether it be District forces or separate private contractor, will be deducted and forfeited from the payment to the Contractor from the District, as determined by the District.
- 8.25.3 The action noted in Sub-paragraph 8.25.2 shall not be construed as a penalty, but as adjustment of payment to the Contractor to recover the District cost due to the failure of the Contractor to complete or comply with the provisions of this Contract.
- 8.25.4 This Sub-paragraph shall not, in any manner, restrict or limit the District's right to damages for any breach of this Contract provided by law or as specified in the PRS or Sub-paragraph 8.25.2, and shall not, in any manner, restrict or limit the District's right to terminate this Contract as agreed to herein.

8.26 MOST FAVORED PUBLIC ENTITY

If the Contractor's prices decline, or should the Contractor at any time during the term of this Contract provide the same goods or services under similar quantity and delivery conditions to the State of California or any county, municipality, or district of the State at prices below those set forth in this Contract, then such lower prices shall be immediately extended to the District.

8.27 NONDISCRIMINATION AND AFFIRMATIVE ACTION

- **8.27.1** The Contractor certifies and agrees that all persons employed by it, its affiliates, subsidiaries, or holding companies are and shall be treated equally without regard to or because of race, color, religion, ancestry, national origin, sex, age, physical or mental disability, marital status, or political affiliation, in compliance with all applicable Federal and State anti-discrimination laws and regulations.
- **8.27.2** The Contractor shall certify to, and comply with, the provisions of *Exhibit C Contractor's EEO Certification*.
- 8.27.3 The Contractor shall take affirmative action to ensure that applicants are employed, and that employees are treated during employment, without regard to race, color, religion, ancestry, national origin, sex, age, physical or mental disability, marital status, or political affiliation, in compliance with all applicable Federal and State anti-discrimination laws and regulations. Such action shall include, but is not limited to, employment, upgrading, demotion, transfer, recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship.
- 8.27.4 The Contractor certifies and agrees that it will deal with its subcontractors, bidders, or vendors without regard to or because of race, color, religion, ancestry, national origin, sex, age, physical or mental disability, marital status, or political affiliation.

- 8.27.5 The Contractor certifies and agrees that it, its affiliates, subsidiaries, or holding companies shall comply with all applicable Federal and State laws and regulations to the end that no person shall, on the grounds of race, color, religion, ancestry, national origin, sex, age, physical or mental disability, marital status, or political affiliation, be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under this Contract or under any project, program, or activity supported by this Contract.
- **8.27.6** The Contractor shall allow District representatives access to the Contractor's employment records during regular business hours to verify compliance with the provisions of this Sub-paragraph 8.27 when so requested by the District.
- 8.27.7 If the District finds that any provisions of this Subparagraph 8.27 have been violated, such violation shall
 constitute a material breach of this Contract upon which
 the District may terminate or suspend this Contract. While
 the District reserves the right to determine independently
 that the anti-discrimination provisions of this Contract have
 been violated, in addition, a determination by the California
 Fair Employment Practices Commission or the Federal
 Equal Employment Opportunity Commission that the
 Contractor has violated Federal or State anti-discrimination
 laws or regulations shall constitute a finding by the District
 that the Contractor has violated the anti-discrimination
 provisions of this Contract.
- **8.27.8** The parties agree that in the event the Contractor violates any of the anti-discrimination provisions of this Contract, the District shall, at its sole option, be entitled to the sum of Five Hundred Dollars (\$500) for each such violation pursuant to

California Civil Code Section 1671 as liquidated damages in lieu of terminating or suspending this Contract.

8.28 NON-EXCLUSIVITY

Nothing herein is intended nor shall be construed as creating any exclusive arrangement with Contractor. This Contract shall not restrict District from acquiring similar, equal or like goods and/or services from other entities or sources.

8.29 NOTICE OF DELAYS

Except as otherwise provided under this Contract, when either party has knowledge that any actual or potential situation is delaying or threatens to delay the timely performance of this Contract, that party shall, within one (1) day, give notice thereof, including all relevant information with respect thereto, to the other party.

8.30 NOTICE OF DISPUTES

The Contractor shall bring to the attention of the District Contract Administrator and/or District Contract Director any dispute between the District and the Contractor regarding the performance of services as stated in this Contract. If the District Contract Administrator and/or District Contract Director is not able to resolve the dispute, the District or designee, shall resolve it.

8.31 NOTICE TO EMPLOYEES REGARDING THE FEDERAL EARNED INCOME CREDIT

The Contractor shall notify its employees, and shall require each subcontractor to notify its employees, that they may be eligible for the Federal Earned Income Credit under the federal income tax laws. Such notice shall be provided in accordance with the requirements set forth in Internal Revenue Service Notice No. 1015.

8.32 NOTICE TO EMPLOYEES REGARDING THE SAFELY SURRENDERED BABY LAW

The Contractor shall notify and provide to its employees, and shall require each subcontractor to notify and provide to its employees, a fact sheet regarding the Safely Surrendered Baby Law, its implementation in Los Angeles County, and where and how to safely surrender a baby. The fact sheet is set forth in *Exhibit H, Safely Surrendered Baby Law*, of this Contract and is also available on the Internet at *www.babysafela.org* for printing purposes.

8.33 NOTICES

All notices or demands required or permitted to be given or made under this Contract shall be in writing and shall be hand delivered with signed receipt or mailed by first-class registered or certified mail, postage prepaid, addressed to the parties as identified in *Exhibits D-District's Administration* and *E - Contractor's Administration*. Addresses may be changed by either party giving ten (10) days' prior written notice thereof to the other party. The District shall have the authority to issue all notices or demands required or permitted by the District under this Contract.

8.34 PROHIBITION AGAINST INDUCEMENT OR PERSUASION

Notwithstanding the above, the Contractor and the District agree that, during the term of this Contract and for a period of one year thereafter, neither party shall in any way intentionally induce or persuade any employee of one party to become an employee or agent of the other party. No bar exists against any hiring action initiated through a public announcement.

8.35 PUBLIC RECORDS ACT

8.35.1 Any documents submitted by Contractor; all information obtained in connection with the District's right to audit and inspect Contractor's documents, books, and accounting

records pursuant to Sub-paragraph 8.37 - Record Retention and Inspection/Audit Settlement of this Contract; as well as those documents which were required to be submitted in response to the Invitation for Bid (IFB) used in the solicitation process for this Contract, become the exclusive property of the District. All such documents become a matter of public record and shall be regarded as public records. Exceptions will be those elements in the California Government Code Section 6250 et seq. (Public Records Act) and which are marked "trade secret", "confidential", or "proprietary". The District shall not in any way be liable or responsible for the disclosure of any such records including, without limitation, those so marked, if disclosure is required by law, or by an order issued by a court of competent jurisdiction.

8.35.2 In the event the District is required to defend an action on a Public Records Act request for any of the aforementioned documents, information, books, records, and/or contents of a proposal marked "trade secret", "confidential", or "proprietary", the Contractor agrees to defend and indemnify the District from all costs and expenses, including reasonable attorney's fees, in action or liability arising under the Public Records Act.

8.36 PUBLICITY

8.36.1 The Contractor shall not disclose any details in connection with this Contract to any person or entity except as may be otherwise provided hereunder or required by law. However, in recognizing the Contractor's need to identify its services and related clients to sustain itself, the District shall not inhibit the Contractor from publishing its role under this Contract within the following conditions:

- The Contractor shall develop all publicity material in a professional manner; and
- During the term of this Contract, the Contractor shall not, and shall not authorize another to, publish or disseminate any commercial advertisements, press releases, feature articles, or other materials using the name of the District without the prior written consent of the District's Contract Director. The District shall not unreasonably withhold written consent.
- **8.36.2** The Contractor may, without the prior written consent of District, indicate in its proposals and sales materials that it has been awarded this Contract with the District, provided that the requirements of this Sub-paragraph 8.36 shall apply.

8.37 RECORD RETENTION AND INSPECTION/AUDIT SETTLEMENT

The Contractor shall maintain accurate and complete financial records of its activities and operations relating to this Contract in accordance with generally accepted accounting principles. The Contractor shall also maintain accurate and complete employment and other records relating to its performance of this Contract. The Contractor the District, their authorized agrees that or representatives, shall have access to and the right to examine, audit, excerpt, copy, or transcribe any pertinent transaction, activity, or records relating to this Contract. All such material, including, but not limited to, all financial records, timecards and other employment records, and proprietary data and information, shall be kept and maintained by the Contractor and shall be made available to the District during the term of this Contract and for a period of five (5) years thereafter unless the District's written permission is given to dispose of any such material prior to such time. All such material shall be maintained by the Contractor at a location in Los Angeles County, provided that if any such material is located outside Los Angeles County, then, at the District's option, the Contractor shall pay the District for travel, per diem, and other costs incurred by the District to examine, audit, excerpt, copy, or transcribe such material at such other location.

- 8.37.1 In the event that an audit of the Contractor is conducted specifically regarding this Contract by any Federal or State auditor, or by any auditor or accountant employed by the Contractor or otherwise, then the Contractor shall file a copy of such audit report with the County's Auditor-Controller within thirty (30) days of the Contractor's receipt thereof, unless otherwise provided by applicable Federal or State law or under this Contract. The County shall make a reasonable effort to maintain the confidentiality of such audit report(s).
- **8.37.2** Failure on the part of the Contractor to comply with any of the provisions of this Sub-paragraph 8.37 shall constitute a material breach of this Contract upon which the District may terminate or suspend this Contract.
- 8.37.3 If, at any time during the term of this Contract or within five (5) years after the expiration or termination of this Contract, representatives of the District may conduct an audit of the Contractor regarding the work performed under this Contract, and if such audit finds that the District's dollar liability for any such work is less than payments made by the District to the Contractor, then the difference shall be either: a) repaid by the Contractor to the District by cash payment upon demand or b) at the sole option of the County's Auditor-Controller, deducted from any amounts due to the Contractor from the District, whether under this

Contract or otherwise. If such audit finds that the District's dollar liability for such work is more than the payments made by the District to the Contractor, then the difference shall be paid to the Contractor by the District by cash payment, provided that in no event shall the District's maximum obligation for this Contract exceed the funds appropriated by the District for the purpose of this Contract.

8.38 RECYCLED BOND PAPER

Consistent with the Board of Supervisors' policy to reduce the amount of solid waste deposited at the County landfills, the Contractor agrees to use recycled-content paper to the maximum extent possible on this Contract.

8.39 SUBCONTRACTING

- 8.39.1 The requirements of this Contract may not be subcontracted by the Contractor without the advance approval of the District. Any attempt by the Contractor to subcontract without the prior consent of the District may be deemed a material breach of this Contract.
- **8.39.2** The Contractor shall only subcontract a <u>portion</u> of the work.
- **8.39.3** If the Contractor desires to subcontract, the Contractor shall provide the following information promptly at the

District's request:

- A description of the work to be performed by the subcontractor;
- A draft copy of the proposed subcontract; and
- Other pertinent information and/or certifications requested by the District.

- **8.39.4** The Contractor shall indemnify and hold the District harmless with respect to the activities of each and every subcontractor in the same manner and to the same degree as if such subcontractor(s) were Contractor employees.
- 8.39.5 The Contractor shall remain fully responsible for all performances required of it under this Contract, including those that the Contractor has determined to subcontract, notwithstanding the District's approval of the Contractor's proposed subcontract.
- 8.39.6 The District's consent to subcontract shall not waive the District's right to prior and continuing approval of any and all personnel, including subcontractor employees, providing services under this Contract. The Contractor is responsible to notify its subcontractors of this District right.
- **8.39.7** The District Contract Director is authorized to act for and on behalf of the District with respect to approval of a subcontract and subcontractor employees.
- **8.39.8** The Contractor shall be solely liable and responsible for all payments or other compensation to all subcontractors and their officers, employees, agents, and successors in interest arising through services performed hereunder, notwithstanding the District's consent to subcontract.
- **8.39.9** The Contractor shall obtain certificates of insurance, which establish that the subcontractor maintains all the programs of insurance required by the District from each approved subcontractor. The Contractor shall ensure delivery of all such documents to:

Consolidated Fire Protection District of Los Angeles County Materials Management Division / Contracts Section 5801 S. Eastern Avenue, Suite 100 Commerce, California 90040-4001

before any subcontractor employee may perform any work hereunder.

8.40 TERMINATION FOR BREACH OF WARRANTY TO MAINTAIN CHILD SUPPORT COMPLIANCE

Failure of the Contractor to maintain compliance with the requirements set forth in Sub-paragraph 8.14 - Contractor's Warranty of Adherence to District's Child Support Compliance Program, shall constitute default under this Contract. Without limiting the rights and remedies available to the District under any other provision of this Contract, failure of Contractor to cure such default within 90 calendar days of written notice shall be grounds upon which the District may terminate this Contract pursuant to Subparagraph 8.42 - Termination for Default and pursue debarment of Contractor, pursuant to County Code Chapter 2.202.

8.41 TERMINATION FOR CONVENIENCE

- 8.41.1 This Contract may be terminated, in whole or in part, from time to time, when such action is deemed by the District, at its sole discretion, to be in its best interest. Termination of work hereunder shall be effected by notice of termination to Contractor specifying the extent to which performance of work is terminated and the date upon which such termination becomes effective. The date upon which such termination becomes effective shall be no less than ten (10) days after the notice is sent.
- **8.41.2** After receipt of a notice of termination and except as otherwise directed by the District, the Contractor shall:

- Stop work under this Contract on the date and to the extent specified in such notice, and
- Complete performance of such part of the work as shall not have been terminated by such notice.
- 8.41.3 All material including books, records, documents, or other evidence bearing on the costs and expenses of the Contractor under this Contract shall be maintained by the Contractor in accordance with Sub-paragraph 8.37, Record Retention & Inspection/Audit Settlement.

8.42 TERMINATION FOR DEFAULT

- **8.42.1** The District may, by written notice to the Contractor, terminate the whole or any part of this Contract, if, in the judgment of District's Contract Director:
 - Contractor has materially breached this Contract;
 - Contractor fails to timely provide and/or satisfactorily perform any task, deliverables, service, or other work required either under this Contract; or
 - Contractor fails to demonstrate a high probability of timely fulfillment of performance requirements under this Contract, or of any obligations of this Contract and in either case, fails to demonstrate convincing progress toward a cure within five (5) working days (or such longer period as the District may authorize in writing) after receipt of written notice from the District specifying such failure.
- **8.42.2** In the event that the District terminates this Contract in whole or in part as provided in Sub-paragraph 8.42.1, the District may procure, upon such terms and in such manner as the District may deem appropriate, goods and services

similar to those so terminated. The Contractor shall be liable to the District for any and all excess costs incurred by the District, as determined by the District, for such similar goods and services. The Contractor shall continue the performance of this Contract to the extent not terminated under the provisions of this sub-paragraph.

8.42.3 Except with respect to defaults of any subcontractor, the Contractor shall not be liable for any such excess costs of the type identified in Sub-paragraph 8.42.2 if its failure to perform this Contract arises out of causes beyond the control and without the fault or negligence of the Contractor. Such causes may include, but are not limited to; acts of God or of the public enemy, acts of the County in either its sovereign or contractual capacity, acts of Federal or State governments in their sovereign capacities, fires, floods, epidemics, quarantine restrictions, freight strikes, embargoes, and unusually severe weather; but in every case, the failure to perform must be beyond the control and without the fault or negligence of the Contractor. failure to perform is caused by the default of a subcontractor, and if such default arises out of causes control of both the Contractor beyond the subcontractor, and without the fault or negligence of either of them, the Contractor shall not be liable for any such excess costs for failure to perform, unless the goods or services to be furnished by the subcontractor were obtainable from other sources in sufficient time to permit the Contractor to meet the required performance schedule. As Sub-paragraph 8.42.3, used in this the terms "subcontractor" and "subcontractors" mean subcontractor(s) at any tier.

- 8.42.4 If, after the District has given notice of termination under the provisions of this Sub-paragraph 8.42, it is determined by the District that the Contractor was not in default under the provisions of this Sub-paragraph 8.42, or that the default was excusable under the provisions of Sub-paragraph 8.42.3, the rights and obligations of the parties shall be the same as if the notice of termination had been issued pursuant to Sub-paragraph 8.41- Termination for Convenience.
- 8.42.5 In the event the District terminates this Contract in its entirety due to the Contractor's default as provided in Subparagraph 8.42.1, the Contractor and the District agree that the District will have sustained actual damages, which are extremely difficult to calculate and impracticable to fix and which will include, but are not limited to, the District's costs of procurement of replacement services and costs incurred due to delays in procuring such services. Therefore, the Contractor and the District agree that the District shall, at its sole option and in lieu of the provisions of Subparagraph 8.42.2, be entitled to liquidated damages from the Contractor, pursuant to California Civil Code Section 1671, in the amount of Five Thousand Dollars (\$5,000) or five percent (5%) of the applicable year's Contract sum, whichever is less, as equitable compensation to the District for such actual damages. This amount of liquidated damages shall be either paid by the Contractor to the District by cash payment upon demand or, at the sole discretion of the District, or designee, deducted from any amounts due to the Contractor by the District, whether under this Contract or otherwise.

These liquidated damages shall be in addition to any credits, which the District is otherwise entitled to under this Contract, and the Contractor's payment of these liquidated damages shall not in any way change, or affect the provisions of Sub-paragraph 8.22 - Indemnification.

8.42.6 The rights and remedies of the District provided in this Subparagraph 8.42 shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Contract.

8.43 TERMINATION FOR IMPROPER CONSIDERATION

- 8.43.1 The District may, by written notice to the Contractor, immediately terminate the right of the Contractor to proceed under this Contract if it is found that consideration, in any form, was offered or given by the Contractor, either directly or through an intermediary, to any District officer, employee, or agent with the intent of securing this Contract or securing favorable treatment with respect to the award, amendment, or extension of this Contract or the making of any determinations with respect to the Contractor's performance pursuant to this Contract. In the event of such termination, the District shall be entitled to pursue the same remedies against the Contractor as it could pursue in the event of default by the Contractor.
- 8.43.2 The Contractor shall immediately report any attempt by a District officer or employee to solicit such improper consideration. The report shall be made either to the District Contract Director charged with the supervision of the employee or to the County Auditor-Controller's Employee Fraud Hotline at (800) 544-6861.

8.43.3 Among other items, such improper consideration may take the form of cash, discounts, service(s), the provision of travel or entertainment, or tangible gifts.

8.44 TERMINATION FOR INSOLVENCY

- **8.44.1** The District may terminate this Contract forthwith in the event of the occurrence of any of the following:
 - Insolvency of the Contractor. The Contractor shall be deemed to be insolvent if it has ceased to pay its debts for at least sixty (60) days in the ordinary course of business or cannot pay its debts as they become due, whether or not a petition has been filed under the Federal Bankruptcy Code and whether or not the Contractor is insolvent within the meaning of the Federal Bankruptcy Code;
 - The filing of a voluntary or involuntary petition regarding the Contractor under the Federal Bankruptcy Code;
 - The appointment of a Receiver or Trustee for the Contractor; or
 - The execution by the Contractor of a general assignment for the benefit of creditors.
- **8.44.2** The rights and remedies of the District provided in this Subparagraph 8.44 shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Contract.

8.45 TERMINATION FOR NON-ADHERENCE OF COUNTY LOBBYIST POLICY

The Contractor, and each County Lobbyist or County Lobbying firm as defined in County Code Section 2.160.010 retained by the Contractor, shall fully comply with the County's Lobbyist Ordinance,

County Code Chapter 2.160. Failure on the part of the Contractor or any County Lobbyist or County Lobbying firm retained by the Contractor to fully comply with the County's Lobbyist Ordinance shall constitute a material breach of this Contract, upon which the District may in its sole discretion, immediately terminate or suspend this Contract.

8.46 TERMINATION FOR NON-APPROPRIATION OF FUNDS

Notwithstanding any other provision of this Contract, the District shall not be obligated for the Contractor's performance hereunder or by any provision of this Contract during any of the District's future fiscal years unless and until the Board of Supervisors appropriates funds for this Contract in the County's Budget for each such future fiscal year. In the event that funds are not appropriated for this Contract, then this Contract shall terminate as of June 30 of the last fiscal year for which funds were appropriated. The District shall notify the Contractor in writing of any such non-allocation of funds at the earliest possible date.

8.47 VALIDITY

If any provision of this Contract or the application thereof to any person or circumstance is held invalid, the remainder of this Contract and the application of such provision to other persons or circumstances shall not be affected thereby.

8.48 WAIVER

No waiver by the District of any breach of any provision of this Contract shall constitute a waiver of any other breach or of such provision. Failure of the District to enforce at any time, or from time to time, any provision of this Contract shall not be construed as a waiver thereof. The rights and remedies set forth in this Subparagraph 8.48 shall not be exclusive and are in addition to any other rights and remedies provided by law or under this Contract.

8.49 WARRANTY AGAINST CONTINGENT FEES

- 8.49.1 The Contractor warrants that no person or selling agency has been employed or retained to solicit or secure this Contract upon any Contract or understanding for a commission, percentage, brokerage, or contingent fee, excepting bona fide employees or bona fide established commercial or selling agencies maintained by the Contractor for the purpose of securing business.
- **8.49.2** For breach of this warranty, the District shall have the right to terminate this Contract and, at its sole discretion, deduct from the Contract price or consideration, or otherwise recover, the full amount of such commission, percentage, brokerage, or contingent fee.

9.0 UNIQUE TERMS AND CONDITIONS

9.1 LOCAL SMALL BUSINESS ENTERPRISE (SBE) PREFERENCE PROGRAM

- 9.1.1 This Contract is subject to the provisions of the County's ordinance entitled Local Business Enterprise Preference Program, as codified in Chapter 2.204 of the Los Angeles County Code.
- 9.1.2 Contractor shall not knowingly and with the intent to defraud, fraudulently obtain, retain, attempt to obtain or retain, or aid another in fraudulently obtaining or retaining or attempting to obtain or retain certification as a Local Small Business Enterprise.
- 9.1.3 Contractor shall not willfully and knowingly make a false statement with the intent to defraud, whether by affidavit, report, or other representation, to a District official or employee for the purpose of influencing the certification or

- denial of certification of any entity as a Local Small Business Enterprise.
- 9.1.4 If Contractor has obtained County certification as a Local Small Business Enterprise by reason of having furnished incorrect supporting information or by reason of having withheld information, and which knew, or should have known, the information furnished was incorrect or the information withheld was relevant to its request for certification, and which by reason of such certification has been awarded this Contract to which it would not otherwise have been entitled, shall:
 - Pay to the District any difference between the contract amount and what the District's costs would have been if the contract had been properly awarded;
 - In addition to the amount described in subdivision (1),
 be assessed a penalty in an amount of not more than
 percent of the amount of the Contract; and
 - Be subject to the provisions of Chapter 2.202 of the Los Angeles County Code (Determinations of Contractor Non-responsibility and Contractor Debarment).

The above penalties shall also apply if Contractor is no longer eligible for certification as a result in a change of their status and Contractor failed to notify the State and the County's Office of Affirmative Action Compliance of this information.

IN WITNESS WHEREOF, the District has, by order of its Board of Supervisors, caused these presents to be subscribed by the Mayor of said Board and the seal of said Board to be affixed and attested by the Clerk thereof, and the Contractor has subscribed its name by and through its duly authorized officers, as of the day, month, and year first written above.

CONSOLIDATED FIRE PROTECTION DISTRICT OF LOS ANGELES COUNTY Ву ____ Michael D. Antonovich Mayor, Los Angeles County ATTEST: SACHI A. HAMAI Executive Officer of the Board of Supervisors of the County of Los Angeles By Deputy APPROVED AS TO FORM: RAYMOND G. FORTNER, JR. County Counsel Ву _____ Deputy **CONTRACTOR NAME** Ву Its President Type or Print Name Its Secretary Type or Print Name



COUNTY OF LOS ANGELES

FIRE DEPARTMENT

1320 NORTH EASTERN AVENUE LOS ANGELES, CALIFORNIA 90063-3294 (323) 881-2401

P. MICHAEL FREEMAN FIRE CHIEF FORESTER & FIRE WARDEN

Fire Fleet Maintenance and Repair Services PRICE LISTS

ATTACHMENT B

SERVING THE UNINCORPORATED AREAS OF LOS ANGELES COUNTY AND THE CITIES OF:

Required Form - Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF HOURLY RATES, COSTS, AND FIXED FEES

Business Name A.V. Auto Body &	TRuck, Inc.
Address 45231 N. TREVOR A	tenute
City Lancaster State (A zip 93534
Contact Name Joe Whitlow or	Tim Strem
Phone # (LLL) 945-0703	Fax#(lele1)945-8760
24 Hour Contact	Toll Free #
Business Days & Hours Monday - Freida	8aM-5PM
Contractor License #:	
Other License (if applicable): Lity of Lancast	er Business License
WEBVEN Vendor # (Required): Slaved up 3/27	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	ı your invoice.
Regular Hourly Rate:	SDAR Flat ROTA SEE EQ. LOS
Overtime Hourly Rate:	spec flat rate see pg. 65
Freight: (FOB Destination – Show Freight as a separate line item)	sper freight invoice
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15.0 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15.0 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a <u>multiplier</u>, are subject to disqualification, at the discretion of the District.

