# Proposal Package Information Sheet

**Specification No. 1378W**

**McCall Boulevard Pipeline Replacement**

**Addendum No. 1**

**Notice to Bidders:** The attached Proposal Package, when completed by you and returned to this District, constitutes your Bid on this specification. Please do not submit the bound copy of the specifications or addenda with your Bid.

Electronic proposals (bids) for this project to be emailed to eichpera@emwd.org no later than 5:00 p.m., **Monday, August 3, 2020**. Original Bid Bond and attachments to be mailed to the District within that week.

Due to COVID-19 the District is closed to public access; therefore, bids will not be publicly opened. The Preliminary Bid Summary will be posted on the website [www.emwd.org](http://www.emwd.org) no later than **10:00 a.m. Tuesday, August 4, 2020**.

**Fed Ex Bid Bond to:** EMWD, 2270 Trumble Road, Perris, CA, 92570  
**Mail Bid Bond to:** EMWD, P O Box 8300, Perris, CA 92572-8300

**Sign, Complete, and Submit the Following:**

- **Proposal Sheet (C3)** Signature required!
- **Bidding Sheets & Total Bid Price - Unit Price Written In Words, Equipment/Materials List (BS)**
- **Bidder's Experience Record & Resumes of Key Personnel (BR)**
- **Subcontractors List (C5)**
- **Public Works Contractor Registration Extracts (C22) Attach extracts of Bidder & Subs listed on C-5 Designation of Subcontractors form. Go to:** [https://efiling.dir.ca.gov/PWCR/Search](https://efiling.dir.ca.gov/PWCR/Search)
- **Contractor's Licensing Statement (C6)**
- **Non-Collusion Declaration (C7)**
- **Iran Contracting Act Certification (C13) (required if bid is over $1 million)**
- **Cal Osha Form 300A (C16)**
- **Contractor's Cal Osha Compliance History and SIC Code (C17)**
- **Contractor's Sample Certificate of Insurance**
- **Original Bid Bond (BB)**
  - Bid Bond to be signed By You And Your Surety Company—Surety Seal required.  
  - Notary Acknowledgment required for Surety and Contractor

**Please Complete & Sign All Required Areas. Submit and Attach Any Additional Documentation Which Constitutes Your Bid**

**Failure to Complete This Proposal Package May Render Your Bid "Non-Responsive***

*Please Remove This Information Sheet Prior to Submitting Your Bid*
PROPOSAL

The undersigned hereby declares, as Bidder, that the only persons or parties interested in this proposal as principals are those named herein; that no director or any other officer or employee of the Eastern Municipal Water District is in any manner interested directly or indirectly in this proposal or in the profits to be derived from the contract proposed to be taken; that this bid is made without any connection with any person or persons making a bid for the same purpose; that the bid is in all respects fair and without collusion or fraud; that he has read the Notice Inviting Bids (or Bidding Information), Insurance Requirements and the Instructions to Bidders and agrees to all the stipulations contained herein; that he proposes and agrees that if his bid as submitted in the attached sheets, be accepted he will contract in the form so approved and furnish all items called for in accordance with the provisions of said approved form of Agreement, Insurance Requirements and the Specifications and to deliver the same within the time stipulated therein; and that he will accept in full payment therefore the prices named in said Bid Sheet.

The Bidder further agrees, that upon receipt of written notice of the acceptance of this proposal within 60 days after the day of opening bids (unless otherwise specified in the Notice Inviting Bids or Bidding Information) he will execute and return the Contract in accordance with the proposal as accepted and furnish the required bond(s) within SEVEN (7) days from the date of mailing the Notice of Acceptance of Proposal to him at his address given below, or within such time as allowed by the Engineer; and that upon his failure or refusal to do so within the said time, then the certified or cashier's check or bond accompanying this bid shall become the property of and be retained by the Eastern Municipal Water District as liquidated damages for such failure or refusal, and shall be deposited with the Treasurer of said Eastern Municipal Water District as monies belonging to the Eastern Municipal Water District; provided, that if said Bidder shall execute the Contract and furnish the required bond within the time aforesaid, his check or bond shall be returned to him thereafter.

The Bidder further declares that the surety or sureties named in the attached sheet have agreed to furnish bond in form and amount set forth in the accompanying Notice Inviting Bids (or Bidding Information) and paragraph B-6 of the Instructions to Bidders, in the event contract is awarded on basis of this proposal.

