

BID FORM

FOR: Lot 32 Overflow Parking - Paving
 PROJECT NUMBER: 956548
 CONTRACT NUMBER: 956548-MF-2016-113
 UNIVERSITY OF CALIFORNIA, RIVERSIDE
 RIVERSIDE, CALIFORNIA

~~July 6~~ July 19, 2016

Bid to: Contracts Administration
 UNIVERSITY OF CALIFORNIA, RIVERSIDE
 1223 University Avenue, Suite 240
 Riverside, CA 92521
 (951) 827-1269

1. BIDDER'S REPRESENTATIONS

Bidder, represents that a) Bidder and all Subcontractors, regardless of tier, has the appropriate current and active Contractor's licenses required by the State of California and the Bidding Documents; b) it has carefully read and examined the Bidding Documents for the proposed Work on this Project; c) it has examined the site of the proposed Work and all Information Available to Bidders; d) it has become familiar with all the conditions related to the proposed Work, including the availability of labor, materials, and equipment; e) Bidder and all Subcontractors, regardless of tier, are currently registered with the California Department of Industrial Relations pursuant to California Labor Code Section 1725.5 and 1771.1. Bidder hereby offers to furnish all labor, materials, equipment, tools, transportation, and services necessary to complete the proposed Work on this Project in accordance with the Contract Documents for the sums quoted. If awarded the Contract, Bidder agrees to complete the proposed Work within **10** days after the date of commencement specified in the Notice to Proceed.

2. ADDENDA

Bidder acknowledges receipt of all Addenda. Bidder acknowledges that it is Bidder's responsibility to ascertain whether any Addenda have been issued and, if so, to obtain copies of such Addenda from the University at the address stated above.

3. LUMP SUM BASE BID

\$

1	4	4
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4	4	4
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(Place figures in appropriate boxes.)

4. ALTERNATES

In order for a Bid to be responsive, Bidder must submit an additive bid, a deductive bid, or a "no change" bid, for each Alternate listed below. The failure to do so shall result in the Bid being rejected as non-responsive. The failure to quote an amount, unless the bidder marks the "no change" box, will result in the bid being rejected as non-responsive.

The Contract Time will change by the number of days, if any, specified for each accepted Alternate.

Alternate No. 1

Provide a grading deduct to the base bid, as specified in Specification Section 01010.

Bid for Alternate No. 1

If "Add" or "Deduct" is intended, indicate by placing figures in the corresponding boxes. If "No Change" is intended, indicate by marking the "No Change" box

Deduct \$ ± ± ±

No Change: Bidder will perform this Alternate without change to Contract Sum.

University reserves the right to accept this Alternate within 30 calendar days after the date University signs the Agreement:

5. LIST OF SUBCONTRACTORS

Bidder will use Subcontractors for the Work:

Yes _____ No

If "yes", provide in the spaces below (a) the name, the location of the place of business, and the California contractor license number of each subcontractor who will perform work or labor or render service to the prime contractor in or about the construction of the work or improvement, or a subcontractor licensed by the state of California who, under subcontract to the prime contractor, specially fabricates and installs a portion of the work or improvement according to detailed drawings contained in the plans and specifications, in an amount in excess of one-half of 1 percent of the prime contractor's total bid, (b) the portion of the work which will be done by each subcontractor. The prime contractor shall list only one subcontractor for each such portion as is defined by the prime contractor in its bid.

Portion of the Work Activity (e.g. electrical, mechanical, concrete)	Subcontractor		
	Name of Business	Location of Business (City)	License No.

(Note: Add additional pages if required.)

6. REQUIRED COMPLETED ATTACHMENTS:

The following documents are submitted with and made a condition of this Bid:

1. Bid Security in the form of Not Applicable
 (Bid Bond or Certified Check)


CALIFORNIA CONTRACTOR'S LICENSE(S):

NPG, Inc.
 (Name of Licensee)

<u>A, B, C-12</u> (Classification)	<u>664779</u> (License Number)	<u>2/28/17</u> (Expiration Date)
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NPG, Inc.
 (Name of Firm)

a California Corporation
 (Type of Organization)

By: 
 (Signature)

Jeff Nelson
 (Printed Name)

President
 (Title)

951-940-0200
 (Telephone Number)

1354 Jet Way, Perris, CA 92571
 (Full Address)

cstone@npgasphalt.com
 (email address)



Contractor's License Detail for License # 664779

DISCLAIMER: A license status check provides information taken from the CSLB license database. Before relying on this information, you should be aware of the following limitations.