Required Form- Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: A.V. Auto Body *	TRuck, Inc.
SERVICES	Fixed Fees / Unit Price
Heavy Truck Body * Paint =	\$90- per hour
Medium Truck Body * Paint =	\$75- DER HOUR
Anto SNV Light Truck Body =	\$46-per hour
Auto SW Light Truck Paint =	\$46- per hour
Paint + Materials =	\$32-per retinish hour
Heavy Truck Mech. * France =	\$ sublet cost plus 1520
Heavy Truck Mech. * Frame = Medium Truck Mech * Frame =	\$ Subtet cost plus 15%
Anto SW Light Truck Mach =	\$75-per hour
Anto SW/Light TRuck France=	\$ lets per hour
Storage on Total Loss Vehicles	\$ 25- per day
Hazardons Waste Fees =	\$0.50 per refinish hour
=	\$
=	\$
	\$
=	\$

Include fees that must be charged to the District, such as hazardous waste fees, disposal fees, shipping and handling fees, etc.

Required Form - Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF HOURLY RATES, COSTS, AND FIXED FEES

Business Name AMERICAN EAGLE TRANSMISSION	DBA A-1	TRANS	11331	ON	
Address 937 W. MISSION BLVD				- ·- · · · · · · · · · · · · · · · · ·	
City POMONA State CA		Zip	9176	56	
Contact Name GARY KASBARIAN					
Phone# (909) 620-6170 & (909) 620-5055		Fax#	(909	9) 620-	774
24 Hour Contact (909) 917-1715		Toll Fr		N/A	
Business Days & Hours MONFRI. 8:00AM-6:00PM	SAT.8:	00AM-4:	00PM	SUNDAY	CLOSEI
Contractor License #: N/A					·
Other License (if applicable): SEE ATTACHEMENT		REGISTER			
WEBVEN Vendor # (Required): 13202001				ng_business/m	ain_db.htm
Please Note: Your pricing shall also be reflected on	your invo	ice.			
The hourly labor rates for this contract shall be:				•	
The hourly labor rates for this contract shall be:	\$ 65.00				
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight:	\$ 65.00 \$ 0	1			
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate:	\$ 65.00 \$ 0 \$ 0	1	page 3 to	define how yo	
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight: (FOB Destination – Show Freight as a separate line item)	\$ 65.00 \$ 0 \$ 0	ch Exhibit 1A, company charg	page 3 to	define how yo	

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: AMERICAN EAGLE TRANSMI	ISSION COMPLETE CAR CARE CENTER
SERVICES	FIXED FEES / UNIT PRICE
LUBE & OIL FILTER	= \$35.95
TRANSMISSION SERVICE	= \$69.95
PICK-UP DELIVERY	= \$NO CHARGE
HAZARDOUS WASTE	= \$2.50
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

			nics, Inc.						
Address	260 1	Manhattan I	Beach Blvd.						
CityRedo	ndo Be	each	State	CA		Zip	90	278	
Contact Name	Andy	Nunez							
210- Phone #	725-041	lo x.253				_ Fax	# 310	-643-8166 	
24 Hour Contact	Tim W	leaver				Toll I	Free #	800-750-723	4
Business Days & H	Hours	Monday-Frida	y 8:00 am-	5:00 pm	24/7	0n	Call		
Contractor License	#:75	55657						. 1	· · · · · · · · · · · · · · · · · · ·
Other License (if ap	plicable):					NE CLETE	- A.T.		
WEBVEN Vendor#((Required):	03714301				REGISTEI http://lacoi		doing_business/main_	db.htm
	•	cing shan ais	o be reflecte	ed on your	r invoic	e.			
The hourly lab		for this conti	ract shall be	<u>:</u>			7.0	,	
The hourly lab		for this conti		<u>:</u>			1 & r	emoval	
The hourly lab		for this cont	ract shall be	<u>:</u> Rate: _ \$ 15	55.00 i	nstal			
	<u>or rates</u>	for this cont	ract shall be egular Hourly F ertime Hourly F Fre	: Rate: \$ 15 Rate: \$ 23	55.00 i	nstal			
	<u>or rates</u>	for this conti Re Ove	ract shall be egular Hourly F ertime Hourly F Fre	: Rate: \$ 15 Rate: \$ 23 sight: item) \$	55.00 i 32.50 i N/A. (Attach	nstal nstal Exhibit 12	1 & r		· · · · · · · · · · · · · · · · · · ·
	or rates	for this conti Re Ove on – Show Freight a Fixed F	egular Hourly Fortime Hourly Fortime Hourly Fortime as a separate line ees or Unit Pri	: Rate: \$15 Rate: \$23 eight: item) \$ ices:	55.00 i 32.50 i N/A. (Attach	nstal nstal Exhibit 12	1 & r	emoval	
(FOE	or rates 3 Destination *Mat	for this conti Re Ove on – Show Freight a Fixed F terials / Parts M (The maximulatracted Work M	egular Hourly Fortime Hourly Fortime Hourly Fortime as a separate line ees or Unit Prinarkup Percentum bid allowance is	Exate: \$15 Rate: \$23 eight: item) \$ ices:	55.00 i 32.50 i N/A. (Attach	nstal nstal Exhibit 12	1 & r A, page 3 rges for	emoval	

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name ADVANCED Systems 5	services, INC
Address 1082 AIRPORT DR	
City Upland State O	A zip 91786
Contact Name Reed Wisington	
Phone # 909 949-9944	Fax# 909 949-2244
24 Hour Contact DAW Koach	Toll Free # 800 440-405
Business Days & Hours OFFICE MONFILL Jam	5pm Friday eve this Sun
Contractor License #: 792602 C 20	emergency setuice autic
Other License (if applicable):	
WEBVEN Vendor# (Required): 12798701	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	
-	
Overtime Hourly Rate:	\$ (3200
Freight: (FOB Destination – Show Freight as a separate line item)	\$ 0057
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	L157 - 10 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	COST + 15 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: ADVANCED SUST	TEMS SERVICES, INC
SERVICES	FIXED FEES / UNIT PRICE
Vehicle destination Change	= \$38.00
Vehicle destination Change HAZARDOUS Waste FEE	= \$ \3.50
	= \$
	= \$
	= _\$
	= _\$
	= _\$
	= \$
	= \$
	= \$
	=
	= _\$
	= \$
	= _\$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Atlas Radiator, Inc.	
Address10110 S. Norwalk Blvd.	
City Santa Fe Springs State CA	Zip 90670
Contact Name Eddie Cerda - George Cerda	
Phone # (562) 944-6185	Fax# (562) 941-8151
24 Hour Contact Eddie Cerda	(000) 244 0620
Business Days & Hours Monday-Friday 7 a.m - 5	p.m.
Contractor License #:	
Other License (if applicable): City 0540-101100000	DECICETED AT.
WEBVEN Vendor # (Required): 03881201	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 38.50
Overtime Hourly Rate:	\$ 42.50
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	
the state of the s	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	company charges for these services.)

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Atlas Radiator, Inc	
SERVICES	FIXED FEES / UNIT PRICE
Repair small Radiator	= \$ 38.50
Repair medium Radiator	= \$ 88.50
Repair large Radiator	= \$ 185.00
Repair large bolt-on Radiator	= \$ 363.00
Repair oil coolers	= \$ 88.50
Repair heaters	= \$ 68.50
Repair A/c condensers	= \$ 68.50
Repair air charge coolers	= \$ 225.00
	= \$
	= \$
	= \$
	= \$
	_ = _\$
	= \$
	= _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

	<u> </u>
Address 14941 E. Ramona BLV	0
City BALDWIN PARK State C	zip <u>91706</u>
Contact Name <u>Javier Montes</u>	
Phone # (626) 814 - 3144	Fax# (626) 814-1874
24 Hour Contact (626) 393-8947	Toll Free #
Business Days & Hours	
Contractor License #:	
Other License (if applicable): WEBVEN Vendor # (Required): 51144302	REGISTER AT: http://lacounty.info/doing business/main_db.htm
Diagram Vous pricing shall also be reflected on	vour invoice.
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
	40 00
The hourly labor rates for this contract shall be:	\$ 40.00
The hourly labor rates for this contract shall be: Regular Hourly Rate:	\$ 40.00 \$ 0
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight:	\$ 40.00 \$ \(\to \) \$ \(\to \) \$ (Attach Exhibit 1A, page 3 to define how your
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight: (FOB Destination – Show Freight as a separate line item)	\$ 40.00 \$
The hourly labor rates for this contract shall be:	40.00

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME:	BALDWIN AUTO	B	ODY			
	SERVICES			FIXED FEES	/ UNIT P	RICE
	Body	=	\$	40.00	Pes	br
	Paint.	_ =	\$	40.00	ĸ	11
	FRAME	_ =	\$	60.00	11	11
	МЕСН	_ =	\$	75.00	11	11
	MATERI ALS	_ =	\$	26.00	11	(/
		_ =	\$			
		_ =	\$			
		_ =	\$			
		_ =	\$			
		_ =	\$			
		_	\$			
		_ =	\$			
		=	\$			
		_ =	\$			
		_ =	\$			

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF HOURLY RATES, COSTS, AND FIXED FEES

AND (HSA)

Business Name	BECS A DIVISION OF ADP	(USA), INC.
Address	2825 PELLISSIER PLACE	
City	WHITTIER State CAL	IFORNIA Zip 90601
Contact Name _	TOM WRIGHT JR (PROJECT M	ANAGER)
Phone #	(562) 908 - 68 90	Fax# (562) 692-5404
24 Hour Contact	(TOM WRIGHT JR)	Toll Free # (562) 692-5404
Business Days & I	Hours MONDAY THRU FRIDAY	6;30 A.M. TO 5:00 P.M.
Contractor License	#: NOT APPLICABLE	
Other License (if ap	oplicable): NOT APPLICABLE	
WEBVEN Vendor#	(Required): 12101401	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
The hourly lab	oor rates for this contract shall be:	
	Regular Hourly Rate:	\$ 79.50
	Overtime Hourly Rate:	\$ 119.25
(FO	Freight: B Destination – Show Freight as a separate line item)	
	Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
	*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
	*Subcontracted Work Markup Percentage:	

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, DO NOT use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME:	BECS	A	DIVISION	OF	ADP	P USA, INC.	
	Si	ERVIC	ES			FIXED FEES / UNIT PRICE	
G.M. 6.5	L INJE	CTI	ON PUMP(EL	ECTR.) =	\$ 1,050.00(EXCH)(\$150.00 core chr	g)
G.M. 6.5	L INJE	CTI	ON PUMP (ME	сн)	=	\$ 675.00(EXCH)(\$300.00 core chrg)	
G.M. 6.5/	/6.2L P	UMF	INSTALLAT	ION	ΚΙ <u>Ι</u>	\$ 25.00 each	
G.M. 6.5/	/6.2L F	UEL	. INJ INSTL	KIT	_ =	\$ 29.50 each	
FORD 6.9/	/7.3 FU	IEL	INJECTION	PUMP	_ =	\$ 435.00(EXCH)(\$300.00 core chrg)	
FORD 6.9/					_ =	\$ 28.00 (NEW)	
			INJECTOR		=	\$245.00(NEW EXCH)(\$150.00 core ch	rg)
FORD 7.3L	HIGH	PRE	SSURE PUMP	l	_ =	\$395.00(EXCH)(150.00 core chrg)	
FORD 7.31	FUEL	SUF	PLY PUMP(M	ECH)	_ =	\$ 139.00(NEW DUTRIGHT)	
FORD 7.3L	FUEL	SUF	PLY PUMP(E	LEC)	_ =	\$ 239.00(NEW OUTRIGHT)	
CUMMINS A	AFC VS	FUE	L PUMP		=	\$ 485.00(EXCH)(\$(\$300.00 core chr	g)
CUMMINS :	TOP STO)P I	NJECTOR		_ =	\$ 47.00(EXCH)(\$20.00 core chrg)	
CUMMINS S	STC INJ	IECT	or		_ =	\$ 185.00(EXCH)(\$100.00 core chrg)	
CUMMINS /	AFC FUE	L F	UMP		_ =	\$ 395.00(EXCH)(\$300.00 core chrg)	
			R FUEL INJE	CTOR	_ =	\$ 39.50(EXCH)(\$15.00 core chrg)	

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: BECS A DIVISION OF A	DP ((USA), INC.
SERVICES		FIXED FEES / UNIT PRICE
CUMMINS CELECT INJECTOR		\$ 295.00(EXCH)(\$150.00 core chrg)
CUMMINS CELECT FUEL PUMP	=	\$ 395.00(EXCH)(\$200.00 core chrg)
CUMMINS ISB FUEL INJECTION PUMP	_	\$ 1,095.00(EXCH)(\$500.00 core chrg
CUMMINS ISB FUEL SUPPLY PUMP	=	\$ 150.00 (NEW)
NOTE: FREE PICK UP AND DELIVERY	· =	S CORE CHARGE WILL ONLY APPLY
OF DIESEL FUEL PUMPS, INJECTORS	=	\$ IF L.A.C.F.D. DOES NOT PROVIDE
AND turbochargers. ANYWHERE IN	- _ =	\$ A CORE FOR EXCHANGE Items.
LOS Angeles county.	_ =	\$
	_ =	\$
	_ =	\$
	_ =	\$
	_ =	\$
	. =	\$
	_ =	\$
	_ =	\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name BETTS SPRING CO	
Address 9315 Santa Fc SPTINGS &	21
City Santa Fe Springs State C	2a Zip 90670
Contact Name HECTOR TOYYES	
Phone # 562 941- 2300	Fax# <u>569-94/-2260</u>
	Toll Free # 800 - 541 - 5613
Business Days & Hours Monday - Friday	8:00 AM TO 5:00 PM
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required):	http://lacounty info/doing husiness/main dh htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 38.00
Overtime Hourly Rate:	
Freight: (FOB Destination – Show Freight as a separate line item)	* NONE
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	List -50 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: BATTS SPYING	CO
SERVICES	FIXED FEES / UNIT PRICE
Banch Papay	= \$ 60.00
Disassambia springs	= \$ 60.00
22-547	= \$ 167-77
	= - \$
	= \$
	= _\$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Bab Wondries Ford	1
Address 400 S. ATlantic Blud Pio	
City Alhambra State CA	Zip 91801
Contact Name Eric Aguirre	
Phone # (626) 289 - 359 /	Fax#(626)284-9109
	Toll Free # (888) 855-5600
Business Days & Hours 7 Days 7: HAM - 7: PM M-1- 8:A	
Contractor License #:	
Other License (if applicable): BAR Lic # AB OC	08494
WEBVEN Vendor # (Required): 04211701	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
The hourly labor rates for this contract shall be:	
Regular Hourly Rate: _\$_	7000
Overtime Hourly Rate: \$	7000
Freight: (FOB Destination – Show Freight as a separate line item)	0
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	rst + 15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	+10 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Bob Wondries Fo	ord
SERVICES	FIXED FEES / UNIT PRICE
Hazard Waste Fee - Oil	= \$ 3.00 Per Service
tire - State Disposal Fee	= \$ 1.75 Per tire
Tire TAX State of Calif.	= \$ 1.75 Per Tire
	= _\$
	= _\$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business NameCALIFORNIA'S BESTR	ADIATOR, INC.
Address 2743 No. SANFERNAND	
City LOS ANGELES, State C.	
Contact Name NICHOLAS CHAVEZ	
Phone # (800) 696-4754	Fax#(323)44-1-4922
24 Hour Contact NICHOLAS CHAVEZ (PRE	5.) Toll Free # (8w) 696-4754
Business Days & Hours S:00 AM - 5:00 FM (M-F)), 9:00 AM-2 FM (SAT.)
Contractor License #:	
Other License (if applicable):	
WEBVEN Vendor # (Required): #10776501	Visit http://lacounty.info/doing_business/main_db.htm. to register.
·	
Please note your pricing shall also be	reflected on your invoice.
The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 5500
Overtime Hourly Rate:	1.2100
Freight: (FOB Destination – Show Freight as a separate line item)	\$ N.A.
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	Toppen Nerve
	JOBBER NETW
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	· NA. %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME:CALIEORNIA'S BE	ST KADIATOR, INC.
SERVICES (LABOR)	FIXED FEES / UNIT PRICE
ROD & CLEAN UP TO I TON	= \$ 4800 (INCLUDES HAZMAT)
in a a a li 2 Text	= \$ 68 00
" " " " " 4 TON	= \$ 98 00
BOLT-ONS (SMALL)	= \$ 228 =
" " (MED)	= \$ 278 00
11 (LARGE)	= \$ 328 00
FUEL TANKS UP TO 25 GAL.	= \$ 6900_
" " " " 50 GAL.	= \$ 98 90
" " " 100 GAL,	= \$ 138 ==
CHARGED AIR COOLERS (ALL)	= \$ 118 00
CUSTOM WORK (LABOR RATE)	= \$ 65° / HOUR
	= \$
	= \$
	= \$
	= _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name City Terrace Service, Inc.	
Address 4167 Whiteside St.	
City Los Angeles State CA	Zip 90063
Contact Name Ruben Gonzalez, Miguel Mart	inez
Phone# 323 262 8059	Fax# 323 262 3381
24 Hour Contact 562 692 8895	Toll Free # 8 00 262 8059
Business Days & Hours 7 Days, 24 hours	
Contractor License #:	
Other License (if applicable): LA County Bus.Lic. 380	
WEBVEN Vendor # (Required): 7549	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ See Bid Sheet
Overtime Hourly Rate:	\$
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME:	City Terrace Serv	rice, Inc	C •
	SERVICES		FIXED FEES / UNIT PRICE
Towing Ser	rvice (see bid shee	et) =	- \$
			: \$
		=	: _\$
		=	: \$
		=	: \$
		=	: \$
		=	\$
		=	\$
		=	\$
			\$
		=	\$
		=	\$
		=	\$
		=	\$
		=	\$

City Terrace Service, Inc.

January 19, 2006

Light Duty Towing	
Service	Amount
	#C5 00
Hook-Up	\$65.00
Per Mile*	\$ 3.00
Service Calls	\$30.00
GOA's	\$30.00
Medium Duty Towing	
Service	Amount
Per Hour	\$85.00
Service Calls	\$45.00
GOA's	\$45.00
Heavy Duty Towing (includes I	ьо Воу)
Service Service	Amount
Per Hour	\$98.00
Service Calls	\$50.00
GOA's	\$50.00
Recovery Work (4x4, Uprightin	ıg Etc)
Service Service	Amount
Per Hour	\$150.00

Light Duty Towing

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Clark + Howar	d Towing
Address 840 E. Ave R	
Dali I I a	A Zip 93550
City Tarrick Control of Tarrick Control	
Contact Name <u>BOY</u> JONES	11: 0: 7 011
Phone # 10101 - 947-7112	Fax# 661-947-046
24 Hour Contact 601-947-7112	Toll Free #
Business Days & Hours Office M-S - S	3 to 5 pm towing 24-
Contractor License #:	
Other License (if applicable):	22002222.42
WEBVEN Vendor # (Required): 50630501	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	, ·
Regular Hourly Rate:	s N/A Towing
Overtime Hourly Rate:	\$
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Clark + Howar	<u>~d</u>	Towing
SERVICES		FIXED FEES / UNIT PRICE
Towing	=	\$
- light duty	=	\$#65 - Base hook up
0 to 14,000	=	\$ 5 free fow miles
	=	\$ \$4 after 5 miles
·	=	\$.
- Medium Duty	=	\$
14,001 to 19,500	=	\$ 100 - pase + hook up
	=	s 5 free miles
	=	\$ 4.25 mile after 5
- Heavy Duty	=	\$ Miles
19,501 + Up	=	\$,
	=	\$ 150 base + hook Up
	=	\$ 5 tree miles
	=	\$4 4.50 mile after
	=	\$ 5 MILES

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Collins Trim S	hos
Address 7728 Greenlest Aug	<i>e.</i>
City Whitten State Cr	7. zip 90602
Contact Name MIKE STEVES	
Phone # 562-698-7/15	Fax# <u>562-698-6883</u>
24 Hour Contact <u>562-900-2888</u>	Toll Free #
Business Days & Hours	7AM-5PM
Contractor License #://A	
Other License (if applicable): 54938	REGISTER AT:
WEBVEN Vendor # (Required): /3/5/50/	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 45.00
Overtime Hourly Rate:	\$ 67.50
Freight: (FOB Destination – Show Freight as a separate line item)	\$ \$ 5.00 - 10.00
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	/5 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	/5 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Blad
Zip 91744
Fax# 626 918-944
Toll Free # 800 - 960-367
Toll Free # 800 - 960-367 M SAT 7:00 AM - 3:00 PM
REGISTER AT: http://lacounty.info/doing_business/main_db.htm
our invoice.
6.5 00
(Attach Exhibit 1A, page 3 to define how your company charges for these services.)