CSLB complaint disclosure is restricted by law (B&P 7124.6) If this entity is subject to public complaint disclosure, a link for complaint disclosure will appear below. Click on the link or button to obtain complaint and/or legal action information.
Per B&P 7071.17 , only construction related civil judgments reported to the CSLB are disclosed.
Arbitrations are not listed unless the contractor fails to comply with the terms of the arbitration.
Due to workload, there may be relevant information that has not yet been entered onto the Board's license database.

Data current as of 7/26/2016 11:50:12 AM

Business Information

NPG INC
P O BOX 1515
PERRIS, CA 92572
Business Phone Number:(951) 940-0200

Entity Corporation
Issue Date 02/17/1993
Expire Date 02/28/2017

License Status

This license is current and active.
All information below should be reviewed.

Classifications

C12 - EARTHWORK AND PAVING
B - GENERAL BUILDING CONTRACTOR
A - GENERAL ENGINEERING CONTRACTOR

Bonding Information

Contractor's Bond

This license filed a Contractor's Bond with AMERICAN CONTRACTORS INDEMNITY COMPANY.
Bond Number: 151812
Bond Amount: \$15,000
Effective Date: 01/01/2016
[Contractor's Bond History](#)

Bond of Qualifying Individual

The qualifying individual JEFFREY SCOTT NELSON certified that he/she owns 10 percent or more of the voting stock/membership interest of this company; therefore, the Bond of Qualifying Individual is not required.
Effective Date: 08/19/1997
[BQI's Bond History](#)

Workers' Compensation

This license has workers compensation insurance with the INSURANCE COMPANY OF THE WEST
Policy Number:WVE5028828
Effective Date: 01/01/2015
Expire Date: 01/01/2017
[Workers' Compensation History](#)



CERTIFICATE OF LIABILITY INSURANCE

OP ID: DB

DATE (MM/DD/YYYY)

01/12/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Crosby Insurance, Inc 8181 E. Kaiser Blvd Anaheim Hills, CA 92808 John Sheffield	CONTACT NAME: John Sheffield PHONE (A/C, No, Ext): 714-221-5255 E-MAIL ADDRESS: jsheffield@crosbyinsurance.com PRODUCER CUSTOMER ID #: NPGCO-J	FAX (A/C, No): 714-221-5210
	INSURED NPG, Inc., aka: Nelson Paving & Grading, Goldstar Asphalt Products P.O. Box 1515 Perris, CA 92572	
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Ironshore Specialty Ins Co		
INSURER B: General Ins Co of America		
INSURER C: Liberty Ins Underwriters		
INSURER D: ICW Group		
INSURER E:		
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			AGS0058702	11/15/2015	11/15/2016	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
								\$
B	AUTOMOBILE LIABILITY			24-CC-206754-9 INCL PHYSICAL DAMAGE	11/15/2015	11/15/2016	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS						Comprehensive	\$ 1,000 ded
	<input checked="" type="checkbox"/> NON-OWNED AUTOS						Collision	\$ 1,000 ded
	<input checked="" type="checkbox"/> Hired Phys Dam						\$50,000 MAXIMUM LIMIT	
C	UMBRELLA LIAB			100002437206	11/15/2015	11/15/2016	EACH OCCURRENCE	\$ 5,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						AGGREGATE	\$ 5,000,000
	<input type="checkbox"/> OCCUR							\$
	<input type="checkbox"/> CLAIMS-MADE							\$
	DEDUCTIBLE RETENTION \$							\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WVE5028828 01	01/01/2016	01/01/2017	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				E L EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E L DISEASE - EA EMPLOYEE	\$ 1,000,000
							E L DISEASE - POLICY LIMIT	\$ 1,000,000
E	EQUIPMENT RENTED FROM OTHERS			24-CC-103652-1	11/15/2015	11/15/2016	Limit	500,000
							Ded	1,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Cancelled for non-payment of premium, only 10 days notice will be given. required by written contract, Additional Insured (General and Auto ability), Primary and Non-Contributing (General Liability) and Waiver of subrogation (General and Auto Liability and Workers Compensation) can apply. New Construction exclusion apply. Excess Policy follows form.

CERTIFICATE HOLDER**CANCELLATION****FOR INFO**

For Information Purposes Only
-specific certificates can be
issued upon request-

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

John P. Sheffield

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Legal Name	Registration Number	County	City	Registration Date	Expiration Date
NPG INC	1000002457	RIVERSIDE	PERRIS	06/07/2016	06/30/2017

DIR Registration per California Labor Code 1725.5