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name ELLIS TRUCK	
Address 1707 S BLUFF	RD
City MONTEBELLO State C	A Zip 90640
Contact Name G. "SKIP" SWEE	eney
Phone # 323 - 685 - 7160	Fax# 323-726-723
. / /	Toll Free #
Business Days & Hours MONDAY - FRIDA	
Contractor License #:/Y O N e	
Other License (if applicable):	
WEBVEN Vendor # (Required): PPPLIED FOR	Visit http://lacounty.info/doing_business/main_db.htm. to register.
Please note your pricing shall also be	e reflected on your invoice.
The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 75.00
Overtime Hourly Rate:	\$ 112.50
Freight: (FOB Destination – Show Freight as a separate line item)	\$ AT COST
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, DO NOT use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME:	ELLIS T	Ruc	ek 4	Bus 1	REPAIR	e inc
·	SERVICES			FIXED FEES / L	JNIT PRICE	
FRONT AXLA	ALIGN (CLASS 4,7,	8) =	\$	97.	50	
2 AX	LE ALICNME	- =	\$	145.	၁ ၁	
3 AX	LE ALIGNMEN	·T =	\$	185-	۵۵	
TIRE	BALANCE	=	\$	69.	50 PRU	S PARTS
KEPHACO	- FRONT SPRU	<u> </u>	\$		U PLUS	
REPLACE	REAR SPRIN	<u>(65 =</u>	\$	30000	PLUS	PARTS
KING P	INS REPLACED). =	\$	525. 5°	PLUS	PARTS
	SHACKLIE PINS +			45000	PLUS	PARTS
HAZAKD	OUS WASTE	=	\$	1000 p.		
		=	\$			
		=	\$			
#*************************************		=	\$			
		=	\$			·
		=	\$			····
		=	\$			

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Address 2747 Via Campo City Hontebello State Calif Zip 90640	
City Montebello State Calif Zip 90640	
Contact Name Hike Zermeno or Cherie Harris	
Phone # (323) 838-6920 Ext 114 Fax # (323) 8	38-69/ 5
24 Hour Contact Toll Free #	
Business Days & Hours 6 Days a week from 7:00 Am - 7:00p	m
Contractor License #:	
Other License (if applicable): DEALER LICENSE #37187 REGISTER AT:	
WEBVEN Vendor # (Required): http://lacounty.info/doing_busines	s/main_db.htm
Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ 65.00 hr.	
, togutar to any	
Overtime Hourly Rate: \$ 65.00 hr	
Freight: (FOB Destination – Show Freight as a separate line item)	
(Attach Exhibit 1A, page 3 to define how company charges for these services	7
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %) // 0 %	

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: FORD OF MONT	EBEL(O
SERVICES	FIXED FEES / UNIT PRICE
Tire disposal Fee	= \$ 1.75 per tire
Tire disposal Fee	= \$ 1.25
	= \$
	_ = _\$
	_ = _\$
	= \$
	_ = \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	_ = _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Get Tires	
Address Physical 115 E Ave L-4 Mailing	! PO BOX 1898 LANGSTER CA 93539
City LANCASTER State CA	Zip <u>93535</u>
Contact Name Jeff Krogstad	4
Phone # 661 940 1533	Fax# 661 940 6 453
24 Hour Contact <u>do 1 940 1533</u>	Toll Free #
Business Days & Hours Mon - 7RI 8-5	
Contractor License #: NA	
Other License (if applicable): NA	REGISTER AT:
WEBVEN Vendor # (Required): 1635580 \	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 8400
Overtime Hourly Rate:	\$ 104
Freight: (FOB Destination – Show Freight as a separate line item)	used what level of delivery speed is required sweight size of parts being shipped.
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Jet Tires		
SERVICES		FIXED FEES / UNIT PRICE
CTRA = California Tire Recycle Azt	=	\$ 1.75 pertire (new)
Medium Truck Tire Disposed fee	=	\$ 5.00 per tire
Auel Surcharge Mobile Service	=	s 900 per call
Uniq	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	· =	\$
	=	\$
	=	\$
	=	\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name (flass Doctor of)	Montebello
Address 100 W Beverly B1	VL.
City Man tebello State	<u>CA</u> zip 90640
Contact Name <u>Dominic</u> Rheinhar	1+
Phone #	Fax# 323,724,06/6
24 Hour Contact	Toll Free #
Business Days & Hours $M-F-8/30am-5/00$	Jem Sat 9: Nam-/illem
Contractor License #: 77649/	
Other License (if applicable):	
WEBVEN Vendor # (Required): 527/030/	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 100 00
Overtime Hourly Rate:	\$ 1500
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	,
	/O %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Glass Docton	of Montebello
SERVICES	FIXED FEES / UNIT PRICE
Truck Rate Joven 10 miles	r = \$ 75°0
Shipping Special Glass	= \$ 150°
Crating Boxing Glass	= \$ /60 W
	= \$
	= \$
	= \$
	= _\$
	= \$
	= \$
	= \$
	= \$
	=
	= \$
	= _\$
	= \$

Page 1 of 3

Required Form - Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Green's OKTIR	, lhe-
Address 11634 Vanduen St.	
City N. Hollywood State C	A zip 91605
Contact Name Ron Tichauer	
Phone # 818-765-6803	Fax# 818 765-6847
24 Hour Contact <u>868 765-6803</u>	Toll Free #
Business Days & Hours/U - F 8:AM to 5	BIPM
Contractor License #:	
Other License (if applicable):	
WEBVEN Vendor # (Required): 042-2870	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 52
Overtime Hourly Rate:	\$ 78
Freight: (FOB Destination – Show Freight as a separate line item)	* no charge
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Suus OK	70	re, Are
SERVICES		FIXED FEES / UNIT PRICE
Service cell to Paronin	=	\$ 62,60
Boye	=	\$
Solve at sight boxel or	, =	\$52 per ly or portion there of
neur tire California Fee	=	\$1.75
<i>U</i>	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name H. W. HUNTER WE	
Address 1130 AUTO MALL DI	RIVE
City LANCASTER State C	ZA zip <u>93534</u>
Contact Name ROY COOK	
Phone # 661-948-8411	Fax# <u>661-949-989</u>
24 Hour Contact 661 - 510 - 9906	Toll Free #
Business Days & Hours MONDAY - FRIDAY 700AM-0	5:00PM SATURDAY 8:00 AM-5:00
Contractor License #:	·
Other License (if applicable): BAR AD016572	REGISTER AT:
WEBVEN Vendor # (Required): 04399902	http://lacounty.info/doing_business/main_db.htm
The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 8,00
Overtime Hourly Rate: _	\$
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: H. W. HUNTE	ER INC.
SERVICES	FIXED FEES / UNIT PRICE
TIRE DISPOSAL	= \$ 250 PER TIRE = \$ 25 PER REPAIR ORDER
HAZARDOUS WASTE DISPOSAL	= \$ 2 ²⁵ PER REPAIR ORDER
	= \$
	= \$
	= \$
	_ = \$
	= _\$
	= \$
	= \$
	_ = _\$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name HARBOR DIESEC E EQUIPMENT, IN			
Address 537 W. ANAHEIM ST.			
City LONG BEACH State C	<u>A</u>	Zip _	90813
Contact Name CLAIG ANSILICH			
Phone #		Fax#_	562 591-2941
24 Hour Contact 562 591 - 5665		Toll Fre	e#
Business Days & Hours	8:00 AM -	5:001	PM
Contractor License #:			
Other License (if applicable):	DE	GISTER A	т.
WEBVEN Vendor # (Required): 5/433 ; 0 /	htt _j		1: .info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:			
Regular Hourly Rate:	\$ 94.00		
Overtime Hourly Rate:	\$ 141.0	0	
Freight: (FOB Destination – Show Freight as a separate line item)		- HAR	BOR DIESEL
Fixed Fees or Unit Prices:			oage 3 to define how your es for these services.)
*Materials / Parts Markup Percentage (The maximum bid allowance is 15 %)	15		%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15		%

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Page 3 of 3

Required Form- Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: HARBOR DIESEL & EQUI	pm	ENT, INC.
SERVICES		FIXED FEES / UNIT PRICE
HAZARDUUS NASTE	=	\$ 25.00
MISC HARDWARE	=	\$ 470 OF PARTS, MAXIMUM OF \$150.00
ANEA CHARGES	=	\$ 1.50 pen MILE
TONING	=	\$ 250.00 EACH WAY (IF APPLICABLE)
BYNAMOMETEN CHANGE (LUN H.P.)	=	\$ 2 8 5.00
DYNAMOMETER CHARGE (OVERHEAT)	=	\$ 825.00
DPACITY TEST	=	\$ 120.00
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$
	=	\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name <u>TWIERSTATE</u> TINE B	Ismora Inc.
Address 6737 E. WASHINGTON	Brio
City Commence State C	CA Zip 90040
Contact Name	
Phone # 323 - 722 - 8542	Fax# <u>323-722-28/2</u>
24 Hour Contact	Toll Free #
Business Days & Hours Mon - Fru 8Am - 4.	30 SAT 8AM-12 NOW
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required):	1 to 1/2 - and in Coldina business free in the lates
Please Note: Your pricing shall also be reflected on the hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 60,00 PEN HOUR
Overtime Hourly Rate:	\$ 90.00 PEX HOM
Freight: (FOB Destination – Show Freight as a separate line item)	s NA
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	N/A %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	N/A %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME:	In	= ,	Distributor, Inc.
SERVICES			FIXED FEES / UNIT PRICE
SERVICE CALL	=	_\$_	56.00 PER HOUR
MOUNT & DISMOUNT MEDIUM TRUC	اد=	\$	30.00 PER TIRE
MOUNT & DISMOUNT LIGHT TRUCK		\$	20.00 PER TIRE
MOUNT & DISMOUNT PASSENGER	=	\$	16:00 PER TIRE
LABOR RATE	=	\$	60.00 PER HOUR
PASSENGER ALIGNMENT	=	_\$_	56.00 FRONT ALIGNMENT
PASSENGER ALIGNMENT	=	\$	82.00 FOUR WHEEL ALIGNMENT
LIGHT TRUCK ALIGNMENT	=	\$	82.00 PER TRUCK
MEDIUM TRUCK ALIGNMENT	=	_\$_	104.00 PER TRUCK
CALIFORNIA TIRE FEE	=	_\$_	1.75 PER TIRE
PASSENGER TIRE DISPOSAL	=	_\$_	2.00 PER TIRE
LIGHT TRUCK TIRE DISPOSAL	=	\$	3.00 PER TIRE
MEDIUM TRUCK TIRE DISPOSAL	=	\$	5.00 PER TIRE
	=	\$	
	. =	\$_	

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name JAYIS AUGS MUARIC TRANS	smyssions
Address 3740 Spencer St	
City TOMANCE State Cu	Zip <u>90503</u>
Contact Name Curus Tumayo	
Phone # 310 371- 2448	Fax# <u>310 371 6145</u>
24 Hour Contact 310 738-7356	Toll Free #
Business Days & Hours monday Tuesday, wednesd	Vi 794
Contractor License #: NOT APPLICABLE	
Other License (if applicable): 54555644	
WEBVEN Vendor # (Required): 51145901	
Please Note: Your pricing shall also be reflected on y The hourly labor rates for this contract shall be:	vour invoice.
Regular Hourly Rate: _	\$ 68 00
Overtime Hourly Rate: _	A
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	j5 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: JAY'S ALLHOWANC T	Thonsmissions
SERVICES	FIXED FEES / UNIT PRICE
LUBE OIL & FILTER	= \$ 16 to
TRIANS SERVICE	= \$ //3 =
FRONT DISC BRANCE JUB	= \$ 165°°
Revon Disi Brone JOB	= \$ 16500
Mear drum Brane TOO	$= \$ /40^{\omega}$
Tune up	= \$ 8840 + FIARTS
Alburt Memintesion	= \$ 75000 TO 3000° Depends on Type of Cur
COOLing System Service	= \$ 120°°
Hoses + belis	= \$ 4500 70 18500
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Contact Name ELISE WOLFF Phone # 818-782-8489 Fax # 818-782-211 24 Hour Contact 818-782-1996 Toll Free # Business Days & Hours 7 DAYS/24 HOURS Contractor License #: AD210227 Other License (if applicable): WEBVEN Vendor # (Required): Registered 4-3-06 Registered 4-3-06 Waiting 4 Number	Business Name KE	STONE TOWIN	NG			
Contact Name	Address 7817 WO	ODLEY AVENU	JE			
Phone # 818-782-8489 Fax # 818-782-211 24 Hour Contact 818-782-1996 Business Days & Hours 7 DAYS/24 HOURS Contractor License #: AD210227 Other License (if applicable): WEBVEN Vendor # (Required): Registered 4-3-06 Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ 70.00 Overtime Hourly Rate: \$ 100.00 Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: 40	City VAN NUYS		State	CA	Zip	91406
24 Hour Contact 818-782-1996 Toll Free # Business Days & Hours 7 DAYS/24 HOURS Contractor License #: AD210227 Other License (if applicable): WEBVEN Vendor # (Required): Registered 4-3-06 REGISTER AT: http://lacounty.info/doing_business/main_dl Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ 70.00 Overtime Hourly Rate: \$ 100.00 Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: 4.0	Contact Name ELIS	SE WOLFF				
Business Days & Hours 7 DAYS/24 HOURS Contractor License #: AD210227 Other License (if applicable): WEBVEN Vendor # (Required): Registered 4-3-06 Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ 70.00 Overtime Hourly Rate: \$ 100.00 Freight: (FOB Destination - Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: 4.0	Phone # 818-782-	8489			Fax #	818-782-2113
Other License #: AD210227 Other License (if applicable): WEBVEN Vendor # (Required): Registered 4-3-06 Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: Regular Hourly Rate: Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: AD210227 REGISTER AT: http://lacounty.infa/doing_business/main_dl REGISTER AT: http://lacounty.infa/doing_business/main_dl Register AT: http://lacounty.infa/doing_business/main_dl Register AT: http://lacounty.infa/doing_business/main_dl Register AT: http://lacounty.infa/doing_business/main_dl Register AT: http://lacounty.infa/doing_business/main_dl Register AT: http://lacounty.infa/doing_busin	24 Hour Contact818	3-782-1996			Toll Free	#
Other License (if applicable): WEBVEN Vendor # (Required): Registered 4-3-06 Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: Regular Hourly Rate: \$ 70.00 Overtime Hourly Rate: \$ 100.00 Freight: \$ (Attach Exhibit 1.A. page 3 to define how your company charges for these services.) *Materials / Parts Markup Percentage:	Business Days & Hours	7 DAYS/24 HO	URS			
WEBVEN Vendor # (Required): Registered 4-3-06 Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: Regular Hourly Rate: \$ 70.00 Overtime Hourly Rate: \$ 100.00 Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: *Materials / Parts Markup Percentage:	Contractor License #:	AD210227				
Waiting 4 Number Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: *Materials / Parts Markup Percentage:	Other License (if applicable):				REGISTER AT:	
Please Note: Your pricing shall also be reflected on your invoice. The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: *Materials / Parts Markup Percentage: *Materials / Parts Markup Percentage:	WEBVEN Vendor # (Required):	Registered 4-	3-06		http://lacounty.in	fo/doing_business/main_db.htm
Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: (Attach Exhibit IA, page 3 to define how your company charges for these services.)				ı your inv	voice.	•
Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage: *Materials / Parts Markup Percentage:		Regular	Hourly Rate:	\$ 70.	00	
(FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: (Attach Exhibit 1A, page 3 to define how your company charges for these services.) *Materials / Parts Markup Percentage:		Overtime	Hourly Rate:	\$ 100	.00	
Fixed Fees or Unit Prices:	(FOB Destination	on – Show Freight as a ser				
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)		Fixed Fees o	r Unit Prices:	(A	ttach Exhibit IA, pag company charges)	ge 3 to define how your for these services.)
	*Ma	terials / Parts Markup (The maximum bid a	Percentage:	10	9,	6
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %) **To be a subcontracted Work Markup Percentage: 10 %	*Subcor	tracted Work Markup (The maximum bid a	Percentage: allowance is 15 %)	10	9	6

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: KEYSTONE TOWING	
SERVICES	FIXED FEES / UNIT PRICE
FLEET MAINT./REPAIR LABOR	= \$ 70.00 PER HOUR
MOBILE MECHANIC	= \$ 85.00 PER HOUR
MOBILE MECHANIC (AFTER 7PM)	= <u>\$ 100.00 PER HOUR</u>
LIGHT DUTY TOWING	= \$ 54.00 PER HOUR
MEDIUM DUTY TOWING	= <u>\$ 81.00 PER HOUR</u>
	= _\$
	= \$
	= _\$
	= \$
	= \$ -
	= \$
	= \$
	= _\$
	= _\$
	= _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

criors
zip <u>93534</u>
ert Rough
Fax# 1061 7299195
Toll Free # NA
day 8Am to 5Pm
7
REGISTER AT:
http://lacounty.info/doing_business/main_db.htm
ır invoice.
1000
10500
NA
(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
15 %
NA %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name LOS ANGELES FREIGHTLIN	PER
Address 2429 S. PECK RD.	
City WAITTIER State CD	Zip 90601
Contact Name WILLIAM A. SPRINGER	·
Phone# 562-447-1200	Fax# 562-692-6389
24 Hour Contact CHUCK GRAY	Toll Free # 800-346-4621
Business Days & Hours 7/24 FOR SERVICE / M	-F 7:30 TO 4:00 BODY AND PAIN
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required): 03282804	
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 80.00
Overtime Hourly Rate:	\$ 80.00
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: LOS HNGELES TREIGHTLIWER		
SERVICES	FIXED FEES / UNIT PRICE	
BODY AND PAINT WORK	= \$ 68.00/HR	
COLLISION REPAIRS	= \$ 68,00/HR	
HAZARDOUS MATERIALS DISPOSAL	= \$ 6.00/ REPAIR ORDER	
	= \$	
	= \$	
	= _\$	
	=	
	=	
	= _\$	
	= \$	
	= \$	
	= \$	
	= \$	
	= _\$	
	= \$	



(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Lynn's Auto Ai	r TNC
Address 13255 Woodruff Ave	
City Downey State C	A Zip 90242
Contact Name Benjamin Baldern	ama (or) BILL Ahern
Phone # 562 8035611	Fax# <u>562 803 595</u> 6
24 Hour Contact <u>562</u> <u>544</u> - <u>9680</u>	Toll Free #
Business Days & Hours M-F 8am-5pr	<u> </u>
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required):	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 69.00
Overtime Hourly Rate:	\$ -0-
Freight: (FOB Destination – Show Freight as a separate line item)	\$ -0-
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	/5%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name	Markham and Boling, Inc.		
Address	1133 E. Walnut Street		
City	Pasadena State <u>Cal</u>	if	Zip 911.06
Contact Name	Kelli Smith		
Phone #	(626) 792-7801		Fax#(626) 792-8476
24 Hour Contact	(626) 840-5555		Toll Free #
Business Days & H	Hours Monday - Friday, 7:00a	m - 5:00pm	
Contractor License	#:021310		
Other License (if ap	plicable): _{see} enclosed copies		NOTED AT.
WEBVEN Vendor#	(Required): 10182901		GISTER AT: ://lacounty.info/doing_business/main_db.htm
The hourly lab	or rates for this contract shall be:		
	Regular Hourly Rate:	\$ 40.00	
	Overtime Hourly Rate:	\$ 40.00	
(FOE	Freight: 3 Destination – Show Freight as a separate line item)	<pre>\$ invoice</pre>	
·	Fixed Fees or Unit Prices:	,	nibit 1A, page 3 to define how your my charges for these services.)
	*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)		% 15%
	*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	invoice	+ % 15%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.



(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Markham and Boling Autob	oody, Inc.
SERVICES	FIXED FEES / UNIT PRICE
Autobody Repair	= \$40.00 per hour
Autobody Painting	= <u>\$ 40.00 per hour</u>
Autobody Materials	= \$40.00 per hour
<u>Autobody Frame Straightening</u>	= \$ 60.00 per hour
Autobody Mechanical Repairs	= \$60.00 per hour
Hazardous Waste Disposal	= \$ 15.00
Parts (new, OFM)	= \$ list price, per invoice
Parts (used, LKQ)	= \$ invoice + 15%
Sublet	= \$ invoice + 15%
Front wheel alignment	= \$80.00
Four wheel alignment	= \$ 120.00
Air Conditioning Recharge	= \$ 86.00
Storage and Handling	= \$ 0
Yard estimates (travel + gas)	= \$ 0
Shop estimates	= _\$ 0



(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Master Body Sales & Service	, Inc.
Address 9824 Atlantic Avenue	
City South Gate State CA	Zip <u>90280</u>
Contact Name <u>James S. Coates</u>	
Phone # 323 564 6901	Fax# 323 564 2462
24 Hour Contact James S. Coates	Toll Free #n.a.
Business Days & Hours Monday thru Friday, 7:0	0 am - 3:30 pm
Contractor License #:n.a.	
Other License (if applicable): 00595 Vehicle Dealer	License REGISTER AT:
WEBVEN Vendor # (Required): 008335	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 50.00
Overtime Hourly Rate:	\$ 75.00
Freight: (FOB Destination – Show Freight as a separate line item)	\$ as applicable
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	n.a. %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Master Body Sales & S	erv., Inc.
Services	FIXED FEES / UNIT PRICE
***We charge a hourly rate of	= _\$
\$ 50.00. We do not have a	= \$
different rate for mechanical,	= \$
electrical, transmission or	= \$
any other type of work performed	. = \$
Haz. waste fee, disposal fee and	= _\$
shipping and handling fees are	= \$
included in our qoutes and	= \$
are dependent on the particular	= \$
job.	= \$
	= \$
	= \$
	= _\$
	= \$
	=

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Morgan Attwood & Soz	n, Inc
Business Name <u>Morgan Attwood & Soz</u> Address <u>843 West Kildare</u>	
	Zip <u>93534</u>
Contact Name Reheaca C. Attwood	
Phone # 661-948-5716	Fax# <u>661-726-9667</u>
24 Hour Contact	Toll Free #
Business Days & Hours Monday - Friday,	3:00 am - 6:00 pm
Contractor License #:	
Other License (if applicable): BAR AF069589	REGISTER AT:
WEBVEN Vendor# (Required): 5087/90/	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	
	\$ 75.00
Overtime Hourly Rate:	\$ 112.50
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	<u> </u>
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	/5 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Morgan Attwood	& Son, Inc.
SERVICES	FIXED FEES / UNIT PRICE
Smag Certification	= \$36.75
Smog Certification Towing - Local	= \$50.00
Towing - Long Distance (over 5 miles)	= \$5.00 per mile
(over 5 miles)	= \$
	= \$
	= \$
	= _\$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name North Star Elec-	tronics, LLC.
Address 12126 Woodruff Aut	
City DOWNEY State	CA. zip 90241
Contact Name <u>Jake Stevenson</u>	
Phone# (562) 803-5535	Fax# (562)803-0255
24 Hour Contact (562) 307-6704	Toll Free # N / A
Business Days & Hours	M-4:PM Fri 6:AM-3:PN
Contractor License #: N/A	
Other License (if applicable): N/A	
WEBVEN Vendor # (Required):	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	
Overtime Hourly Rate:	\$ 85.00 hr.
Freight: (FOB Destination – Show Freight as a separate line item)	\$ FOB
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	14 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	14 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Olympic Top Shop	
Address 6150 Whittier Blvd.	
City Lus Angeles State Cal	Fornía zip <u>90022</u>
Contact Name Carmen Rizzo / Feliciano Cort	ez
Phone # (323) 723-7466	
24 Hour Contact Feliciano - (323) 581-0262	Toll Free #
Business Days & Hours Monday - Friday, - 8:0	
Contractor License #:	
Other License (if applicable):	
WEBVEN Vendor # (Required): 509 27301	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
	Marine, Marine
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
The hourly labor rates for this contract shall be:	\$ 31.51
The hourly labor rates for this contract shall be: Regular Hourly Rate:	\$ 31.51 \$ 31.51
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight:	\$ 31.51 \$ 31.51
The hourly labor rates for this contract shall be: Regular Hourly Rate: Overtime Hourly Rate: Freight: (FOB Destination – Show Freight as a separate line item)	\$ 31.51 \$ (Attach Exhibit 1A, page 3 to define how your company charges for these services.)

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Dlympic Top Shop	
SERVICES	FIXED FEES / UNIT PRICE
AUTO UPHOSTERY	= \$31,51 LESS 15 %
,	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name OSTRAM Chevrolet	
Address 310 W Whitten BIVD	
City Montebello State	09 zip 90640
Contact Name Dennis VALUEZ	
	Fax#323.721.2316
24 Hour Contact Dennis VALDEZ	Toll Free #
Business Days & Hours MONDAY - FRI 7:00n	AM-7:00pm / Sat. 3:00AM-5:00,
Contractor License # 41-08/73 (BUNDA)	a Automotive RepAIR
Other License (if applicable): 104134 (CITY)	of Montebello Business Liens
WEBVEN Vendor # (Required): 0222/30/	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
The hourly labor rates for this contract shall be:	0115
Regular Hourly R	
Overtime Hourly R	•
(FOB Destination – Show Freight as a separate line i	ight: as required
Fixed Fees or Unit Price	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percenta (The maximum bid allowance is 1	age: /√ %
*Subcontracted Work Markup Percenta (The maximum bid allowance is a	

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

Labor Operation Pricing Guide

Ostrom Chevrolet

Model: (Menu Operations)

Category	Op-Code	Description	Time	Parice
	4	AUTOMATIC TRANSMISSION SERVICE	1.0	1 25.95 1 15.95
MENU		COOLING SYSTEM SERVICE	1.0	69.95
		FRONT END ALIGNMENT	1.0	65.95
		WHEEL BALANCE	0.5	29.95
	8	BRAKE SERVICE, CLEAN & ADJUST AIR CONDITIONING SERVICE	0.8	71.95
			0.3	19.95
		ROTATE TIRES POLLEN FILTER REPLACEMENT	0.7	59.95
		THROTTLE BODY SERVICE	0.7	69.95
MENU		REPLACE FUEL FILTER	0.5	68.95
		INSPECT BELTS AND HOSES	0.3	19.95
	15	FUEL INJECTION SERVICE	1.0_	1 05.95
	16	REPACK WHEEL BEARINGS	1.0	69.95
		SLIP JOINT SERVICE	0.7	59.95
MENU	DS	DIFFERENTIAL SERVICE NON SYNTHETIC	1.0	1 19.95
MENU		ENGINE FLUSH	1.0	1 49.50
MENU	LOF	VEHICLE SERVICE (LOF)	0.2	35.95
MENU	DSS	DIFFERENTIAL SERVICE SYNTHETIC	1.0	1 19.95
MENU	PSF	POWER STEERING FLUSH	0.7	89.95
MENU	LOFS	SYNTHETIC LOF	0.2	75.95 64.95
MENU		6K/6 MONTHS SERVICE	0.5	1 59.95
MENU	15KC	15K/1 YEAR INTERMEDIATE SERVICE CARS	1.2	1 69.95
MENU	15KT	15K/1 YEAR INTERMEDIATE SERVICE LT TRUCKS	3.0	395.50
MENU	30KC	30K/2 YEARS MAJOR SERVICE CARS	3.0	399.50
MENU	30KT	30K/2 YEARS MAJOR SERVICE LT TRUCKS	0.7	1 19.50
MENU	6KDA	6K/6 MONTHS DURAMAX/ALLISON MINOR SERVICE	2.0	3.59.50
MENU	15KDA	15K/1 YEAR DURAMAX/ALLISON INTERMEDIATE SERVICE	1.0	1 49.95
MENU	PTM	POWERTRAIN SERVICE SEASON CHANGE SERVICE	1.5	1 95.95
MENU	SCM	PERFORMANCE SERVICE	1.9	2 19.95
MENU	PSM SM1	SIMPLIFIED MAINTENANCE 1	0.5	69.95
MENU	40	1ST FREE OIL CHANGE	0.2	19.95
	41	PAINT & FABRIC PROTECTION	0.4	30.00
	42	PDI DETAIL CAR	0.9	
	43	PDI DETAIL TRUCK	1.2	
	44	PDI REINSPECT	0.3	
MENU	BFF	BRAKE FLUID FLUSH	1.0	1 05.95
MENU	SM2	SIMPLIFIED MAINTENANCE 2	0.5	89.50
	47	55 POINT SAFERY INSPECTION	ļ	0.00
	48	UCD SMOG		0.00
	49	UCD DETAIL FOR SALE	2.5	160.00
	50	UCD RECONDITIONING		0.00
	51	DETAIL FULL SIZE SUVS	2.5	139.50
	52	DETAIL SMALL CARS TRUCKS	2.5	1 19.50
	53	REPLACE 2 TIRES	1.2	39.95 6 9.95
	154	REPLACE 4 TIRES	2.7	449.50
MENU	30KDA	30K/2 YEARS DURAMAX/ALLISON MAJOR SERVICE	0.5	4-43.00
		PDI CAR	0.8	
		PDI TRUCK 19.95 OIL CHANGE SPECIAL	0.2	19.95
L		2 WHEEL BRAKE REPLACEMENT	1.5	229.95
MENU		4 WHEEL BRAKE REPLACEMENT	3.0	459.90
MENU		REPLACE 2 SHOCK ABSORBERS	0.8	1.00.00
		REPLACE 4 SHOCK ABSORBERS	1.6	
		REPLACE 2 FRONT STRUTS INCL ALIGNMENT	3.0	
	BRSPL	BALANCE & ROTATE/BRK INSP COUPON SPL	8.0	\$49.40
	C6KDA	6K DURAMAX COUPON SPECIAL	0.6	\$109.50
	C15KDA	15K DURAMAX COUPON SPECIAL		\$339.50
	C30KDA	30K DURAMAX COUPON SPECIAL		\$429.50
	C6KCT	6K CARS/TRUCKS COUPON SPECIAL	0.4	
	C15KT	15K TRUCKS COUPON SPECIAL		\$149.95
	C15KC	15K CARS COUPON SPECIAL		\$139.95
	C30KT	30K TRUCKS COUPON SPECIAL		\$379.50
	C30KC	30K CARS COUPON SPECIAL		\$375.50
	BATT	5 YR BATTERY REPL SERVICE DRIVE SPECIAL	0.4	\$93.95

Page 1 of 3

Required Form - Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name PANY ME AND SOLO	4 Pgint
Address 38018 Ninth St. EdSt	
city Palmaale State CA	zip <u>93550</u>
Contact Name SCOO VOY CON JON	
Phone # (001-947-7838	Fax # (001-2000 St (00
24 Hour Contact 818 - 3355 - 9898	Toll Free # \(\lambda \lambda \)
Business Days & Hours M-F 8 00 4 M - 5	100 pm
Contractor License #:	·
Other License (if applicable):	DOCUMENT AT
WEBVEN Vendor # (Required): 500000	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
The hourly labor rates for this contract shall be:	
The hourly labor rates for this contract shall be: Regular Hourly Rate:	55.0
	CD
Regular Hourly Rate:	in the second se
Regular Hourly Rate:	in the second se
Regular Hourly Rate:	(Attach Exhibit 1A, page 3 to define how your

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Palmale Uni-E	3014 & Point
SERVICES	FIXED FEES / UNIT PRICE
Body Labor	= \$ 55,60
Frame Labor	= \$55.00
Mechanical Labor	= \$ (15.00
Paint Labor	= \$ 35,00
Structural Labor	= \$ 56,80
Paint Supplies	= \$ 35,00
	= \$
	= _\$
	= _\$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	

Include fees that must be charged to the District, such as hazardous waste fees, disposal fees, shipping and handling fees, etc.

* All hazardous waste fees, disposal fees and shipping be are all included in the services above.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name PARKHOUSE LIRE	INC.
Address Sylbo Shv// 57.	
City BELL GARDEUS State	<u> </u>
Contact Name <u>LEONARD</u> <u>LETENDER</u>	11/1 512- and 3/11/2
Phone # 562-928-0421 Ext 21	40 Fax# <u>Xod - 927 - 2760</u>
24 Hour Contact	70 Free #
Business Days & Hours Monday They FRIDay Va	in to 5th Saturday Sam will 12 pm
Contractor License #:	
Other License (if applicable): 95-976/599	REGISTER AT:
WEBVEN Vendor # (Required): 0/98480/	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	54/9
Overtime Hourly Rate:	1-11
	\$ 75 =
Freight: (FOR Destination – Show Freight as a separate line item)	X
Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices:	X
(FOB Destination – Show Freight as a separate line item)	\$ (Attach Exhibit 1A, page 3 to define how your

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

Parkhouse Tire e

Page 2

*Plus Repair Material

MEDIUM TRUCK LABOR PRICING

***EMERGENCY ROAD SERVICE ***

Road/Emergency Service—Hourly M-F 7:00 AM-5:00 PM Plus Piecework	\$ 54.00
Road/Emergency Service—After Hours & Saturday-Hourly 2 Hour Minimum-Plus Piecework and Dispatch Fee	\$ 75.00
Road/Emergency Service—Sunday & Holidays Hourly 2 Hour Minimum- <u>Plus Piecework and Dispatch Fee</u> After Hours Dispatch Fee Mileage—Up to 20 Miles Mileage—Over 20 Miles-Each Fuel Surcharge	\$108.00 \$ 15.00 No Charge \$.95 \$ 9.50
FLEET SERVICE	
Hourly Rate Fleet Service—Pre-scheduled-Customer Yard-Hourly Portal to Portal—Piecework Included	\$ 54.00
Flat Rate One time service call charge pre-scheduled-Customer Yard Plus Piece Work	\$ 54.00
<u>PIECEWORK</u>	
PIECEWORK (Road/Emergency Service only or Parkhouse Yard) Wheel Switch—Medium Truck Dismount & Mount-Medium Truck Flat Repair-Medium Truck-Loose Flat Repair-Medium Truck-On Truck	\$ 10.00 \$ 20.00 \$ 20.00* \$ 22.00*

\$ 75.00 per call

OFF THE ROAD & INDUSTRIAL/FORKLIFT LABOR PRICES

Travel Charge (outside 40 miles)

Mini Boom-Hourly-7 AM-5 PM-2 Hr. Min	\$ 64.00
Mini Boom-After Hours-2 Hr. Min.	\$ 91.00
Mini Boom-Sun. & Holidays	\$111.00
Large Boom-Hourly-7 AM-5 PM 2 Hr. Min	\$ 85.00
Large Boom After Hours-2 Hr. Min.	\$105.00
Large Boom- Sun. & Holidays	\$118.00
OTR Mileage Charge over 80 miles	\$.95 per mile
*** INDUSTRIAL/FORKLIFT SERVICE ***	
Press Labor-Customer Yard/Parkhouse Yard-Per Inch	\$ 2.50
Remove & Replace-Each Tire	\$ 5.50
Minimum Labor-Industrial Service Call	\$ 60.00

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: BEKNOUSE TIRE INC.		
SERVICES	FIXED FEES / UNIT PRICE	
Large TRUK Disposal TiRE	= \$ 6 DER UNIT	
Light Text Disposal Tier	= \$ 2 DER UNIT	
Passenger Sisposal Tire	= \$ 1.25 DER UNIT	
California Recycling FEE	= \$ / PER UNIT	
5P9 43/8 BLOSS VOLUE STEM TR513	= \$ 1.88 + Tax	
SPID Flow through Value Cap	= \$.71 + Tax	
5p12 High temp Valve CORE	= \$ -19 + Tax	
6 16 RMA REPAIR UNIT	= \$ 5.81 + Tax	
1018 PX/ REPORT UNIT	= \$ /-46 + Tax	
019 PX2 REPOSIE UNIT	= \$ 2.91 + Tex	
020 Px3 Repaire Unit	= \$ 4.36 + Tax	
021 PX4 REDIR UNIT	= \$ 5.8/ + Tax	
BIDO Plug + 120 REpair UNIT	= \$ 8.24 + Tax	
Passenger bolance	= \$ 650	
Truck balance	= \$ \(\beta^{.50} \)	

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name PECK ROAD FORD	TRUCK CENTER.
2150 KELLA ALF	
Address $24307)2207$ State C_{1}	ALIF 7in 90601
City /////EX State	
Contact NameTim KELLY.	72 192 21 5
Phone # OFFICE 562-692-7267 CELL 562-53	66-038/ Fax# 362-612-3630
EDDIE TORRES 562-536-03 24 Hour Contact — Tim KEZLY: 562-556-03	13.5 18.1 Toll Free # <u>877-605-Roy</u>
Business Days & Hours M-F 7Am TOMIDNIBAT	SAT 7:30 Am TO 4:00 Pm.
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required): 03246901	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 88.00
Overtime Hourly Rate:	\$ 88.00.
Freight: (FOB Destination – Show Freight as a separate line item)	\$ F.O.B DESTINATION.
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

Page 1 of 3

Required Form - Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name PEPE'S TOWING SERVICE INC	•	
Address 918 SOUTH BOYLE AVENUE		
City LOS ANGELES State CAL	IFORNIA Zip	90023
Contact Name JOSE ACOSTA		
Phone # 323-263-6911		323-268-1652
24 Hour Contact DISPATCH		ee#
Business Days & Hours 365 DAYS PER YEAR, 24 H		ILABLE
Contractor License #:		
Other License (if applicable): 813482-95		
WEBVEN Vendor # (Required): 11918301	REGISTER A	AT: y.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on	your invoice.	
rease troic. Tom process	•	
The hourly labor rates for this contract shall be:		
The flourly labor races for the persuage states		
Regular Hourly Rate:	\$	
Overtime Hourly Rate:	\$	
Freight:	s	
(FOB Destination – Show Freight as a separate line item)		page 3 to define how your
Fixed Fees or Unit Prices:		
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)		%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)		%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

Page 3 of 3

Required Form- Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: PEPE'S TOWING SERVICE,	INC.
SERVICES	FIXED FEES / UNIT PRICE
Light duty towing	= \$ 65.00 P/Hr
up to 14,000 lbs. G.V.W.R.	= \$ portal to portal
	= _\$
Medium duty towing	= \$ 95.00 P/HR
From 14,001 lbs to 19,500 lbs	= \$ portal to portal
G.V.W.R.	= _\$
	= \$
Heavy duty towing	= \$ 150.00 P/Hr
from 19,501 lbs to 75,000 G.V.W	.R. \$ portal to portal
including lowboy	= \$
	= \$
	= \$
	= _\$
	= _\$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name telerson try markies, Inc.	
Address 13509 S. Raymond Ave.	
City Gardena State CA	zip 90247
Contact Name Geoff Ligarit	
Phone # (310) 323-3155	Fax#(310)323-3606
24 Hour Contact	Toll Free # NA
Business Days & Hours Monday - Friday 7:00-4:00	
Contractor License #: 1031515	
Other License (if applicable): COIDBB	
WEBVEN Vendor # (Required): 51142701	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on yo The hourly labor rates for this contract shall be:	one han Crew
Please Note: Your pricing shall also be reflected on your The hourly labor rates for this contract shall be:	one hun crew
	one hun crew 75°° #125°°
The hourly labor rates for this contract shall be:	one hun crew
The hourly labor rates for this contract shall be: Regular Hourly Rate: \$	one hun crew 75°° #125°°
The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ Overtime Hourly Rate: \$ Freight:	one hun crew 75°° #125°°
The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ Overtime Hourly Rate: \$ Freight: (FOB Destination – Show Freight as a separate line item)	one run 75°° #125°° 1125° #1875° Streight Pill (Attach Exhibit 1A, page 3 to define how your
The hourly labor rates for this contract shall be: Regular Hourly Rate: \$ Overtime Hourly Rate: \$ Freight: (FOB Destination – Show Freight as a separate line item) Fixed Fees or Unit Prices: *Materials / Parts Markup Percentage:	one hun Crew 75°° #125°° 1125° #1875° Strewald Price (Attach Exhibit 1A, page 3 to define how your company charges for these services.)

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: PHERSON Hydraulies	s, Inc.
SERVICES	FIXED FEES / UNIT PRICE
Service Call	= \$ 6500
Service all Labor rate 2 men	$= $ 125^{\circ}/hr$
Service Call Labor rate I man	= \$ 7500/hr.
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= _\$
	= _\$
	= _\$
	= _\$
	= _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Powertrain Reman	Industries
Address 1646 Cowles St.	
city Long Beach State (TA zip 90813
Contact Name Marty Salinas	
Phone # (562) 432-8555	Fax#(562) 432 - 8554
24 Hour Contact	Toll Free #
Business Days & Hours Monday thru- Frie	day 8:00 am. to 5:00 p.m.
Contractor License #:	
Other License (if applicable):	DECOMPTED AT
WEBVEN Vendor # (Required): 51147001	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 65.95
Overtime Hourly Rate:	\$ 65.95
Freight: (FOB Destination – Show Freight as a separate line item)	\$ \$\phi\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name PTO Sales, Corporal 1	01
Address 14815 Firestone BlvD.	
City La Mirada State CA	zip <u>906</u> 8 <u>8</u>
Contact Name M. Graham	
Phone # 714-690-4970	Fax# <u>714-690-4975</u>
24 Hour Contact 949-690 - 4970	Toll Free #
Business Days & Hours Monday through Friday	, 7:30am to 5p.m.
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required): 04265 90	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 6500
Overtime Hourly Rate:	\$ 9750
Freight: (FOB Destination – Show Freight as a separate line item)	s Cost
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	/0 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	N/A %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name QUI	NN POWER SYSTEMS			
Address350	SHEPHERD STREET			
CityCIT	OF INDUSTRY State	_CA	Zip	90601
Contact Name KUR	HINTZ			
Phone #(56	2) 463-6080		Fax #	(562) 463-6096
24 Hour Contact			Toll Fre	ee#
Business Days & Hours	10NDAY-FRIDAY		7:00 A.M. T	O MIDNIGHT
Contractor License #:				
Other License (if applicable):			REGISTER A	
WFRVFN Vendor # (Required):		http://lacount	y.info/doing_business/main_db.htm
, and the second				
Please Note: Your p	ricing shall also be reflected		ur invoice.	
Please Note: Your p		<u>be:</u>	20.4	00
Please Note: Your p	es for this contract shall l	be: y Rate: _ \$	98.0	
Please Note: Your p	es for this contract shall l Regular Hourl Overtime Hourl	oe: y Rate: \$ y Rate: \$ Freight:	98.0	
Please Note: Your p	es for this contract shall l Regular Hourl Overtime Hourl	y Rate: \$ y Rate: \$ reight: ine item) \$	98.(147.(COST (Attach Exhibit 1A,	
Please Note: Your p	Regular Hourl Overtime Hourl ation – Show Freight as a separate l	y Rate: \$ y Rate: \$ reight: ine item) \$ Prices:	98.(147.(COST (Attach Exhibit 1A, company charg	DO page 3 to define how your

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: QUINN POWER SYSTEMS	
SERVICES	FIXED FEES / UNIT PRICE
ENVIRONMENTAL SURCHARGE	= \$ 24.00
HARDWARE CHARGE	= \$ 7% OF PARTS: MAXIMUM \$150
TRAVEL TIME AND MILEAGE	= \$ LABOR RATE + \$1.75/MILE
	= _\$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$
	= _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Rush Truck Conters of	f Colifornia
Cha Claura Mr	
	zip 9,0660
City Pico Rivera State CA	Zip
Contact Name	
Phone # (562) 949-5451	Fax# (5/2)566-4377
24 Hour Contact <u>Jopie Hengst</u> (562) 318-	14/30 Toll Free # 800-776-3647
Business Days & Hours M-F 7:00 a.m 9:00	p.m. Sat 8:00 a.m 4:00 pm Sun Cl
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required):	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	9600
·	(11)
Overtime Hourly Rate:	\$ 799.00
Freight: (FOB Destination – Show Freight as a separate line item)	\$ per frt invoice the
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	/5%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	/5%

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Kush Truck Conter	50	of Colifornia
SERVICES		FIXED FEES / UNIT PRICE
Machine Marges Shop Supplies	. =	\$ 15% of Labor Not to exceed \$150.00
Shop Supplies	. =	\$ 12% of Labor Not to exceed \$150.0
1 11		\$
	. =	\$
	. =	\$
	. =	\$
	=	\$
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	. =	\$
	. =	\$
	=	\$
	=	\$
	=	\$
	_	¢

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name SAFELITE AUTOGIASS	
Address	
City COMMERCE State C	A Zip <u>90040</u>
Contact Name DREW CANTER / JOHN BE	
Phone # 323-724-0501 / 805-573-1130	Fax# <u>323 · 724 · 06 26</u>
24 Hour Contact SAFCLITE	Toll Free # <u>800 - 800 - 27 2</u> 7
Business Days & Hours MONDAY - SATURDAY , 8 A	tm To 5PM
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required): 5/27230/	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 15.00
Overtime Hourly Rate:	1/ .
Freight: (FOB Destination – Show Freight as a separate line item)	\$ <i>MA</i>
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	/5.0 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15.0 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: SOFELITE AUTOGU	435_	
SERVICES		FIXED FEES / UNIT PRICE
DOMESTIC & FOREIGN WINDSHIELDS	=	\$ 37% OFF NAGS LIST
TOMOSTIC & FOREIGN TEMPLES GUASS	=	\$ 32% OFF NAGS LIST
PEIDTED MOLDINGS (IF REQUIRED)	=	\$ LIST PRICE
WINDSHIELD REPAIRS	. =	\$ 39.95 First CHIP, \$ 10.00 EA. ADD. TIONAL
LABOR RATE	. =	\$ 15.00 PSZ NAGS HOUR
	. =	\$
	- =	\$
	- =	\$
	_ =	\$
	_ =	\$
	_ =	\$
	_ =	\$
	_	\$
	_ =	\$
	_ =	\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Smith and Hartford Coach Works		
Address 417 E. Euclid Ave		
city Compton State C	a	zip 90222
Contact Name Igor Frank	***************************************	
Phone # 310 635-9432	· · · · · · · · · · · · · · · · · · ·	Fax# _310 635-0710
24 Hour Contact 818 731-2753		Tolf Free #
Business Days & Hours monday thrrough friday	y 6:30 am	ill 5:30 pm
Contractor License #: AA243379		
Other License (if applicable): 04000957		
WEBVEN Vendor # (Required): 12331201	Visit http://lacounty	infa/doing_business/main_db.him. to register.
	•	
Please note your pricing shall also b	e reflected on	your invoice.
The hourly labor rates for this contract shall be:		
Regular Hourly Rate:	\$ 30.00	
Overtime Hourly Rate:	\$ 30.00	
Freight: (FOB Destination – Show Freight as a separate line item)	\$	
Fixed Fees or Unit Prices:	(Attach Exh compa	ibit 1A, page 3 to define how your y charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15	%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15	%

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Page 3 of 3

Required Form- Exhibit 1A

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Smith & Hartford Coach Works

Services	FIXED FEES / UNIT PRICE
Allignment large vehicle	= \$ 180.00
Allignment light vehicle	= \$ 90.00
Hazardous Waste	= \$5.00
Delivery	= s no charge
frame set up and measure	= <u>\$ 100.00</u>
light vehicle detail	= \$ 125.00
large vehicle detail	= <u>\$</u> 250.00
frame labor	= \$ 60.00/hour
suspension labor	= <u>\$ 60.00/hour</u>
electrical work	= <u>\$ 60.00/hour</u>
Material Material Control of Cont	= \$
	= _\$
	= \$
	= \$
	= _\$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name South Boy Ford, I	MC.
	0. Box 1550
city Hawthorne state CA	zip 90251
Contact Name Bob Cawley	
Phone # 310-706-6101	Fax# 310-706-6105
	6134 Toll Free #
Business Days & Hours M-F 7AM to 6PM	Sat 7AM to 4PM
Contractor License #: BAR AA Z25 696	
Other License (if applicable):	
WEBVEN Vendor # (Required): 51978401	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 85,00 (Flat Rate Hrs)
Overtime Hourly Rate:	\$ N/A
Freight: (FOB Destination – Show Freight as a separate line item)	s N/A
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	10 %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: South Boy Ford	, Inc
SERVICES	FIXED FEES / UNIT PRICE
Brake Replacement	= \$
- Cars & Lt. Trucks	= \$ DEM \$149, 88 / Motorcraft \$ 109,88
- F-250 & E-250	= \$0EM\$ 179.88 Motorcraft \$134.88
- Heavy Duty	= \$0EM\$ 199.81 /Motorcraft\$ 149.88
Flat Tire Repair	= \$ No Charge
Oil & Filter Change	= \$
- Cars & Lt. Trucks	= \$ 29,88
- 7.3 Ltr. Diesel	= \$ 84,88
- 6.0 Lm. Diesel	= \$99,88
	= \$
	= \$
	= \$
	= \$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name	Speedo Electric Inc.		
Address	5608 East Washington Blvd.		
City <u>Comme</u>	rce State CA	Zip	90040
Contact NameJ	erry Fine		
Phone # <u>(323)</u>	721-9414	Fax	x# <u>(323)</u> 721-8553
24 Hour Contact _	N/A	Tol	I Free # N/A
Business Days & H	ours Mon. through Fri. 8 A.M. t	to 4:30 P.M.	
Contractor License	#: _ N/A		
Other License (if app		REGIST	
WEBVEN Vendor# (Required): 04073401	http://lac	county.info/doing_business/main_db.htm
	Your pricing shall also be reflected on or or rates for this contract shall be:	your invoice.	
	Regular Hourly Rate:	\$ 68.00	
	Overtime Hourly Rate:	\$102.00	
(FOE	Freight: B Destination – Show Freight as a separate line item)	\$ As Needed	
	Fixed Fees or Unit Prices:	(Attach Exhibit company c	1A, page 3 to define how your harges for these services.)
	*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)		15 %
	*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)		15 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Harbor Real Estate, LP. DBA The Boa	atYard
Address 13555 Fiji Way	
City Marina Del Rey State Calif	ornia Zip 90292
Contact Name Victor Espino	
Phone # (310) 823-8964	Fax # (310) 821-0569
24 Hour Contact Victor Espino	Toll Free # (310) 864-5274
Business Days & Hours Monday - Friday: 7:30am - 4:00pm	
Contractor License #: N/A	
Other License (if applicable): N/A	
WEBVEN Vendor # (Required): 51147701	Visit http://lacounty.info/doing_business/main_db.htm. to register.
Please note your pricing shall also be	e reflected on your invoice.
The hourly labor rates for this contract shall be:	
Pagular Hourly Pato:	¢ 65.00
Regular Hourly Rate:	\$ 03.00
Overtime Hourly Rate:	\$ 97.5
Freight: (FOB Destination – Show Freight as a separate line item)	\$ N/A
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15.00 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15.00 %
•	

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Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Harbor Real Estate, LP. DBA The Boatyard

SERVICES	FIXED FEES / UNIT PRICE
Engine Lift / Set	= \$ 85.00 Per 1/2 Hour
Engine Lift / Set With C - Frame	= \$ 125.00 Per 1/2 Hour
Pressure Wash Up To 35'	= \$ 65.00
Pressure Wash 36' To 45'	= \$ 85.00
Pressure Wash over 46'	= \$ 100.00
	= _\$
	= \$
	= _\$
	= \$
	=
	= <u>\$</u>
	= \$
	= _\$
	= \$
	= \$

SPOT PRIME, BLISTERS AND SANDING NOT INCLUDED

	Γ							ĺ		воттом
PAINT	SIZE	H+L	LAY	LAY DAY	HAZARD	PAINT	LABOR &	НСРВ	HCPB	SPECIAL
AMOUNT	V		DAY	SPECIAL	WASTE		MISC MAT'L	1 COAT	2 COATS	15% OFF
				(3 FOR 5)						
0.75	MIN	\$95	\$55	\$165	\$20	\$179	\$140	\$434	\$557	\$473
0.75	20	\$109	\$55	\$165	\$20	\$179	\$140	\$448	\$707	\$601
0.75	21	\$112	\$58	\$173	\$20	\$179	\$146	\$457	\$719	\$611
0.75	22	\$113	\$61	\$182	\$20	\$179	\$152	\$464	\$729	\$620
0.75	23	\$117	\$63	\$190	\$20	\$179	\$158	\$474	\$742	\$ 631
0.75	24	\$121	\$66	\$198	\$20	\$179	\$164	\$484	\$755	\$642
0.75	25	\$124	\$69	\$206	\$20	\$179	\$170	\$493	\$767	\$652
0.75	26	\$128	\$72	\$215	\$20	\$179		\$503	\$780	\$663
0.75	27	\$132	\$74	\$223	\$20	\$179		\$513	\$793	
0.75	28	\$136	\$77	\$231	\$20	\$179		\$523	\$806	
1.00	29	\$139	\$80		\$20	\$180		\$538	\$830	\$706
1.00	30	\$147	\$83	\$248	\$30	\$180		\$562	\$857	\$728
1.00	31	\$151	\$85	\$256	\$30	\$180		\$572 \$600	\$870 \$974	
1.25	32	\$156	\$88	\$264	\$30	\$225		\$628	\$974 \$987	\$839
1.25	33	\$160	\$91	\$272	\$30	\$225		\$638	\$987 \$1,092	
1.50	34	\$166	\$94	\$281	\$30 \$30	\$270		\$695		
1.50	35	\$171	\$96		\$30	\$270		\$706 \$722	\$1,106 \$1,130	
1.50	36	\$176	\$99		\$30	\$270 \$270		\$722 \$733	\$1,130 \$1,144	
1.50	37	\$181	\$102			\$270 \$270		\$733 \$745	\$1,144 \$1,159	
1.50	38	\$187	\$105					\$745 \$801	\$1,159	
1.75	39	\$192	\$107			\$315 \$315		\$812	\$1,203 \$1,277	1
1.75	40 41	\$197 \$203	\$110 \$113		\$30 \$30	\$360		\$879	\$1,402	
2.00	41	\$203 \$207	\$113 \$116			\$360 \$360		\$889	\$1,415	
2.00 2.00	42	\$207 \$213	\$118 \$118			\$360 \$360		\$901	\$1,430	
2.00	43 44	\$213 \$229	\$110 \$121			\$360		\$923	\$1,455	
2.00 2.25	45	\$229 \$234	\$121 \$124		\$30 \$30	\$405		\$9 7 9		
2.25	46	\$234	\$12 4 \$127			\$405		\$1,000		
2.29 2.50	47	\$235 \$245	\$127 \$129			\$450		\$1,057		
2.50	48	\$250	\$123 \$132			\$450		\$1,068		
2.75	49	\$255	\$135			\$495		\$1,124		
2.75	50	\$261	\$138			\$495		\$1,136		
3.00	51	\$266	\$140			\$540	144	\$1,202		
3.00	52	\$271	\$143			\$540		\$1,213		
3.00	53	\$277	\$146			\$540		\$1,225		
3.50	54	\$282	\$149			\$630		\$1,326		
3.50	55	\$287	\$151			\$630		\$1,337	\$2,182	
3.50	56	\$297	\$154	\$462	\$40	\$630		\$1,353		
3.50	57	\$311	\$157			\$630		\$1,373		
4.00	58	\$319	\$160			\$720		\$1,477		
4.00	59		\$162	\$487		\$720		\$1,491		
4.00	60	\$335	\$165	\$495	\$40	\$720	\$4 <u>10</u>	\$1,50 <u>5</u>	\$2,455	\$2,087

PRESSURE WASH: \$65.00 UP TO 35'

\$85.00 36' TO 45'

\$100.00 OVER 46'

BOOM CRANE \$85.00 per 1/2 HOUR MARINE BUSINESS \$95.00 per 1/2 HOUR CUSTOMERS

(ENGINE LIFTS/SETS, MAST STEPS/UNSTEPS) \$125.00 per 1/2 FOR "C" FRAMES

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business NameTruck Specialty Service, Inc.	
Address 4019 E. 52nd Street	
City Maywood State C	Zip 90270
Contact NameGlen Firment	
Phone # (323) 589-6415	Fax# (323) 589-6231
24 Hour Contact (323) 589-6415	
Business Days & Hours Monday thru Friday 8:00am to	5:00pm Saturday 8:00am to 2:30pm
Contractor License #:	
Other License (if applicable): City of Maywood Business	
WEBVEN Vendor # (Required): 50836001	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 58.00
Overtime Hourly Rate:	\$ 87.00
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Truck Specialty Service	e, Inc.
SERVICES	FIXED FEES / UNIT PRICE
shipping on parts inbound (special	= \$.75/lb
order only)	= _\$
	= \$
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	= \$
	= \$
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	= _\$
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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name United Auto & Truck, Inc.	
Address 13101 Foothill Blvd.	
City Sylmar State CA	Zip <u>91342</u>
Contact Name <u>Hisham (Peter) Abdelshahed</u>	
Phone # <u>(818)</u> 837-4595	Fax# <u>(818) 837-4590</u>
24 Hour Contact Peter Abdelshahed	Toll Free # 1 (888) 878 – 2531
Business Days & Hours Monday - Saturday 8:00A	M to 5:00 PM
Contractor License #: _n/a	
Other License (if applicable): n/a	REGISTER AT:
WEBVEN Vendor # (Required): 51147201	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 75.00
Overtime Hourly Rate:	\$ 112.50
Freight: (FOB Destination – Show Freight as a separate line item)	\$ cost
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
· ·	

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: United Auto & Truck,	Inc.
SERVICES	FIXED FEES / UNIT PRICE
Hazardous Waste Fee	= <u>\$ 11.00 Per Unit</u>
Towing	= <u>\$ Cost</u>
BIT Inspection	= \$ 75.00
Pumper PM Services	= \$ 250.00 to 400.00
Crew	= \$ 195.00 to 275.00
Aerial PM Service	= \$ 450.00 to 500.00
Buses PM Service	= \$ 195.00 to 275.00
Diesel Pick UP F250 - F450	= \$ 185.00
Crown Victoria PM Service	= \$ 95.20
Dodge Stratus PM Service	= \$ 72.43
DOT Inspection	= \$ 75.00
Steam Clean & Wash	= \$ 75.00 Most Vehicles
	= _\$
	= \$
	= \$

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name United Transmission Exchange	
Address 24147 E 6th St.	
City San Bernardino State CA	Zip 92410
Contact Name Adrian Downs	
Phone # 909-384-8140	Fax # 909-384-8145
24 Hour Contact <u>Jim Knox 562-500-6133 ce11</u>	Toll Free # 800-527-1637
Business Days & Hours Mon-Fri 6:00 - 5:00pm	
Contractor License #:	
Other License (if applicable):	DECICIED AT
WEBVEN Vendor # (Required): 51471001	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 85.00
Overtime Hourly Rate:	\$ 127.50
Freight: (FOB Destination – Show Freight as a separate line item)	
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	% 15%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

SERVICES		FIXED FEES / UNIT PRICE
wide Allison Transmissions	=	<pre>\$ Time and material</pre>
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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Valco Toursmis	sion Ltd
Address 1826-Pearblossom	Hoy
City Lebel TCX State	zip <u>93543</u>
Contact Name Micole Henral or	Valorie Harriel
Phone # 1601-944-4858	Fax#601.944-5822
24 Hour Contact MUDIED Valerie 4619	44-7032 Toll Free # 1-800-249-5
Business Days & Hours Mon-Friday 8	5 onlessofteranargeno
Contractor License #: LA.Co. Business k	10 # 382590/4040-131548
Other License (if applicable): Bureau of h	etoRevier Rect AHIU46 REGISTERATE
WEBVEN Vendor # (Required): 5050670	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$68.56
Overtime Hourly Rate:	\$ N/A
Freight: (FOB Destination – Show Freight as a separate line item)	\$ N/A
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15%

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: VCICCO TOURSON	ission Lite
SERVICES	FIXED FEES / UNIT PRICE
Transmission Overtail =	\$5.00 Hospilaste Fea
Dislogentiel =	\$5.00 they wester tea
Tornader Case =	\$5,00 Hospileast Fee
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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Vision Communication	~5
Address 4501 E. Pacific Coast	Hwy #100
City Long Beach State Co	Zip 90804
Contact Name Auty Mogyeri	
Phone # 562 · 494 · 1326	Fax# 562.494.1106
24 Hour Contact Auty Moayer;	Toll Free # 800.778.2275
Business Days & Hours M-F 8am - 5pm	1
Contractor License #: 835423	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required): 10942161	http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 95.00
Overtime Hourly Rate:	
Freight: (FOB Destination – Show Freight as a separate line item)	\$ FOB Origen
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	<u> </u>
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	\(\) %

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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: VISION COMMUNI	ications
SERVICES	FIXED FEES / UNIT PRICE
	= \$
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following	= \$
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Purchase Order Centrac

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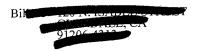
engale CA 91200-44

Vendor ID 206761 562/494-1326 VISION COMMUNICATIONS 4501 E PACIFIC COAST HIGHWAY LONG BEACH, CA 90804

Page 2 818/548-2102 okaci Afshin

Contact STEVE HRONEK

Contact phone 818/548-3957



Description

RADIO INSTALLATION, ON-SITE

Extended Ami End Date Begin Date 40,000.00

RATES:

FRONT MOUNT RADIO INSTALLATION: \$75.00 FRONT MOUNT RADIO REMOVAL: \$35.00

FRONT MOUNT RADIO PROGRAMMING \$20.00

(CITY-SUPPLIED CODEPLUG):

REMOTE MOUNT RADIO INSTALLATION:

REMOTE MOUNT RADIO REMOVAL: \$50.00

REMOTE MOUNT RADIO PROGRAMMING

\$20.00 (CITY-SUPPLIED CODEPLUG):

PORTABLE RADIO CHARGER INSTALLATION:

\$95.00

\$75.00

B. HOURLY RATE FOR ADDITIONAL TECHNICAL SUPPORT WHICH MAY BE NECESSARY TO CONFIGURE NON-STANDARD INSTALLATIONS.

LABOR RATE:

\$75.00/ HOUR

C. MINIMUM CHARGE FOR EACH VISIT

MINIMUM CHARGE:

\$120.00

DOCUMENTS ON FILE IN LIABILITY (IE REOLIDE THE CITY OF GLENDALE PURCHASING OGRESS AND

Vendor to include unit price, applicable taxes and shipping charges on invoice/ packing slips for each shipment. The printed terms and conditions appearing on the face and accompanying this purchase order constitute a part of this order.

Christophen P Klem.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Western Automatic Transmission E	exchange, Inc.
Address 1807 5th Ave.	
City Los Angeles State CA	Zip 90019
Contact Name Donald Misraje	
Phone # 323-737-5009	Fax# 323-737-5019
24 Hour Contact N/A	
Business Days & Hours Monday to Friday, 7:00 a.m.	
Contractor License #:	
Other License (if applicable):	REGISTER AT:
WEBVEN Vendor # (Required):	
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 62 . 50
Overtime Hourly Rate:	\$ 62.50
Freight: (FOB Destination – Show Freight as a separate line item)	\$ 0.00
	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	15%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	15%

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: _	Western Automatic Transmis	sion	Exchange, Inc.
	SERVICES		FIXED FEES / UNIT PRICE
Rebuilt tr	ansmissions	-	\$ Individual pricing, no fixed fees, transmissions are priced on parts and \$ labor. Call for quotes.
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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Wondries Chevero	let
Address 1247 W. Main ST.	
City Alhambra State Co	715, Zip 91801
Contact Name Eric Agaire	
Phone # $(626)289-357/$	Fax# (626) 380-1194
24 Hour Contact	Toll Free #
Business Days & Hours Mon -Fri 7: Am - 6: F	M Sati 81, AM - 51, PM
Contractor License #:	the second secon
Other License (if applicable): BAR LICT BLIE	
WEBVEN Vendor # (Required): 5184380/	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on The hourly labor rates for this contract shall be:	your invoice.
Regular Hourly Rate:	\$ 70.00
Overtime Hourly Rate:	\$ 7000
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	cost + 15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	+ 10 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a <u>multiplier</u>. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Wondries	c hevrole T
SERVICES	FIXED FEES / UNIT PRICE
Harzard Waste - OIL	= \$ 3.00 Per Service
Tire State Disposal Fee	= \$ 1.75 Per Tire
tive state of calif TAX	= \$ 1,75 Pertire
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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Wondries Nissan	
address 726 E. Main ST	
sity Alhambra State Ca	1.+ Zip 91801
contact Name James Moore	
Phone # (626) 289-6161	Fax# (626) 282-1377
4 Hour Contact (6 2 6) 3 8 0 - 2 2 4 0	Toll Free # (800) 85 3 - 3 98
Business Days & Hours Mon-Pri 7: AIM - 7: F	M Sat 8: AM-518PM
Contractor License #:	
Other License (if applicable): BAR LIC # BA	KEUTSTEKAT:
The hourly labor rates for this contract shall be:	
Regular Hourly Rate:	\$ 85,00
Overtime Hourly Rate:	\$ 85,00
Freight: (FOB Destination – Show Freight as a separate line item)	\$
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	cast + 15 %
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	+ 10 0
(The maximum bid allowance is 15 %) *Subcontracted Work Markup Percentage:	+ 10 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Wondries	Yissan
SERVICES	FIXED FEES / UNIT PRICE
Huzard Waste Fee - Oil	= \$ 3.00 Per Service
Tire state Disposal Fee	= \$ 1.75 Per tire
Tire TAX State of Calif.	= \$ 1.75 Per Tire
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(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

Business Name Wondries Toyota	
Address 1543 W. Main St.	
City Alhambra State <u>CA</u>	tif zip <u>91801</u>
Contact Name	
Phone # (626) 289 - 8000	Fax# $(626)414-244'$
24 Hour Contact	Toll Free #(<u>\$(\delta\delta) 933 - 1 / 70</u> 0
Business Days & Hours Mon - Fri: 7: -7:	Sat 8:-5:
Contractor License #:	
Other License (if applicable): WEBVEN Vendor # (Required): 5/34720/	REGISTER AT: http://lacounty.info/doing_business/main_db.htm
Please Note: Your pricing shall also be reflected on	
Regular Hourly Rate: _ Overtime Hourly Rate: _	17
Freight: (FOB Destination – Show Freight as a separate line item)	
Fixed Fees or Unit Prices:	(Attach Exhibit 1A, page 3 to define how your company charges for these services.)
*Materials / Parts Markup Percentage: (The maximum bid allowance is 15 %)	Cost + 15%
*Subcontracted Work Markup Percentage: (The maximum bid allowance is 15 %)	+ /0 %

^{*} The maximum allowed percentage markup is 15%. When putting in your markup percentage, **DO NOT** use a multiplier. Any bids received that have a percentage markup above 15% and/or use a multiplier, are subject to disqualification, at the discretion of the District.

(aka Exhibit B)

Consolidated Fire Protection District of Los Angeles County Fire Fleet Maintenance and Repair Services

STATEMENT OF FIXED FEES OR UNIT PRICES

FIRM NAME: Wondries Toy	10ta
Services	FIXED FEES / UNIT PRICE
Hazard Waste Oil	= \$ 3.00 per service
Tire Waste Disposal Fee	= \$ 1.75 per tire
Calif. Tire Tax	= \$ 1.75 per tire
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COUNTY OF LOS ANGELES

FIRE DEPARTMENT

1320 NORTH EASTERN AVENUE LOS ANGELES, CALIFORNIA 90063-3294 (323) 881-2401

P. MICHAEL FREEMAN FIRE CHIEF FORESTER & FIRE WARDEN

Fire Fleet Maintenance and Repair Services CBE FORMS

ATTACHMENT C

SERVING THE UNINCORPORATED AREAS OF LOS ANGELES COUNTY AND THE CITIES OF:

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

I. LOCA	L SMALL BUSINES									
Firm Nar	ne: <u>AMERICA</u>	AN EAGLE	TF	RANSMIS	SON	DBA A	1-1 TF	RANS	MISSION	**************
_	I AM NOT I AM			certified by as of the da			_		ce of Affirm	ative Action
	As an eligible Loca	al SBE, I reque	st th	nis bid be co	nsidered	for the	Local SE	E Prefe	rence.	
	My County (WebV	en) Vendor N	umbe	er: <u>13</u>	2020	01				
II. FIRM	ORGANIZATION I	NFORMATION	l: Th	ne informati	on reque	ested be	low is for	statist	tical purpose	s only. On fina
analy	sis and considerati	ion of award,	contr	ractor/vend	or will be	e selecti				
		Sole Propried Other (Pleas	torsh	nip 🗆 Pa			Corporatio	n 🗆	Non-Profit	☐ Franchise
Total Nun	nber of Employees	(including ov	vners	s): 5						
Race/Ethni	c Composition of Fire	n. Please distri	bute	the above to	tal numbe	er of indi	viduals into	the fol	lowing catego	ries:
Rac	ce/Ethnic Compositio	0	- 1	vners/Partne sociate Partn	THE WAY DO		Manage	rs .		Staff
			Male	9 F	emale	Ma	ile	Female	9 Mai	e Female
Black/Afric	an American									
Hispanic/La	atino					1			2	
Asian or Pa	acific Islander									
American I	ndian									
Filipino								•		*
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II. PERCE distrib	NTAGE OF OWNE	RSHIP IN FIRE	<u>VI:</u> P	Please indica	ate by po	ercentaç	ge (%) ho	w <u>own</u>	ership of the	e firm is
	Black/African American	Hispanic/ Latino		Asian Pacific Isl			rican lian	F	ilipino	White
Men	%		%		%		%		%	%
Women	%		%		%		%		%	100%
ENTER busine	FICATION AS MIN RPRISES: If your fi ss enterprise by a the back of this fort	irm is currently public agency	y cer , con	tified as a i	minority,	womer	n, disadva	ntaged	or disabled our proof of	veteran owned f certification.
	Agency Name			Minority	Wor	men	Disadvar	taged	Disabled Veteran	Expiration Date
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otal Nun	nber of Employees	(includi	ng owners	s): 45							
ace/Ethnic	Composition of Fire	m. Please	distribute		tal numbe	r of indiv	iduals inte	o the follo	owina cated	ories:	
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Men	%		%		%		%		%	10	00 %
Women	%		%		%		%		%		%
ENTER busine	FICATION AS MIN PRISES: If your t ss enterprise by a the back of this for	firm is cu public au	rrently cer gency, cor	tified as a r	ninority,	womer	n, disadva	antaged	or disable our proof o	d vetera of certif	ication.
	Agency Name			Minority	Wo	men	Disadva	ntaged	Disable: Veterar		Expiration Date
. DECLA	ARATION: 1 DECL	ARE UND	DER PENAI	LTY OF PER	RJURY U	NDER 1	THE LAW	S OF TH	HE STATE	OF CAI	LIFORNIA
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

☐ IA☐ As	an eligible Loca	A Local SB Compliance I SBE, I request en) Vendor Num	e as of the	date of this	bid submis			ative Actio	n
. FIRM/OF	RGANIZATION II and consideration sex, national or ucture:	NFORMATION: on of award, coligin, age, sexual Sole Proprietor	The informatractor/velorientation	endor will be on or disabili	selected w	s for statisti	to race/eti	es only. Or hnicity, col	or,
Fotal Numbe	······································	Other (Please (including owner)	Specify) _						
		n. Please distribut		28 e total numba	r of individua	s into the follo	vion caton		
	thnic Composition	,	Owners/Par	tners/	I	nagers	wing catego	Staff	
			ale	Female	Male	Female	Mai		male
lack/African	American								
ispanic/Latin	0				1		5	5 3	3
sian or Pacifi	c Islander								
merican India	an								
ilipino Vhite					•				
						<u> </u>	13		
 PERCENT distribute 	AGE OF OWNE	RSHIP IN FIRM:	Please in	dicate by pe	rcentage (%) how <u>owne</u>	rship of the	e firm is	
	Black/African American	Hispanic/ Latino	1	ian or	American Indian	Fil	ipino	White	
Men	%	%		%		%	%	100	%
Vomen	%	%		%		%	%		%
ENTERPR business	ISES: If your fill enterprise by a p	ORITY, WOMEN rm is currently coublic agency, c n, if necessary.)	ertified as omplete ti	a minority,	women, dis	advantaged	or disabled	veteran ou	vne on.
	Agency Name		Minority	Won	nen Disa	dvantaged	Disabled Veteran	Expira Dat	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

CONSIDER	ation of the bia.								<u> </u>
	SMALL BUSINES Atlas R	S ENTERP	RISE PR	EFERENCE	PROGRAM:				
Firm Name	e:		, ,						
	AM NOT AM	A Loc Comp	al SBE d	certified by s of the da	the County o	f Los Angel submission.	es Office	of Affirma	tive Action
	s an eligible Local					he Local SE	E Prefere	nce.	• • • • • • • • • • • • • • • • • • • •
IV	ty County (WebVi	en, vendor	Numbe	ir : <u>030</u>	01201				
analysi	DRGANIZATION IN s and consideration, sex, national or	on of awar	d, contr	actor/vendo	or will be sele	below is fo cted withou	r statistica It regard t	al purposes o race/ethi	only. On fina nicity, color,
Business S	tructure:	Sole Prop Other (Pl	rietorsh	ip 🛭 Pa		Corporation	on 🗆 No	n-Profit	☐ Franchise
Total Num	ber of Employees	(including	owners	32					
Race/Ethnic	Composition of Firn	n. Please di	stribute	the above to	tal number of in	dividuals inte	the follow	ving categoi	ries:
Race	/Ethnic Composition	,	Ov Ass	vners/Partner lociate Partne	S/	Manage	ors		Staff
	T		Male	Fe	emale	Male	Female	Male	Female
Black/Africa			*********						,
Hispanic/Lat			1		_1	5	1	19	11
	cific Islander								
American In	dian ————————————————————————————————————					1			
Filipino					·				
White			······································			1	···	2	
I. <u>PERCEI</u>	NTAGE OF OWNE	RSHIP IN F	IRM: F	Please indica	ate by percen	tage (%) ho	w <u>owners</u>	ship of the	firm is
	Black/African American	Hispar Latir	n ic/ 10	Asian Pacific Isl	1 2 P 2 1 D 4 1 P 1 P 1 P 2 P 2 P 1 P 1 P 1 P 2 P 2 P	merican Indian	Filip	ino	White
Men	%	50	%		%	%		%	%
Women	%	50	<u></u> %		%	%		%	%
<u>ENTERI</u> busines	PRISES: If your first enterprise by a get back of this form	rm is curre public agei	ently cer ncy, cor	tified as a i	minority, won	nen, disadvi	antaged o	r disabled	 veteran owned
	Agency Name			Minority	Women	Disadva	ntaged	Disabled Veteran	Expiration Date
		· · · · · · · · · · · · · · · · · · ·							
/. DECLAI	RATION: I DECLA	ARE UNDER	R PENAI	LTY OF PER	JURY UNDER URATE.	R THE LAW	S OF THE	STATE O	F CALIFORNIA
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

considerati	on of the bid.										
	MALL BUSINESS		PREF			<u>.M</u> :					
Firm Name:	BAL	-DWIN	AN	10 BO				- Offi-	-£ Aff:		
I AI	M NOT M	A Local S Complian	BE ce ce as	rtified by t of the date	the Cour e of this	nty of Lo	os Angele mission.	es Office	of Affirma	tive Action	
☐ As	an eligible Local	SBE, I reques	t this	bid be cor	sidered	for the	Local SB	E Prefer	ence.		
Му	County (WebVe	en) Vendor Nu	mber	:_5	1145	1302					
analysis	RGANIZATION IN	n of award, o	ontrac	ctor/vendo	r will be	selecte	ow is for d withou	r statisti it regard	cal purpose: to race/eth	s only. On nicity, colo	final r,
religion, usiness Str		gin, age, sexu Sole Propriet Other (Pleas	orship	Par	tnership	.y. □ C	orporatio	on 🗆 N	lon-Profit	☐ Franch	nise
otal Numbe	er of Employees	(including ow	ners):		10				w. h ". "		
lace/Ethnic C	Composition of Firm	. Please distrik				r of indiv	riduals into	the follo	wing catego	ries: 	
Race/I	Ethnic Composition			ers/Partners ciate Partne			Manage	ers		Staff	
			Male	Fe	male	Ma	le	Female	Male	e Fen	nale
llack/African	American								\bot		
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	TAGE OF OWNE	RSHIP IN FIRE	<u>/1:</u> Ple	ease indica	ite by pe	ercentaç	ge (%) ho	ow <u>own</u>	ership of the	e firm is	
distribut	Black/African American	Hispanic/ Latino		Asian o			rican lian	F	ilipino	White	
Men	%	100	%		%		%		%		%
Women	%		%		%		%	ļ	%		%
ENTERP business	CATION AS MINI RISES: If your fits senterprise by a	rm is currentl public agency	y certi r, com	ified as a r	ninority.	womei	ı, aisaav	antageu	or aisablea	veterari ov	vned on.
(Use the	Agency Name	n, it necessar	ł	linority	Wo	men	Disadva	ntaged	Disabled Veteran	Expira Da	
'. DECLAR	RATION: 1 DECLA HE ABOVE INFOR	ARE UNDER P	ENAL1	TY OF PER	JURY U			//	HE STATE (OF CALIFOR	RNIA
						1 11 1	^ /- ^			, I	·C
111	WILL	Med				1195	109	4		> 00	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

considera	ition of the bid.									
LOCAL	SMALL BUSINESS	ENTERPRISE F	PREFERENCE I	ROGRAM	<u>/</u> :					
irm Name	255 V D	IVISION (OF ADP (USA),	INC	•				
v	AM NOT	A Local SBI	E certified by 1	the Count	y of Los	Angeles	s Office o	f Affirmati	ve Action	
_ :	AM	Compliance	as of the dat	e of this l	oid subn	nission.				
	s an eligible Local	SBE. I request	this bid be cor	sidered f	or the L	ocal SBE	Preference	ce.		
^_ N	ly County (WebVe	n) Vendor Num	ber : 1210	1401						
	ORGANIZATION IN	- COLUMNIA TION	The informatio	n regues	tad halo	w is for	statistical	nurnoses	only. On fi	ina
FIRM/C	ORGANIZATION IN is and consideration	n of award, cor	rne information itractor/vendo	r will be	selected	without	regard to	race/ethn	icity, color,	
religior	sev national orio	in, age, sexual	orientation or	disability	' .					
usiness S	Structure:	Sole Proprietors Other (Please	ship 🔲 Par	tnership	₫ Co	rporation	Non	-Protit	☐ Franchis	se
	ber of Employees									
ace/Ethnic	Composition of Firm			— т	of individ	luals into	the followi	ing categoric	es:	
Race	e/Ethnic Composition	- 1	Owners/Partner Associate Partne			Manager	S	<u> </u>	Staff	
		М	ale Fe	male	Male)	Female	Male	Fema	ile
lack/Africa	an American									
lispanic/La	tino				1			12	2	
sian or Pa	cific Islander									
merican Ir	ndian							2	1	_
ilipino										
		1			2			7		
	NTAGE OF OWNE	DOLLID IN EIDM	Please indic	eta hy ne	rcentage	e (%) ha	w owners	hip of the	firm is	
l. <u>PERCE</u> distrib		KSHIP IN FIRIVI:	riease muic	ate by pe	Contag	, (70) 110	<u>5</u>	<u></u>		
<u> </u>	Black/African	Hispanic/	Asian Pacific Isl	1	Amer Indi		Filipi	no	White	
	American %	Latino %		%		%		%	100	%
Men	/ ¹ / _%	9/		%		%		%		%
Women										
. CERTI	FICATION AS MINE RPRISES: If your fi	ORITY, WOMEN	N, DISADVAN	TAGED, I	women	SABLED disadva	VETERAN Intaged of	disabled	<u>s</u> veteran ow	ne
ENTER	RPRISES: If your name of the second s	public agency,	complete the	following	and att	ach a co	py of you	r proof of	<u>certification</u>	2.
(Use t	he back of this for	n, if necessary.)	τ				Disabled	Expirat	
	Agency Name		Minority	Wor	nen	Disadvar	ntaged	Veteran	Date	
							- T			
				<u> </u>	1					
. DECL	ARATION: I DECLA	ARE UNDER PE	NALTY OF PE	RJURY U	NDER T	HE LAW	S OF THE	STATE O	F CALIFOR	NI
THAT	THE ABOVE INFO	KIVIATION IS TH	IUE AND ACC						02/00/	-
				PR	DJECI	MAN	AGER	1	03/20/0	Jŧ

Page 16

Date

Authorized Signature

Title

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

Consider	ation of the bid.												
I. LOCAL	SMALL BUSINES	S ENTER	PRISE PRI	EFERE	NCE I	PROGRA	<u>м</u> :		<u> </u>	•			
Firm Nam	ie: Betts	Truc	r Par	134	<u>-80</u>	rvice	<u>」(B</u>	ette	-Sprinc	<u> Com</u>	pan	4)	
<u> </u>	AM NOT	A Lo	ocal SBE c	ertifie	d by t	the Cour	nty of Lo	s Ang	eles Office o	of Affirmat	tive A	ction	
	AM	Con	npliance as	s of th	e dat	e of this	bid sub	missio	n.				
	As an eligible Local	SBE, I r	equest this	s bid t	oe cor	nsidered	for the I	Local	SBE Preferen	ce.			
ņ	My County (WebVe	en) Vend	or Numbe	r :									
II. FIRM/	ORGANIZATION IN	IFORMA	TION: The	e info	matio	n reque	sted belo	ow is	for statistica	purposes	only	. On f	inal
analys religio	is and consideration, sex, national ori	on ot aw gin, age,	sexual or	ientat	ion or	disabilit	y.	- VVICII				, 00101	,
Business S	Structure:	Sole Pro	prietorshi Please Sp	ρ[1 Par	tnership	pa co	orpora	tion 🗆 Noi	n-Profit	Q F	ranchi	se
Total Num	ber of Employees	(includir	ng owners): C	3m	ne gr	<u>4</u> w	v Cla	2 23	9			
Race/Ethnic	: Composition of Firm	n. Please	distribute t			•	<u></u>			ing categoi	ies:		
i⊷ Rac	e/Ethnic Composition	leiden Leiden	The state of the s	and the same and the	artners Partne	Fall Control of the Control	70.000	Mana	igers 💮	Harmon Fire Sense Harmon	Sta	ff - 3	
Section of the sectio			Male		Fe	male	Mal	е	Female	Male		Fema	ale
Black/Africa	an American					-		-		0		2	
Hispanic/La	tino			_			4			62	3	4	
Asian or Pa	cific Islander						<u>l</u>			34	$t \perp$	<u> </u>	
American Ir	ndian					-					-		
Filipino							- AH	00	9	1-A1	00	re -	
White			1				23	2_	2	94	!	10	
	NTAGE OF OWNE	RSHIP IN	I FIRM: P	lease	indica	ite by pe	ercentag	e (%)	how owners	<u>hip</u> of the	firm	is	
distribu	uted. Black/African	His	oanic/		Asian d	or S	Ame	rican 🔆	[∂] Filip			White	
	American	STATE STATE OF THE PARTY OF	tino	Paci	fic Isla		Indi	an 🐇	35 Barrier 1992	January (S.		vville	ne en
Men	%		%			%				%	/	<u>00</u>	%
Women	%		%			%		%	<u> </u>	%			%
ENTER busine	FICATION AS MIN PRISES: If your fi ss enterprise by a the back of this for	irm is cui public ag	rrently cer gency, cor	tified	as a n	ninority,	women	, disa	dvantaged oi	disabled	veter	an owi	ned].
	Agency Name		2000年1月1日 N	Minori	ty	Wo	men	Disad	vantaged	Disabled Veteran	23139 1 CT	Expirati Date	
V. <u>DECLA</u> THAT	RATION: POECLATHE ABOVE INFO	ARE UND	ER PENAL N IS TRUE	TY 0 AND	F PER ACCI	URATE.	INDER T			STATE 0	F CAI	LIFORN	AIIA
Authorized S	Signature	7		,			Title	·· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		Date		

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

	SMALL BUSINES											
Firm Nam		Wond										
_	AM NOT						.os Angele bmission.	es Ottic	e of Affir	mative	Action	
	As an eligible Local	I SBE, I reques	t this	bid be c	onsidered	for the	Local SB	E Prefe	rence.			
P	My County (WebV	en) Vendor Nu	mber	:	042	117	01					
analys	ORGANIZATION IN is and consideration, sex, national ori	on of award, c	ontrac	tor/venc	for will be	select						
	Structure:	Sole Proprieto Other (Pleas	orship	□ Pa			Corporatio	n 🚨 i	Non-Profi	t 🛚	Franch —	iise
Total Num	ber of Employees	(including ow	ners):	90)							
?ace/Ethnic	: Composition of Firn	n. Please distrib	ute the	above to	otal numbe	r of indi	viduals into	the foll	owing cat	egories:		
Rac	e/Ethnic Composition		and the second second	ers/Partne iate Partr			Manage	rs		s	taff	
			Male	F	emale	M	ale	Female) N	/lale	Fem	nale
slack/Africa	an American									1	1	
lispanic/La	tino									39	5	-
sian or Pa	cific Islander					3				0	1	
merican In	ıdian									4	2	
ilipino												
Vhite			j		1	7		3	/	0	5	- .
. PERCE	NTAGE OF OWNE	RSHIP IN FIRM	<u>1:</u> Plea	ase indic	cate by pe	ercenta	ge (%) ho	w <u>own</u>	ership of	the fire	n is	
	Black/African American	Hispanic/ Latino		Asian Pacific Is	A CONTRACT OF THE PARTY OF THE		erican dian	F	ilipino		White	
Men	%		%		%		%		<u>%</u>	1	00	%
Women	%		%		%		%		%		<u>-</u> -	%
ENTER busines	FICATION AS MINO PRISES: If your fi ss enterprise by a ne back of this form	rm is currently public agency,	certifi comp	ied as a	minority,	wome	n, disadva	ntageo	or disabi	led vet	eran ow tificatio	ne <u>n</u> .
(Use tr	Agency Name	n, n necessar	-41	nority	Woi	men	Disadvar	ntaged	Disabl Veter		Expira Date	
DECLA	RATION: I DECLA	RE UNDER PERMATION IS T	NALT RUE A	Y OF PE	RJURY U CURATE.	NDER '	THE LAW	S OF T	HE STAT	E OF C	ALIFOR	NIA
		1				\sim	dent			• -		

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUC	TIONS: All bidde	rs responding t	o this solic	itation	must com	plete	and retu	ırn this f	orm fo	or proper
	SMALL BUSINESS	ENTERPRISE PR	EFERENCE P	ROGRA	<u>M</u> :				0	Rest
Firm Nam		N.A.								Best
	AM NOT	A Local SBE of Compliance a	certified by t	he Coun	ty of Los	Angeles	Office (of Affirma	ative A	ction Cac
	AM						Droforor			
	s an eligible Local S	SBE, I request thi	is bid be con	sidered 1775	for the Loc	cai SDE	rielelel	ice.		
	Ny County (WebVen									
i. FIRM/	ORGANIZATION INF	of award contr	e informatio actor/vendor	n reques will be	sted below selected v	vis for : vithout	statistica regard t	n purpose o race/eth	nnicity	, color,
anaiys religioi	n, sex, national origi	n, age, sexual or	rientation or	disabilit	<u>y</u>					
Business S		Sole Proprietorshi Other (Please Sp	•	nership	Corp	oration	U No	n-Profit	<u>u</u> F	ranchise
Total Num	ber of Employees	including owners	s): <i>8</i>							
	Composition of Firm.	Please distribute 1	the above tota	l number	of individu	als into	the follov	ving catego	ories:	
	e/Ethnic Compositi on	Ow	vners/Partners ociate Partner	1	2.7	/lanager	80.50 No. 10.00		Sta	H .
		Male		naie	Male		Female	Mal	e	Female
District	an American									
					- 1			4.		_
Hispanic/La					<u>·</u>					
	cific Islander									
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Filipino										
White					1			<u> </u>	l.	
II. PERCE	NTAGE OF OWNER	SHIP IN FIRM: F					w <u>owner</u>	<u>ship</u> of th	e firm	is
	Black/African American	Hispanic/ Latino	Asian o Pacific Isla		America Indian	1.0	Filiq	pino		White
Men	%	100 %		%		%		<u></u> %		
Women	%	%		%		%		%		%
ENTER	FICATION AS MINO RPRISES: If your firm ess enterprise by a p he back of this form	n is currently cei ublic agency, coi	rtified as a n	ainnritv.	women. (oisauva	mayeu	ur proof o	of certi	nconon.
			Minority	Wo	men C	Disadvar	taged	Disable: Veteran		Expiration Date
500 H (+0.00 L)	N.A.									
V. DECLA	ARATION: I DECLAI	MATION IS TRU	LTY OF PER	UNATE.						
11	Justola	1 (1)	γ	PR	ESIDE Title	ENT	•	4	-2 Dat	0-C6
Authorized	Signature	U			ride					Page 1

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

considera	tion of the bid.	/- A A /- A /- A /- A /- A /- A /- A						
LOCAL	SMALL BUSINES	S ENTERPRISE PI	REFERENCE	PROGRAM	CITY	1 70	00 A	E SER
Firm Name	9: <u> </u>				<u>C11</u>	10	16/6/16	_C 500
	AM NOT AM	A Local SBE Compliance	certified by as of the dat	the County te of this bi	of Los Ang id submissio	n.		e Action
□ A	s an eligible Local	SBE, I request th	nis bid be co	nsidered fo	r the Local S	BE Preferen	ce.	
IV	ly County (WebVe	en) Vendor Numb	er: <u>002</u>	6545				
. <u>FIRM/C</u> analysi	RGANIZATION IN	IFORMATION: T	he information	on requeste or will be se	ed below is f	or statistica out regard to	l purposes o race/ethnic	only. On final city, color,
religion	n, sex, national ori	gin, age, sexual o	rientation o	r disability.				
Business S		Sole Proprietorsh Other (Please S		rtnership		ion 🗆 No	n-Profit C	3 Franchise

otal Numi	ber of Employees	(including owner	s): 17					
Race/Ethnic	Composition of Firm	n. Please distribute	the above to	tal number o	f individuals ii	nto the follow	ing categorie	s:
Race	/Ethnic Composition	. 1	wners/Partner sociate Partne	В	Mana	gers		Staff
		Ma	e Fe	emale	Male	Female	Male	Female
Black/Africa	n American							
Hispanic/Lat	ino	2			2		12	1
Asian or Pac	cific Islander							
merican In	dian							
ilipino								
Vhite								
I. PERCEI	NTAGE OF OWNE ited. Black/African	RSHIP IN FIRM:	Please indica		entage (%)	1		
:	American	Latino	Pacific Isl	** * * * * * * * * * * * * * * * * * *	Indian	Filip	ino	White
Men	100 %	%		%	%		%	%
Women	%	%		%	%		%	%
ENTER!	PRISES: If your fires on the price of the pr	rm is currently co public agency, co	ertified as a i	minority, w	romen, disad	lvantaged oi	disabled ve	eteran owned ertification.
	Agency Name		Minority	Wome	n Disad	vantaged	Disabled Veteran	Expiration Date
STATE	06 CA. 065					/	····	11/30/07
THAT T	RATION: I DECLA	RMATION IS TRU	ALTY OF PER	RJURY UNI URATE.	DER THE LA	WS OF THE	STATE OF	CALIFORNIA
The	jul Man	ting	F	reside	ent			/25/06
Authorized S	ignature			Titl	е			Date

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

I. LOCAL	SMALL BUSINES											
Firm Name	e: <u>Clark</u>	CAH	PWa	ra	70L	11 mg	<u> </u>				-	
\Box	AM NOT AM	A Local Compli	SBE cer ance as o	tified by of the dat	the Cour e of this	nty of Lo bid sub	os Ange missior	eles Offic n.	ce of A	ffirmative	Action	
□ A	s an eligible Loca	SBE, I requ	est this b	oid be cor	nsidered	for the	Local S	BE Prefe	rence.			
N	ly County (WebV	en) Vendor I	Number :		······		***************************************					
	RGANIZATION IN											
	s and consideration, sex, national or						d witho	out regar	d to rac	ce/ethnici	ty, colo	Γ,
Business S	tructure:	Sole Proprie Other (Plea	etorship	☐ Par			orporat	ion 🛚	Non-Pr	ofit 🖸	Franch	ise
Total Num	ber of Employees	(including o	wners):									
Race/Ethnic	Composition of Firm	n. Please dist	ribute the	above tot	al numbe	r of Indiv	iduals in	to the fol	lowing o	ategories:	•	
Fla ti	/Parine Computation	e de la companya de l		rs/Parmer sta Parme			Wane	geres			W	aler s
	PARIOS		Male		male	Ma	le	Femal	ө	Male	Fen	ıale
Black/Africa	n American											
Hispanic/Lat	ino								į	4		
Asian or Pac	ific Islander											
American In	dian											
Filipino										1		
White			.3		/					lo4	2)
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Men	%		%		%		%			%	7.5	%
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	Agency Name		Mi	tarity	Wor	nen -	Disado	antaged		elijedi. Perany	Expira Dat	
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Authorized Si	gnature			· · · · · · · · · · · · · · · · · · ·	<i>U</i> {	<u>////</u> İtle	er			/ Da		
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

CONTOIGUIGIT	0,						
I. LOCAL SMA	LL BUŞINESS EN	TERPRISE PREFE	RENCE PROGRA	<u>\M</u> :			
Firm Name:	Collin	S Tri	n Sho,	0			
⊠ IAM N	IOT .	A Local SBE cert	ified by the Cou	nty of Los An	geles Office o	f Affirmativ	e Action
□ IAM		Compliance as of	f the date of this	bid submission	on.		
•	eligible Local SBE				SBE Preferen	ce.	
My Co	unty (WebVen) V	endor Number :	13/3/	501			
II. <u>FIRM/ORGA</u>	NIZATION INFOR	MATION: The in	formation reque	sted below is	for statistical	purposes o	only. On final
	l consideration of , national origin,				nout regard to	race/ethnic	city, color,
Business Struct	ure: 🥦 Sole	Proprietorship er (Please Specif	Partnership		ation 🗆 Nor	n-Profit C	3 Franchise
Total Number of	f Employees (incl	uding owners):	6			•	
Race/Ethnic Comp	osition of Firm. Ple	ease distribute the		er of individuals	into the followi	ing categories	s:
Race/Ethn	ic Composition	ALTERNATION OF THE PROPERTY OF THE PARTY OF	s/Partners/ ite Partners	n Man	agers	多。 18.高级。	Staff
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Black/African Ame	erican						
Hispanic/Latino						4	'
Asian or Pacific Is	lander				ļ	ļ	
American Indian							
Filipino							
White					<u> </u>		
	BE OF OWNERSH	P IN FIRM: Plea	se indicate by p	ercentage (%)	how owners	<u>hip</u> of the fi	rm is
distributed.	ick/African	Hispanic/:	Asian or	American	Filipi		White
78 51.4	American		Pacific Islander	Indian	DE A CAROL CONSESS TOPS		Comment for
Men	%	%	%		%	%	100 %
Women	%	%	%		%	%	<u> </u>
ENTERPRISI business en	TION AS MINORITES: If your firm is terprise by a publick of this form, if	currently certific c agency, compl	ed as a minority	, women, disa	dvantaged or	disabled ve proof of ce	ertification.
1	igency Name	Mir	ority Wo	men Disa	dvantaged	Disabled Veteran	Expiration Date
V. DECLARATI	ON: I DECLARE ABOVE INFORMA	UNDER PENALTY	OF PERJURY UND ACCURATE.	JNDER THE LA	AWS OF THE	STATE OF	CALIFORNIA
MA	1 10	len	O	WN-PM	-	3-31	-06
Authorized Signatu	re			Title			Date

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

	tion of the bid.				<u>-</u>	_				
	SMALL BUSINESS	BUTT	PRISE PRE		PROGRA	<u>.M</u> :				
	: ED AM NOT AM	A Lo	cal SBE c		the Cour te of this	nty of Lo	s Angele mission.	s Office	of Affirmat	ive Action
☐ A:	s an eligible Local y County (WebVe				nsidered	for the	Local SBI	Prefere	nce.	
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Business St		Other (prietorshi Please Sp	ecify)			orporatio		on-Profit	
	per of Employees Composition of Firm				Y NOX tal numbe		iduals into	the follo	wing categor	ies:
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Hispanic/Lat ————————————————————————————————————						1			1	
American Inc										
Filipino						9	,	<u> </u>		<u> </u>
White			2					1	6	
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(Use th	ne back of this fore Agency Name	n, n nec	essary./	Minority	Wo	men	Disadva	ntaged	Disabled Veteran	Expiration Date
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Authorized	Mature			DEME	et 1	Title	1/1/1	144		Date Page

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRU conside	JCTIONS: All bi	dders respond I.	ling t	o this so	olicitatio	n mus	t comple	te and	returi	n this f	orm for pr	roper
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Firm Na	***************************************	**									1	
A	I AM NOT	A Local : Compliar	SBE cas	ertified b	y the Co late of th	unty of	Los Ange	eles Of	fice of	Affirma	ative Action	า
G.	As an eligible Loc								·			
•	My County (Web)	Ven) Vendor Nu	mber	:	,onsidere	u 101 tj	ie Lucai S	obe Pre	rerence	€.		
	/ORGANIZATION rsis and consideration, sex, national o	non or awaiu, t	-viilla	Ctor/ven	חמר אאוו א	مملمه ه	elow is fe ted witho	or stati out rega	stical p ard to r	ourpose: ace/eth	s only. On nicity, colo	final or,
	Structure:	Sole Propriete Other (Please	orship	Q P			Corporati	on 🔾	Non-F	Profit	☐ Franch	nise
Total Nur	mber of Employees	s (including ow	ners):		3							
Race/Ethni	ic Composition of Fir	m. Please distrib	ute th	e above te		er of inc	lividuals in	to the f				
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Authorized Sig	pnature				Ti	tle		· · · · · · · · · · · · · · · · · · ·			Date	



Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

	SMALL BUSINESS	ENTERPRISE PE		'ROGRA	<u>.M</u> :					
₫ 1 <i>A</i>	AM NOT	A Local SBE Compliance a	certified by 1	he Cour e of this	nty of Lo	os Angelo mission.	es Offic	e of Affir	mative	Action
•	s an eligible Local S y County (WebVen			sidered	for the	Local SB	E Prefer	ence.		
analysis	RGANIZATION INF s and consideration , sex, national origi	of award, conti in, age, sexual o	ractor/vendo rientation or	r will be disabilit	selecte ty.	d withou	t regard	to race/	ethnici	ly. On final ty, color,
Business St		Sole Proprietorsh Other (Please Sp		tnership	X c	orporatio	n 🗆 N	Non-Profit	. 0	Franchise —
Γotal Numb	er of Employees (including owners	s): 98							
	Composition of Firm.			al numbe	r of indiv	iduals inte	the follo	owing cate	gories:	
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lispanic/Lati	no				5		<u>ನ</u>	6	6_	⊥ /3_
sian or Paci	ific Islander							ء ا	2	-
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I. PERCEN							w <u>own</u>	ership of	the fire	n is
	Black/African American	Hispanic/ Latino	Asian o			rican ian	F	ilipino		White
Men	100 %	%		%			ļ	%	_	%
Women	%	%		%		<u>%</u>		<u>%</u>		<u> </u>
ENTERF busines	CATION AS MINO PRISES: If your firm s enterprise by a place back of this form	n is currently ce ublic agency, co	ertified as a r	ninority,	womer	n, disadv	antaged	or disabi	led vet	eran owned tification.
1030 111	Agency Name		Minority	Wor	men	Disadva	ntaged	Disabl Veter		Expiration Date
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Authorized Sig	grietore)		Title		./**	t	D	Page

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

	ation of the bid.							······································			
	SMALL BUSINES		RISE PRI	EFERENCE I	PROGRA	<u>.M</u> :					
Firm Nam	e: <u>Set</u>	Tires									
, <u> </u>	AM NOT	A Loca Compli	al SBE c iance as	ertified by to s of the date	the Cour e of this	bid sub	s Angele mission.	s Offic	e of Affirma	tive Action	
	As an eligible Loca	l SBE, I requ	uest thi	s bid be cor	nsidered	for the	Local SB	E Prefe	ence.		
n	My County (WebV	en) Vendor	Numbe	r :							
analys religio	ORGANIZATION II is and consideration, sex, national or	on of award igin, age, se	l, contra exual or	actor/vendo rientation or	r will be disabilit	selecte ty.	d withou	t regard	cal purpose: I to race/eth Non-Profit	s only. On fi	,
Business S		Sole Propr Other (Ple		·					VOII-1 TOTAL		30
Total Num	ber of Employees					<u></u>					
Race/Ethnic	: Composition of Fire	n. Please dis	tribute t	the above tot	al numbe	r of indiv	iduals into	the foll	owing catego	ries:	
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			Male	Fe	male	Ma	e	Female	Male	e Fema	ıle
Black/Africa	an American										
Hispanic/La	tino					2	·				
Asian or Pa	cific Islander										
American Ir	ndian										
Filipino											
White						8	3				
II. <u>PERCE</u> distrib	NTAGE OF OWNE	RSHIP IN F	<u>IRM:</u> P	lease indica	te by pe	ercentag	e (%) ho	w <u>own</u>	ership of the	e firm is	
distrib	Black/African American	Hispan Latin		Asian o Pacific Isla		Ame Ind		F	ilipino	White	
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Women	%		%		%		%		%	50	%
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(Use t	Agency Name	m, n neces		Minority	Wo	men	Disadva	ntaged	Disabled Veteran	Expirati Date	
V. <u>DECL</u> / THAT	ARATION: I DECL. THE ABOVE INFO	ARE UNDER	R PENAL	LTY OF PER	JURY U URATE.	INDER T	HE LAW	S OF T	HE STATE (DF CALIFORM	NIA
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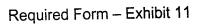
Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

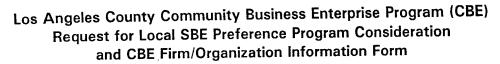
consideratio	n of the bid.				 							
I. LOCAL SI	MALL BUSINESS	S ENTER	PRIȘE PR	EFERENCE								
Firm Name:	Glass	S Doc	HOK	of 1	9ant	ebell	<u>/</u> 0				_	
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	n eligible Local County (WebVe		•		nsidered	for the	Local S	BE Prefe	rence.			
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analysis a	SANIZATION IN nd consideratio ex, national orig	n of awa	ard, contr	actor/vendo	r will be	selecte			•	•	•	
Business Stru	cture: 🗽	Sole Pro	prietorshi Please Sp	p 🔾 Par	tnership		orporati	on 🚨	Non-Pr	ofit	☐ Franchis	se
Total Number	of Employees	(includin	ng owners	1: 4				·				
	mposition of Firm		distribute t	the above tot	al numbe	r of indiv	iduals in	to the fol	lowing			
Race/Et	hnic Composition	, tropic parties		ners/Partner ociate Partne			Manag		****	1	Staff	Paris.
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White						/		· · · ·			/	
III. PERCENTA	AGE OF OWNER	RSHIP IN	I FIRM: P	lease indica	ate by pe	ercentag	e (%) h	ow <u>own</u>	ership	of the f	irm is	
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Women	%		%		%		%			%		%
ENTERPRI business e	ATION AS MINO SES: If your fir enterprise by a p	m is cur oublic ag	rently cer rency, cor		ninority,	women	, disadv		or dis			
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Francis	E Rkein	Lara	ef		Oh	ie M	ara	ger			3/24/	66
Authorized Signa	ture				-//	Title	//	/			Date //	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

considera	tion of the bid.									
I. LOCAL	SMALL BUSINESS	S ENTERPRISE	PRE	FERENÇE F	ROGRA	<u>\М</u> :				
		eus OK								
	AM NOT	A Local S	BE c	ertified by 1	he Cou	nty of L	os Angele	s Office	of Affirmat	ive Action
Ξ	AM	Complian	ce as	of the dat	e of this	s bid sub	mission.			
		SBE, I reques	t this	bid be cor	sidered	for the	Local SB	E Prefere	nce.	
N	ls an eligible Local Ny County (WebVe	n) Vendor Nu	mber	·		2-2	2701		<u></u>	
u CIDRA <i>ic</i>	ORGANIZATION IN	FORMATION:	The	informatio	n reque	sted bel	ow is for	statistic	al purposes	only. On final
analysi	is and consideratio	n of award, co	ontra	ctor/vendo	r will be	e selecte	d withou	t regard	to race/ethr	icity, color,
	n, sex, national original	gin, age, sexu Sole Proprieto	al ori	entation or	disabiii	y.	orporatio	n 🗀 N	on-Profit	☐ Franchise
Business S	itructure:	Other (Please	Spe	ecify)						
T 4 - 1 No	ber of Employees	(including ow	ners)	. 7						
Race/Ethnic	Composition of Firm	. Please distrib				er of indiv	riduals into	the Tollo	wing categori	es:
Race	e/Ethnic Composition			ners/Partners ociate Partne			Manage	rs		Staff
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Black/Africa	n American									
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busine	ss enterprise by a	public agency,	, con	nplete the i	ollowin	g <u>and at</u>	tach a co	opy of yo	ur proof of	<u>certification</u> .
(Use ti	he back of this form	m, if necessar	i .		- W.	omen	Disadva	heneto	Disabled	Expiration
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. LOCAL	SMALL BUSINESS										
Firm Name	e: HARBOR	Dieser ?			•						
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	s an eligible Local Ny County (WebVe						_ocal SB	E Prefer	ence.		
. <u>FIRM/C</u>	DRGANIZATION IN is and consideration, sex, national original origi	FORMATION: n of award, co	The info ntractor I orienta	ormation /vendor v tion or di	reque: will be isabilit	sted belo selected	withou	t regard	to race/eth	inicity, co	ior,
Business S		Sole Proprietor Other (Please			ership	•	orporatio	n 🗆 1	lon-Profit	Franc	:hise
	ber of Employees			57							
Race/Ethnic	Composition of Firm	. Please distribu			numbe	r of indivi	iduals into	the follo	owing catego	nes:	
Race	e/Ethnic Composition			Partners/ Partners			Manage	rs		Staff	
		N	1ale	Fema	ale	Mal	е	Female	Mal	e Fe	emale
Black/Africa	n American								2		
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American In	ndian										
Filipino											
White			3	<u></u>		4		<u> </u>	13	3	<u> </u>
I. PERCE	NTAGE OF OWNER	RSHIP IN FIRM	: Please	e indicate	by pe	ercentag	e (%) ho	w <u>own</u>	ership of the	e firm is	
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	American	Latino		cific Island		Ind	ian %	-	%		
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ENTER	FICATION AS MINU RPRISES: If your files on terprise by a part of this form	rm is currently oublic agency,	certified complet	t as a mii	nority,	. women	, disadv	antageo	or disabled	veteran d	wned <u>ion</u> .
(Use ti	Agency Name	n, ii necessary	Mino	rity	Wo	men	Disadva	ntaged	Disabled Veteran		ration ate
V. DECLA	ARATION: ADECLA	RE UNDER PE	NALTY	OF PERJ	URY L	JNDER T	HE LAW	S OF T	HE STATE (OF CALIFO	ORNIA
THAT	THE ABOVE INFOR	RMATION IS TI	KUE AN	D ACCUI	AHE.	•	CECFAT			31 - 25 Date	
Authorized	Signature			<u></u>		Title				Date	•

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM: A Local SBE certified by the County of Los Angeles Office of Affirmative Action I AM NOT Compliance as of the date of this bid submission. IAM As an eligible Local SBE, I request this bid be considered for the Local SBE Preference. My County (WebVen) Vendor Number : FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability. ☐ Partnership Corporation ☐ Non-Profit □ Franchise ☐ Sole Proprietorship **Business Structure:** □ Other (Please Specify) Total Number of Employees (including owners): Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories: Owners/Partners/ Staff Managers Race/Ethnic Composition Associate Partners Female Male Female Male Female Male Black/African American Hispanic/Latino Asian or Pacific Islander American Indian Filipino White III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed. Hispanic/ Asian or American Black/African White Filipino Indian Pacific Islander American Latino % % % % % % Men % % % % % Women IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. (Use the back of this form, if necessary.) Expiration Disabled Women Disadvantaged Minority **Agency Name** Veteran Date V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THE ABOVE INFORMATION IS TRUE AND ACCURATE.

Page 16

Authorized Signature

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

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IFB APPENDIX D

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

considera	tion of the bia.										
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Women	%		<u></u> %		%		<u> </u>		%	51	<u></u>
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(Use ti	he back of this for Agency Name	m, II nec	1	Minority	Wo	men	Disadva	ntaged	Disabled Veteran		ation ite
Supplie	r Clearing	house	>		V					6-8-	07
County office of	0. 001:0000	Action			V					9-17	-06
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Loh	eca L.	Hu	road		Pres	iden	£			3-22-	06
Authorized S						Title				Date	Pane

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

COMBIGOR	ation of the state							
. LOCAL	SMALL BUSINESS	ENTERPRISE PF						
Firm Nam	e: Norths	stor Ele	ecteon	ics, L	<u>ب کمار</u>	 		_
X 1	AM NOT	A Local SBE	certified by t	he County	of Los Angele	s Office	of Affirmativ	ve Action
	AM	Compliance a						
	s an eligible Local	SBE, I request th	is bid be cor	sidered for	the Local SBI	E Prefer	ence.	
N	ly County (WebVer	n) Vendor Numbe	er :					- 1
analys	ORGANIZATION INI is and consideration n, sex, national orig	n of award, conti	ractor/vendo	r will be sel	l below is for ected withou	statistion t regard	cal purposes o to race/ethni	only. On fina city, color,
Business S	Structure:	Sole Proprietorsh Other (Please Sp	ip 🛚 Par	tnership 🛭	2 Corporation	n 🗆 N	lon-Profit (Franchise
Total Num	ber of Employees	including owners	s): 0					
Race/Ethnic	Composition of Firm.	Please distribute	the above tota	al number of	individuals into	the folio	wing categorie	s:
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distribu	ited. Black/African	Hispanic/	Asian o	er .	American	E:	lipino	White
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1036 11	Agency Name	# 1	Minority	Women	Disadva	ntaged	Disabled Veteran	Expiration Date
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DECLA	ARATION: I DECLA	RE UNDER PENA MATION IS TRU	LTY OF PER E AND ACC	JURY UNDI	ER THE LAW	S OF TH	HE STATE OF	CALIFORNIA
Authorized S	Signature			Title			. 1	Date
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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in a single Hace	Ethnic Composition		Ass Male	ociate Part	t ners Female	М	ale	Female	Ma		Female
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III. PERCEN								ow <u>owne</u>	ership of th	e firm	is
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ENTERP busines	CATION AS MINE PRISES: If your fi s enterprise by a p e back of this form	rm is cu oublic ag	rrently cei gency, coi	rtified as a	a minority,	wome	n, disadi ttach a c	vantaged copy of yo	or disabled	l veter f certi	ran owned fication.
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V. DECLAR	RATION: I DECLA HE ABOVE INFOR	ARE UNE	DER PENA N IS TRUI	LTY OF P	CURATE.		THE LAV			2	6-06
Authorized Si	gnature	/ - 0 /				Title				Date	;

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability. Business Structure: Sole Proprietorship Partnership Corporation Non-Profit Franchise Other (Please Specify) Total Number of Employees (including owners): Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories: Male Female Male Female Male Female Male Female Black/African American dispenic/Latino Asian or Pacific Islander American Indian White PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed.	PICTOR	OTIONICS AT ST	We continue	ر منفالم م	Kill	- Harris			** ** **		40.00	
I AM NOT A Local SBE certified by the County of Los Angeles Office of Affirmative Action I AM Compliance as of the date of this bid submission. As an eligible Local SBE, I request this bid be considered for the Local SBE Preference. My County (WebVen) Vendor Number D227 530				wichur ô	to tras se	olicitario	Fr musi	. сомрте	rte and re	idir ms	Orini FO	Liel
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As an eligible Local SBE, I request this bid be considered for the Local SBE Preference. My County (WebVen) Vendor Number: D222 \$30/ PRIMORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability. Sole Proprietorship		AM NOT	A Loc	al SBE (certified b	y the Co	unty of	Los Ang				•
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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T ,	Лу County (WebVe	n) Vendor	Number	<u>: 50</u>	52	100				
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Business S			rietorship ease Spec		thersin	, , , , , , ,		,,,	ton-rrone	
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White						\bot				
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

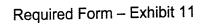
I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM: Firm Name:	
Firm Name: I AM NOT A Local SBE certified by the County of Los Angeles Office of Affirmative Action Compliance as of the date of this bid submission. As an eligible Local SBE, I request this bid be considered for the Local SBE Preference. My County (WebVen) Vendor Number: II. FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On fi analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation or disability. Business Structure: Sole Proprietorship Partnership Corporation Non-Profit Franchis	
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Rusiness Structure:	
Other (Please Specify)	se
Other (Please Specify)	
Total Number of Employees (including owners):	
Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories:	
Race/Ethnic Composition Owners/Partners/ Associate Partners Managers Staff	
Male Female Male Female Male Fema	le
Black/African American Z / 4 3	
1/2 101) 12	
Hispanic/Latino // // // // // 3	
Asian or Pacific Islander	
American Indian	
Filipino	
White 32 9 59 /2	
н Генерали	
III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is	
distributed. Black/African Hispanic/ Asian or American Filipino White	
American Latino Pacific Islander Indian	-0/
Men % % % % % /OC	%
Women % % % %	%
AND DISABLED VETERAN BUSINESS	
IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran own	ned
business enterprise by a public agency, complete the following and attach a copy of your proof of certification	<u>i</u> .
(Use the back of this form, if necessary.) Disabled Expirati	on
Agency Name Minority Women Disadvantaged Veteran Date	
V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORN THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.	AIN
Bun Pushouse President 4/3086	
Authorized Signature Title Date	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

. LOCAL	SMALL BUSINESS	ROAD FO	EFERENCE I	PROGRA	M:	270	R,			
<u> </u>	AM NOT	A Local SBE of Compliance a	certified by t is of the dat	the Cour e of this	nty of Lo	s Angele mission.	es Office	e of Affirma	ative Action	on
□ A	s an eligible Local ly County (WebVe							ence.		
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distribu							w <u>own</u>	ership of th	e firm is	
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Women . CERTIF	%	ORITY, WOMEN,	DISADVANT	% raged,	AND DI	SABLED	VETER/	AN BUSINE	SS Lyataran	% owned
busines	PRISES: If your fires senterprise by a page back of this form	oublic agency, cor	mplete the f	ollowing	and at	tach a co	ppy of y	our proof o	t certifica	tion.
	Agency Name		Minority	Wo	men	Disadva	ntaged	Disabled Veteran	1 .	oiration Date
DECLA	RATION: I DECLA	MATION IS TRUI	LTY OF PER	11211				HE STATE		
Authorized 6					Title				Date	
	7									Page

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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usiness S	tructure: 🗆 S	Sole Proprietors Other (Please S	ship 🗆 Part	tnership	□ Co			lon-Profit	<u> </u>	Franchise
	per of Employees (Composition of Firm.			al numbe	er of indivi	duals into	the folk	owina cateac	nies:	
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Authorized S	Signature		PRE	SIDE	NT Title			03-30-		ate
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

considera	tion of the bid.												
. LOCAL	SMALL BUSINESS	ENTER	PRISE P	REFERE	NCE F	ROGRA	<u>\M</u> :						
Firm Name	2010.00												
/	AM NOT	A Lo	പ cal SBE	certifie	d by t	he Cou	nty of Lo	s Ang	jeles Office in.	of Affirm	ative /	Action	
1 A	s an eligible Local	SBE, I re	equest t	his bid l	be cor	sidered	for the	_ocal	SBE Prefer	ence.			
M	ly County (WebVe	n) Vendo	or Numb	er :	00	327	<u>50</u>						
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Business S	tructure:	Sole Pro Other (I	prietors	hip [l Par	tnership		orpora	tion 🗆 N	lon-Profit	<u> </u>	Franchi	se
Total Numl	ber of Employees	(includin	g. owne	rs):	45	-							
Race/Ethnic	Composition of Firm	. Please	distribute	the abo	ve tot	al numbe	er of indiv	iduals i	into the follo	wing categ	ories:		
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

	ation of the bid.							,	
<u>LOCAL</u> Firm Nam	SMALL BUSINES e: POW	<u>s en l'ERPRISE</u> <i>l</i> ertrair		Reman		ndust	tries		
হ্র ।	AM NOT	A Local S	BE certifie		nty of L	os Angele		of Affirmativ	e Action
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lispanic/La	tino		<u>X</u>						
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Nomen	%		%	%		%		%	9
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

considerat	tion of the bid.											
. LOCAL	SMALL BUSINES	S ENTER				<u>\M</u> :						
Firm Name	PTO S	ales	Cos	porat	ion							
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1036 111	Agency Name	,		Minority	W	omen	Disadva	ntaged	Disable Vetera		Expirat Date	
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V. DECLA	RATION: I DECL	ARE UND	ER PENA	LTY OF PEI	RJURY	UNDER 1	HE LAW	S OF T	HE STATE	OF C	ALIFOR	NIA
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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F	rm Nan	ne: QUINN	POWER	SYSTE	MS		2444					_	
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То	tal Num	ber of Employees	(includi	ng owner	s):	218							
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

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Total Num	nber of Employees	(including. o	wners):	:								1
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Kace/Etnnic	c Composition of Fire	n. Please disti	·	ers/Partner		er of individ	uais inte	the follow	ving categ	gories:		
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Hispanic/La	itino		N/A*	N,	/A*	3		3	134		21	
Asian or Pa	cific Islander		N/A*	N,	/A*	1		0	14		6	
American Ir	ndian		N/A*	N,	/A*	0		0 .	4		1	
Filipino			N/A*	N,	/A*	0		0	0		0	
White			N/A*	N,	/A*	23		4	128		16	
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Women	N/A* %	N/A*	%	N/A*	%	N/A*	%	N/A	* %	N/A	* %	
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ENTER	PRISES: If your fi	rm is current	ly certi	fied as a n	ninority	, women,	disadva	ntaged o	r disabled	d vetera		
	ss enterprise by a , he back of this fort			plete the f	ollowin	g <u>and attac</u>	ch a co	py of you	r proof o	f certif	ication.	
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Authorized &	Signature		<u> </u>	TITOM	TV V	Title	IIII			Date	_,	•

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

I. LOCA	L SMALL BUSINE											
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_	AM NOT	A Local Complia	SBE cert	ified by	the Coate of the	unty of l	Los Ange Ibmissio	eles Offi n.	ce of	Affirn	native	Action
	As an eligible Loca	al SBE, I reque	st this bi	id be c	onsidere	d for the	Local S	BE Prefe	erenc	 e.		
	My County (WebV											
analys	ORGANIZATION I sis and considerati n, sex, national or	on of award,	contracto	or/vend	lor will b	e select	elow is for	or statis out regar	tical p	ourpos race/e	es on thnicit	ly. On final ty, color,
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	ber of Employees				3 (Ex			westok Muers	111			1-05
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			Male	F	emale	Ma	ale	Female	•	Ma	le	Female
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Asian or Pa	cific Islander					}	7	1		9	5	25
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distribu	ited. COWNE	RSHIP	COMP	RISEC	107	Tuvi	STORS	- DAT	A	TO	VAi	ANE3
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Women	%		%		%		%			%		%
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Authorized S	ignature		IFB		NDIX D			, —			Dat	Page 16

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

considera	ation of the bid	ders responding) to this so	licitation	must	complet	e and re	turn this	s form t	or proper
LOCAL	SMALL BUSINE	ss enterprise p Hartford Coa	REFERENCE	PROGR	AM:					***************************************
	AM NOT	A Local SBE	certified by	the Cou	nty of	Los Ange	les Office	of Affin	mative A	Action
	AM s an eligible Loca	Compliance						******	******	Mark Str. M. W. M. Skr. Str. Str. Skr. Skr. Skr. Skr. Skr. Skr. Skr. Sk
M	ly County (Web)	al SBE, I request ti (en) Vendor Numb	her: 123	3120	101 the	Local SI	3E Prefer	ence.		
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otal Numb	er of Employees	(including owner	s): 10				•••••••••••••••••••••••••••••••••••••••			***************************************
ice/Ethnic (Composition of Fin	n. Please distribute	the above to	lal numbe	of indi	riduals inte	the follo	wing cates	gories:	
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business	enterprise by a pack of this form		Tilled as a n	ninority, ollowing	women and att	diameter		r disable Ir proof o	d vetera of certific	cation.
	Agency Name		Minority	. Wom	en	Disadvan	laged	Disabled Veteran	E	xpiration Date
DECLARA THAT TH	ATION: I DECLA	RE UNDER PENAL	TY OF PER	IKA I E.				STATE	OF CALI	FORNIA
thorized Sign	nature			Ti	ores	ident			03	3-21-20
e.		!	IFB APPEI	IDIX D						Page 15

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid. I. LOCAL SMALL BUSINESS ENTERPRISE PREFERENCE PROGRAM: Bay Ford, Inc. X I AM NOT A Local SBE certified by the County of Los Angeles Office of Affirmative Action Compliance as of the date of this bid submission. IAM As an eligible Local SBE, I request this bid be considered for the Local SBE Preference. My County (WebVen) Vendor Number : 519 784 01 FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, **Business Structure:** ☐ Sole Proprietorship ☐ Partnership 【 Corporation ☐ Non-Profit Other (Please Specify) Total Number of Employees (including owners): Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories: Race/Ethnic Composition Owners/Partners/ Associate Partners Managers Male Female Male Black/African American Female Male Female Ø Ø Hispanic/Latino 5 Ø 2 I Asian or Pacific Islander 68 Ø 2 Ø American Indian 4 Ø Ø Ø Ø Filipino 1 Ø Ø Ø Ø White Ø Ø 12 2 III. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is 35 Black/African Hispanic/ American Asian or American Latino Pacific Islander Men Filipino Indian White % % Women % 100 % % IV. CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran owned business enterprise by a public agency, complete the following and attach a copy of your proof of certification. Agency Name Minority Women Disabled Disadvantaged Expiration Veteran Date DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA Parts & Service Prector Authorized Signature

IFB APPENDIX D

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

	L SMALL BUSINE				E PROGR	AM:				
Firm Na	me: <u>Speedo E</u>	lectri	c Inc.	· · · · · · · · · · · · · · · · · · ·						
_	I AM NOT I AM	A L Co	ocal SBE	certified b	y the Cou late of thi	inty of s bid si	Los Ange	eles Offi n.	ice of Affirma	tive Action
	As an eligible Loca	SBE, I	request ti	his bid be d	considered	for th	e Local S	BE Pref	erence	
	My County (WebV	en) Vend	dor Numb	er :	#0407				0.0100.	
I. FIRM	ORGANIZATION I	AIEADRA A	TION: T	ha infa	-			_		
analy	ORGANIZATION I	on of aw	ard, cont	ne informa :ractor/ven	tion reque dor will be	ested b	elow is to ted witho	or statis	tical purposes	s only. On fina
religio	on, sex, national or	rigin, age	, sexual c	orientation	or disabili	ty.			u to tace/etil	riicity, color,
Business			oprietorsh (Please S		artnership	À	Corporati	on 🛚	Non-Profit	☐ Franchise
Total Nun	nber of Employees	(includi	ng owner	s): 4						
Race/Ethni	c Composition of Fin	n. Please	η			r of ind	ividuals in	to the fo	llowing categor	ies:
Rad	ce/Ethnic Compositio	n		wners/Partne sociate Part			Manag	ers		Staff
D			Mal	e I	Female	М	ale	Femal	e Male	Female
	an American							·		
Hispanic/La	cific Islander				-				11	
American I								**		
Filipino	101011									
White			<u> </u>		1		1			
I. PERCE	NTAGE OF OWNE	RSHIP IN	·	Please indic		rcenta		ow own	ership of the	firm is
distrib	uted. Black/African									
	American		anic/ tino	Asian Pacific Is			erican dian	F	ilipino	White
Men	%		%		%		%		%	100 %
Women	%		%		%		%		%	%
. CERTIF	FICATION AS MINO	ORITY. W	VOMEN. I	DISADVAN	TAGED .	AND D	ISABI ED	VETED	AN DUCKEO	
CINIEN	rnioco: Il your fil	rm is curi	rently cer	tified as a	minority.	wamer	n disadva	antanod	or disablad .	_
2001170	ss enterprise by a p ne back of this form	oublic ay	ency, con	nplete the	following	and at	tach a co	py of y	our proof of c	ertification.
1030 11	Agency Name	n, n nece		Minority	Won		Disadva		Disabled	Expiration
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	N/A									
. DECLA	RATION: I DECLA THE ABOVE INFOR	RE UNDE	R PENAL	TY OF PE	RJURY UI	NDER T	HE LAW	S OF TH	E STATE OF	CALIFORNIA
1/2	111 KII	TON	i io IMUE	AND ACC		سداد اد	+-			Morest 01
uthorized Si	ignature)	1 1/V	<i>U</i>	· · · · · · · · · · · · · · · · · · ·		iden	L			March 21,

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

I. LOCA	L SMALL BUSINES	SS ENTERPRISE F	PREFERE	NCE PROGR	AM:				
Firm Na				Boa	· · ·				
	I AM NOT I AM	A Local SBE Compliance	certifie	d by the Co	unty of Los A	angeles Offic sion.	e of Affirn	mative Acti	on
	As an eligible Loca My County (WebV	l SBE, I request t en) Vendor Numb	his bid b	e considered	d for the Loc	al SBE Prefe	ence.		
II. <u>FIRM</u>	ORGANIZATION IN sis and consideration on, sex, national ori	NFORMATION: Ton of award, con	he infortractor/v	mation requi	e selected wi	is for statisti ithout regard	cal purpos to race/e	ses only. C	n fina lor,
1	Structure:	Sole Proprietorsl Other (Please S	hip 🔀	Partnership		ration 🚨 N	lon-Profit	☐ Fran	chise
Total Nun	ber of Employees	(including owner	rs): 14		****				
Race/Ethnic	: Composition of Firm	a. Please distribute	the abov	e total numbe	er of individuals	s into the follo	wing categ	ories:	
Rac	e/Ethnic Composition	or me the second of the second water to a pro-	wners/Pa sociate P	rtners/ artners	Ma	nagers		Staff	
		Mal	е	Female	Male	Female	Ма	ile Fe	male
Black/Africa	n American						1		
Hispanic/La					11		8		
	cific Islander			· · · · · · · · · · · · · · · · · · ·					
American In	dian								
Filipino White									
	**************************************	11				1 1			1
 PERCEI distribut 	NTAGE OF OWNER ted.	ISHIP IN FIRM: F	Please in	dicate by pe	rcentage (%) how <u>owner</u>	ship of th	e firm is	
	Black/African American	Hispanic/ Latino		ian or Islander	American Indian	Fili	olno	White	
Men	* %	%		%	(%	%	100.00	%
Women	%	%		%		%	%		%
<u>ENTERI</u> busines	PRISES: If your firms enterprise by a post back of this form. Agency Name	n is currently cer ublic agency, con , if necessary.)	tified as	a minority,	women, disa and attach a	dvantaged d	r disabled	veteran ou	on. ation
/. DECLAF	RATION: I DECLAR HE ABOVE INFORM	RE UNDER PENAL	TY OF F	PERJURY UN	NDER THE LA	AWS OF THE			
	9	El .			President			03/23/20	06
Authorized Sig	nature			Ti	tle			Date	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

	L SMALL BUSINES					<u>IAM</u> :		-		
Firm Nan	ne: Truck Sp	pecialty	y Serv	nce, Ir	nc.		** *			
	AM NOT			certified by is of the da					e of Affirma	itive Action
	As an eligible Loca				nsidere		Local S	BE Prefer	ence.	***************************************
l	My County (WebV	en) venao	r Numbe	or :	703000	,				
analys	ORGANIZATION II sis and consideration n, sex, national or	on of awar	rd, contr	actor/vend	or will b	e selecte				
Business		Sole Prop Other (P			rtnershi	р ХОК С	orporati	on 🗆 N	lon-Profit	☐ Franchise
Total Nun	ber of Employees	(including	owners	s):						
Race/Ethnic	Composition of Firm	n. Please d	istribute t	the above to	tal numb	er of indiv	iduals int	to the follo	owing catego	ries:
Rac	e/Ethnic Composition			ners/Partner ociate Partne			Manag	ers		Staff
			Male	. Fe	emale	Ma	le	Female	Male	Female
Black/Afric	an American									
Hispanic/La	tino								1	
Asian or Pa	cific Islander					ļ				
American I	ndian			·						
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White			1			1				
	NTAGE OF OWNE	RSHIP IN I	FIRM: P	lease indica	ate by p	ercentag	je (%) h	ow <u>owne</u>	ership of the	firm is
distrib	Black/African	Hispa	nic/	Asian	or	Ame	rican	T	1	
	American	Latir		Pacific Isla			lian	Fi	lipino	White
Men	%		%		%		%	<u> </u>	%	100 %
Women	%		%		%		%		%	%
ENTER busine	FICATION AS MINI RPRISES: If your fires enterprise by a	rm is curre oublic age	ently cer ncy, con	tified as a i	minority	, womer	n, disadv	rantaged	or disabled	veteran owned
(Use t	he back of this fore Agency Name	n, ir neces		Minority	We	men	Disadva	intaged	Disabled Veteran	Expiration Date
V. <u>DECL/</u> THAT	ARATION: I DECLA THE ABOVE INFO	RE UNDER	R PENAL IS TRUE	TY OF PEF	RJURY (URATE	JNDER T	HE LAW	/S OF TH	IE STATE O	F CALIFORNIA
	tlen Ver	men	\$	j	resi	dent			3	3-25-06
Authorized						Title				Date

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

I. LOCA	L SMALL BUSINE					<u>AM</u> :				-	
Firm Nan	ne: <u>United</u>	Auto &	Truc	k, In	c.						
	I AM NOT I AM			rtified by of the da					ce of Affirma	ative Action	
	As an eligible Loca My County (WebV						Local SE	BE Prefe	rence.		
analys	ORGANIZATION I sis and consideration, sex, national or	on of award	, contrac	ctor/vende	or will b	e selecte					
	Structure:	Sole Propri Other (Plea	etorship	☐ Pa	rtnershi		orporatio	n 🗆 i	Non-Profit	☐ Franch	ise
Total Nun	nber of Employees	(including o	wners):	51							
Race/Ethnic	c Composition of Fin	m. Please dist	tribute the	above to	tal numbe	er of indiv	riduals inte	the foll	lowing catego	ries:	
Rac	e/Ethnic Compositio	n		ers/Partner		lei maki	Manage	rs		Staff	
	-		Male	Fe	emale	Ma	le	Female	Male Male	e Fem	ale
Black/Afric	an American					4			1		
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distrib	uted.							1			
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Men	%		%		%		%	<u> </u>	%	60	%
Women	40 %		%		%	· ····	<u>%</u>		%		%
ENTER	FICATION AS MIN RPRISES: If your factors ass enterprise by a	irm is curren	tly certif	ied as a r	ninority,	womer	, disadva	antaged	or disabled	veteran ow	ned <u>n</u> .
(Use t	he back of this for Agency Name	m, if necessa		inority	Wo	men	Disadva	ntaged	Disabled	Expirat	
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Authorized	Signature					Title		***************************************	•	Date	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

I. LOCA	L SMALL BUSINES	S ENTERPRIS	E PRE	FERENCE	PROGRA	<u> </u>						
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⊠ 1	AM NOT	A Local	SBE ce	ertified by	the Cou	ntv of	Los Ange	les Of	fice of	Affirma	ative Action	on
	AM						ubmission					,,,
	As an eligible Loca	I SBE, I reque	st this	bid be co	nsidered	for th	e Local SI	3E Pre	ference	э.		
r	My County (WebV	en) Vendor Nı	umber	:								
I. FIRM/	ORGANIZATION I	NEORMATION	· The	informati	on reque	eted h	elow is fo	r etati	stical r	virnosa	s only O	n fins
analys	sis and consideration, sex, national or	on of award, o	contra	ctor/vend	or will be	select	ted withou	ut rega	rd to r	ace/eth	nicity, co	lor,
Business \$		Sole Propriet Other (Pleas			rtnership		Corporatio	on 🗆	Non-l	Profit	☐ Fran	chise
Total Num	ber of Employees	(including ov	vners):									
0/544:-			L									
Hace/Ethnic	Composition of Firn	n. Piease distri				r or ina	iviouais inti	o the re	ollowing	catego	nes: 	
Rac	e/Ethnic Composition	1		ers/Partner ciate Partne	The state of the state of		Manage	ers			Staff	
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Hispanic/La	tino								\dashv	22	1	
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	cific Islander					-				2		
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White			1			6			l	12	3	.
l. <u>PERCE</u> distribu	,		<u>⁄1:</u> Ple					w <u>ow</u>	nership	of the	firm is	
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Women	%		%		%		%			%		%
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Authorized S	ignature	-11/16	SA	_		iden	L			marc	h 29,	<u> 2006</u>
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Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

I. <u>LOCAI</u>	. SMALL BUSINES	S ENTERPRIS	E PREFER	ENCE PROGE	AM:	3 \	•			
Firm Nam	e: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2 Ic	(00)	$\geq 2i \omega_{k}$	acri	th	<u> </u>			
	AM NOT AM			ed by the Co he date of th				of Affirm	ative Actio	'n
	As an eligible Local My County (WebVe				_	Local SE	BE Prefere	nce.		•••••
analys	DRGANIZATION IN is and consideration, sex, national original	n of award, c	ontractor	vendor will b	e select					
Business S		Sole Proprieto Other (Pleas		Partnershi	р 🖫 (Corporatio	on 🗆 No	n-Profit	☐ Franc	hise
Total Num	ber of Employees	(including ow	ners): \	6						
Race/Ethnic	Composition of Firm	. Please distrib	ute the abo	ove total numb	er of indi	viduals into	the follow	ving catego	ories:	
Race	/Ethnic Composition		Owners/F Associate			Manage	ers		Staff	181
			Male	Female	M	ale	Female	Mal	e Fe	male
Black/Africa	n American									
Hispanic/Lat	ino							1_		
Asian or Pac	ific Islander			-						
American In	dian									
Filipino										
White			1	2				2		
III. PERCEI	NTAGE OF OWNER	ISHIP IN FIRM	l: Please	indicate by p	ercenta	ge (%) ho	w <u>owners</u>	ship of the	e firm is	
	Black/African American	Hispanic/ Latino		Asian or ific Islander		erican Jian	Filip	ino	White	·· }
Men	%		%	%		%		%	HG	%
Women	%		%	%		%		%	5	%
ENTER busines	ICATION AS MINO PRISES: If your firms or enterprise by a p or back of this form	m is currently ublic agency,	certified complete	as a minority	, wome	n, disadva	antaged o	r disabled Ir proof o	veteran o certificati	<u>on</u> .
	Agency Name		Minori	ty Wo	men	Disadvar	ntaged	Disabled Veteran	Expir Da	
					·					
V. <u>DECLA</u> THAT 1	RATION: I DECLAI	RE UNDER PE	NALTY O	F PERJURY U	INDER 1	THE LAW:	S OF THE		_	RNIA
doc	delle	Ca 202	$\langle \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	205	5	tue		3-21	0-0	6
Authorized Si	gnature)		Title				Date	Page 1

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper

analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, coloreligion, sex, national origin, age, sexual orientation or disability. Susiness Structure:
I AM NOT
As an eligible Local SBE, I request this bid be considered for the Local SBE Preference. My County (WebVen) Vendor Number: \(\begin{array}{c} 9 2 \end{array} \) I. FIRM/ORGANIZATION INFORMATION: The information requested below is for statistical purposes only. Or analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color religion, sex, national origin, age, sexual orientation or disability. Business Structure: \(\begin{array}{c} \) Sole Proprietorship \(\begin{array}{c} \) Partnership \(\begin{array}{c} \) Corporation \(\begin{array}{c} \) Non-Profit \(\begin{array}{c} \) France \(\begin{array}{c} \) Other (Please Specify) \(\begin{array}{c} \) Other (Please Specify) \(\begin{array}{c} \) Owners/Partners/ \(\begin{array}{c} \) Associate Partners/ \(\begin{array}{c} \) Manegers \(\begin{array}{c} \) Staff \(\begin{array}{c} \) Associate Partners/ \(\begin{array}{c} \) Associate Partners/ \(\begin{array}{c} \) Anale \(\begin{array}{c} \) Female \(\begin{array}{c} \) Male \(\begin{array}{c} \) Female \(\begin{array}{c} \) Male \(\begin{array}{c} \) Female \(\begin{array}{c} \) Male \(\begin{array}{c} \) Female \(\begin{array}{c} \) Anale \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \) Array \(\begin{array}{c} \begin{array}{c} \\ \begin{array}{c} \\ \begin{array}{c} \\ \end{array} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, coloreligion, sex, national origin, age, sexual orientation or disability. Business Structure: Sole Proprietorship Partnership Corporation Non-Profit France Other (Please Specify) Fotal Number of Employees (including owners): Corporation Non-Profit Prance Other (Please Specify) Fotal Number of Employees (including owners): Corporation Non-Profit Prance Other (Please Specify) Fotal Number of Employees (including owners): Corporation Non-Profit Prance Other (Please Specify) Fotal Number of Employees (including owners): Corporation Non-Profit Prance Other (Please Specify) Fotal Number of Employees (including owners): Corporation Non-Profit Prance Other (Please Specify) Fotal Number of Employees (including owners): Corporation Non-Profit Prance Nace/Ethnic Composition Number of individuals into the following categories: Race/Ethnic Composition Nale Female Male Female Male Female Male Female Nale Female
Other (Please Specify) Fotal Number of Employees (including owners): 46 Race/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories: Race/Ethnic Composition Owners/Partners/ Associate Partners Male Female M
Rece/Ethnic Composition of Firm. Please distribute the above total number of individuals into the following categories: Rece/Ethnic Composition
Race/Ethnic Composition Owners/Partners/ Associate Partners Managers Staff Male Female Male Female Male Female Black/African American
Race/Ethnic Composition Associate Pertners Male Female ale Female Male Fema
Black/African American dispanic/Latino Asian or Pacific Islander American Indian Filipino White 1 1 2 7 4 PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed. Black/African Hispanic/ Asian or Pacific Islander Indian Men % % % % % % % % % % % % % % % % % % %
Hispanic/Latino Asian or Pacific Islander American Indian Hispanic/Latino American Indian Hispanic/Latino American Indian Hispanic/Latino Please indicate by percentage (%) how ownership of the firm is distributed. Black/African American Hispanic/Latino Men Men Men Men Men Men Men M
Asian or Pacific Islander American Indian White 1 1 2 7 4 I. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed. Black/African American Hispanic/ Asian or Pacific Islander Indian Filipino White Men % % % 45
American Indian Filipino White 1 1 2 7 4 I. PERCENTAGE OF OWNERSHIP IN FIRM: distributed. Black/African American Hispanic/ Asian or Pacific Islander Indian Men % % % 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
White 1 1 2 7 4 I. PERCENTAGE OF OWNERSHIP IN FIRM: distributed. Black/African American Latino Pacific Islander Indian Filipino White Men % % % 45
White 1 1 2 7 4 I. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed. Black/African Hispanic/ Latino Asian or Pacific Islander Indian Filipino White Men % % % 4 5
I. PERCENTAGE OF OWNERSHIP IN FIRM: Please indicate by percentage (%) how ownership of the firm is distributed. Black/African Hispanic/ Asian or American Indian Filipino White
distributed. Black/African American Hispanic/ Latino Pacific Islander Indian Filipino White
Black/African Hispanic/ Latino Asian or Pacific Islander American Indian Filipino White
Well A A A A A A A A A A A A A A A A A A
Women % % % % 55
CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, AND DISABLED VETERAN BUSINESS ENTERPRISES: If your firm is currently certified as a minority, women, disadvantaged or disabled veteran over business enterprise by a public agency, complete the following and attach a copy of your proof of certification (Use the back of this form, if necessary.)
Agency Name Minority Women Disadvantaged Disabled Expiration Control of the Contr
WBENC
V. DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFOR THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.
May Krausan President April
Authorized Signature File

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

	SMALL BUSINES	s enterpris n Automat				ngo T	na.			
Firm Nam										
	AM NOT		SBE certified ice as of the					of Affirmativ	e Action	
□ A	As an eligible Loca	SBE, I reques	st this bid be	considere	d for the	Local SB	E Prefere	nce.		
N	/ly County (WebVe	en) Vendor Nu	ımber :							
analys	ORGANIZATION IN is and consideration, sex, national or	on of award, o	ontractor/ve	ndor will b	e selecte					
Business S		Sole Propriet Other (Pleas		Partnershi				on-Profit (Franchise	
Total Num	ber of Employees	(including ow	ners): Nin	e						
Race/Ethnic	Composition of Firn	n. Please distril	oute the above	total numb	er of indiv	riduals into	the follow	ving categorie	s:	
Race	e/Ethnic Composition		Owners/Par Associate Pa			Manage	rs		Staff	
			Male	Female	Ma	le	Female	Male	Female	
Black/Africa	n American							11		
Hispanic/Lat	tino				ļ			5		
Asian or Pac	cific Islander									
American In	dian				ļ				1	
Filipino					 				1	
White					1			1		
I. PERCEI	NTAGE OF OWNE	RSHIP IN FIRM	1: Please in	dicate by p	ercentag	je (%) ho	w <u>owner</u>	ship of the fi	rm is	
	Black/African American	Hispanic/ Latino		ian or Islander	American Indian		Filiş	oino	White	
Men	%		%	%	%			%	50 %	
Women	%		%	%		%		%	50 %	
ENTER	FICATION AS MINO PRISES: If your fi ss enterprise by a the back of this fort	rm is currently public agency	/ certified as , complete to	a minority	, womer	n, disadva	antaged o	r disabled ve ur proof of co	ertification.	
	Agency Name		Minority	Wo	Women		ntaged	Disabled Veteran	Expiration Date	
								*		
			ì		INDED T	HE I AM	S OF THE	STATE OF	CALIEORNIA	
V. <u>DECLA</u> THAT	RATION: I DECLA	RE UNDER PI	NALTY OF	CCURATE.	, NDER 1)	<i>.</i>	OTALL OF	CALII OIIIIA	
V. DECLA THAT	THE ABOVE INFO	RE UNDER PI	NALTY OF	CCURATE	Presid	,			March 24,	

IFB APPENDIX D

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Required Form - Exhibit 11

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

	AL SMALL BUSINES	SS ENTERPRIS	SE PREFE	RENC	E PROGR	<u>AM</u> :	_					
Firm Na	me: W Ø	ndrie.	۷	CH	revr	01-8	<i>T</i>					
	I AM NOT I AM	A Local Complia	SBE cert	ified b	y the Cou late of thi	inty of s bid si	Los Ange ubmission	les Offi	ce of Affirr	native	Action	1
	As an eligible Loca My County (WebV							BE Pref	erence.	*		
			-									
analy	ORGANIZATION II sis and considerati on, sex, national or	on of award,	contracto	or/ven	dor will be	select	elow is to ted withou	r statis ut regai	tical purpos d to race/e	ses on thnicit	ly. On y, colo	final or,
	Structure:	Sole Propriet Other (Pleas	torship	□ P			Corporatio	on 🗆	Non-Profit		Franci	nise
Total Nun	nber of Employees	(including ov	vners):									
Race/Ethni	c Composition of Firm	n. Please distri	bute the a	bove t	otal numbe	r of indi	ividuals inte	o the fo	lowing categ	ories:		
Rad	ce/Ethnic Composition		Owners Associa				Manage	ors		St	aff	
			Male		Female	М	ale	Femal	e Ma	ale	Fen	nale
Black/Afric	an American			ļ								
Hispanic/La	atino					, ,	2		2	2	d	5
Asian or Pa	cific Islander							2	- 4	/		
American I	ndian			-								
Filipino				_								
White					/	3	}	<u> </u>			2	
II. <u>PERCE</u> distribu	NTAGE OF OWNE	RSHIP IN FIRM	<u>/I:</u> Pleas	e indic	cate by pe	rcenta	ge (%) ho	w <u>own</u>	<u>ership</u> of th	e firm	is	
	Black/African American	Hispanic/ Latino					American Indian		ilipino	White		
Men	%	49	%		%		%		%	É	5/	%
Women	%		%		%		%		%			%
ENTER busines	PRISES: If your fires enterprise by a p	m is currently public agency,	certified complet	d as a	minority,	womei	n, disadva	ntageo	or disable	l veter	ran ow fication	ned <u>n</u> .
(Use the back of this form, if nec					Won	nen	Disadvar	Disabled		Expiration		
									Veteran		Date	•
	RATION: I DECLA					NDER T	HE LAWS	OF T	HE STATE	OF CA	LiFORi	NIA
<u> </u>)			j	Pres.	dent		•	4-	3-	26
Authorized S	ignature				Ť	itle				Date	9	

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

I. LOCA	L SMALL BUSINE	SS ENTERPRIS	E PR	EFERENCI	E PROGR	AM:						
Firm Na		dries		11550								
	I AM NOT I AM	Compliar	ice a	s of the d	ate of thi	s bid s	Los Ange ubmission				 ive Acti	on
	As an eligible Loc My County (Web)							BE Prefe	rence). —————		
analy	ORGANIZATION of sis and consideration, sex, national of s	ion of award, c	ontra	actor/vend	for will be	selec	elow is fo ted witho	r statist ut regar	ical p d to r	urposes ace/ethr	only. C	n final lor,
	Structure:	Sole Propriet Other (Pleas	orshi	р 🗆 Ра	artnership		Corporation	on 🗖	Non-F	Profit	☐ Fran	chise
Total Nun	nber of Employees	(including ow	ners)): 7	6							
Race/Ethni	c Composition of Fin	m. Please distrib	ute ti	he above to	tal numbe	r of ind	ividuals int	o the foll	owing	categori	es:	
Rac	e/Ethnic Compositio		100	ners/Partne ociate Partn	9-54 / 17 / 18 de 2		Manage	ers			Staff	
			Male	F	emale	M	lale	Female		Male	Fe	emale
	an American								_		_	
•	Hispanic/Latino					2				25	,	2_
	cific Islander					2			20			
American Ir	ndian								_	2		<u>/</u>
Filipino									0			
White			<u> </u>		<u> </u>		2_					
II. <u>PERCE</u> distribu			<u>l:</u> Pl			rcenta	ge (%) ho	w <u>own</u> e	ership	of the f	irm is	
	Black/African American	Hispanic/ Latino			1 7 .	erican dian	Fi	lipino		Whit	9	
Men	%	50	%		%		%			% 25		` %
Women	%		%		%		%			%	2-5 %	
ENTER busines	FICATION AS MIN PRISES: If your fi ss enterprise by a ne back of this form	irm is currently public agency,	certi com	ified as a i	minority,	wome	n, disadva	antaged	or dis	sabled v	eteran o	wned on.
Agency Name			Minority		Women		en Disadvan			sabled eteran	Expiration Date	
												
V. DECLA	RATION: I DECLA	ARE UNDER PERMATION IS TI	NALT	TY OF PEF AND ACC	RJURY UI URATE.	_	_		IE ST	ATE OF	CALIFO	RNIA
Authorized S	ignature	4			т	<i>Pi</i>	reside	'nT		<i>T</i>	Date	-
	₩				•							

Los Angeles County Community Business Enterprise Program (CBE) Request for Local SBE Preference Program Consideration and CBE Firm/Organization Information Form

INSTRUCTIONS: All bidders responding to this solicitation must complete and return this form for proper consideration of the bid.

I. LOCA	L SMALL BUSINES	S ENTERPRISE PI	REFERENCI	E PROGRA	M:				
Firm Nar	ne:	Wondries	Toyo	ta					·····
	I AM NOT	A Local SBE Compliance	certified by	y the Cour	nty of I	os Ange	les Offic	ce of Affirmat	ive Action
	As an eligible Local My County (WebVe	n) Vendor Numb	er :	5/3	470	201			<u>.</u>
analy	ORGANIZATION IN sis and consideration on, sex, national original o	n of award, cont	ractor/vend	for will be	select	elow is fo ed withou	r statist ut regar	cical purposes d to race/ethr	only. On final icity, color,
Business		Sole Proprietorsh Other (Please Sp		artnership	₩ (Corporation	on 🚨	Non-Profit	☐ Franchise
Total Nun	nber of Employees	(including owners	s): 14	12					
Race/Ethnic	c Composition of Firm	. Please distribute	the above to	otal number	of indi	viduals int	o the fol	lowing categori	es:
Rac	e/Ethnic Composition	1)	vners/Partne sociate Partr			Manag	ers		Staff
		Male	F	emale	Ma	ile	Female	Male	Female
	an American					<u> </u>		2	
Hispanic/La					5		4	52	15
	cific Islander				4		/	35	3
American Ir Filipino	natan							2	
White			,	/		9 -		5	2
II. <u>PERCE</u>	NTAGE OF OWNER	SHIP IN FIRM: F	Please indic	ate by per	centag	je (%) ho	w <u>own</u>	ership of the t	irm is
	Black/African American	Hispanic/ Latino	The state of the s		Total Control of the		F	ilipino	White
Men	%	%	***********	%		%		%	/00 %
Women	%	%		%		<u></u> %		%	%
ENTER	FICATION AS MINO PRISES: If your fire ss enterprise by a p	n is currently cer	tified as a	minority, 1	womer	, disadva	antaged	or disabled v	eteran owned
	ne back of this form Agency Name	, if necessary.)	Minority	Wom		Disadva	. 1	Disabled	Expiration
<u></u>	Agency Name		winority	vvom	en	Disadvai	ntaged	Veteran	Date
	RATION: I DECLAR			URATE.		•	S OF TH	IE STATE OF	CALIFORNIA
		de-	_	P	resid	dent		4-	3-06 Date
Authorized S	ignature			Tit	tle				Date