Company: CCL CONTRACTING INC
Address: 1938 DON LEE PL. ESCONDIDO CA 92029
By: Bryan Lusky (Printed Name) (Name should appear below)
Date: 8/3/20
(Signature of Owner or Officer required)

<table>
<thead>
<tr>
<th>Name(s) and Title of Member of Firm or Office of Corporation authorized to enter into a binding Contract:</th>
<th>Address (if different from above)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bryan Lusky</td>
<td></td>
</tr>
<tr>
<td>Tom Carmichael</td>
<td></td>
</tr>
</tbody>
</table>

For further details on this proposal, please contact:

<table>
<thead>
<tr>
<th>Name:</th>
<th>Address:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address:</td>
<td>Telephone:</td>
</tr>
</tbody>
</table>

C3-1
00024 Proposal (7 day)
The Contractor shall construct the project under these Specifications all in conformance with the Contract Drawings listed in Section P and these Specifications.

The District reserves the right to:

A. Accept or reject any or all bids on this specification;
B. Award Contract to the lowest qualified bidder, based on the total bid price;
C. Waive any defects and informalities.

The District shall be the final authority with regard to whether a bid is responsive to the call for bids and to whether a bidder is a responsible bidder under the conditions of his bid, or for any reason.

The total contract price shall include all work, materials and equipment needed to complete the project as defined in the General Conditions, Section F. The bidder shall include costs for such other items in the most appropriate category (bid item).

TO BE INSTALLED:

The District will furnish the following item(s) to be installed by the Contractor:

Meter Boxes and Lids to replace pre-existing damaged meter boxes and lids per SC-53

The Contractor shall pick up all furnished items at the District yard at 2270 Trumble Road, Perris, CA. Furnished items will be loaded onto the Contractor’s truck by the District.
<table>
<thead>
<tr>
<th>Bid Item</th>
<th>Qty</th>
<th>Unit</th>
<th>Description</th>
<th>Unit Price (Figures)</th>
<th>Total Amount (Figures)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>LS</td>
<td>Mobilization and Approved: Bonds, Insurance, Schedule of Values (see Section 01026) and Preliminary Project Schedule (PPS) (see section 01310)</td>
<td>$ PRESET</td>
<td>$ 110,000</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>LS</td>
<td>Furnish and install 12-inch diameter C-900 PVC potable water pipeline including shoring, excavation, bedding, backfill, valving, appurtenances, clearing, grubbing, replacement of landscaping and replacement of irrigation, pressure testing, disinfection trench and pipeline dewatering, highlining, traffic control, signs, abandonment of the existing 12-inch and 8-inch pipe, all labor, materials and equipment; as shown on the contract drawings and specifications complete and in place. Pavement removal, replacement, and restoration, including grind and overlay, disposal or recycling of pavement productions, aggregate base, compaction, signing and striping, removal and replacement of curb, gutter, and sidewalk, all labor, materials and equipment; per the City’s encroachment permit and as shown on the contract drawings and specifications complete and in place.</td>
<td>$ Lump Sum</td>
<td>$ 2,640,000</td>
</tr>
</tbody>
</table>

Two million six hundred forty thousand dollars (words)
**EASTERN MUNICIPAL WATER DISTRICT**
**SPECIFICATION NO. 1378W**
**MCCALL BOULEVARD PIPELINE REPLACEMENT PROJECT**

**BIDDING SHEETS**

<table>
<thead>
<tr>
<th>Bid Item</th>
<th>Qty</th>
<th>Unit</th>
<th>Description (Unit Price Written in Words)</th>
<th>Unit Price (Figures)</th>
<th>Total Amount (Figures)</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>1</td>
<td>LS</td>
<td>ADDITION OR DEDUCTION</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Zero</strong></td>
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<td></td>
<td></td>
<td></td>
<td><strong>(words)</strong></td>
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<td></td>
<td></td>
<td><strong>Circle one (If applicable):</strong></td>
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<td></td>
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<td></td>
<td><strong>Addition (+)</strong></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td><strong>Deduction (-)</strong></td>
<td>$ 0</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td><strong>(words)</strong></td>
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</table>

**TOTAL BID (Basis of award)** $ 2,750,000
EASTERN MUNICIPAL WATER DISTRICT
SPECIFICATION NO. 1378W
MCCALL BOULEVARD PIPELINE REPLACEMENT PROJECT

BIDDING SHEETS

**Addition or Deduction:** Provision is made here for the bidder to include an addition/deduction in their bid, *if desired*, to reflect any last minute adjustments in prices. The addition/deduction, if made, will be proportionately applied to item(s) [2] (fill in) and reflected in the unit prices for payment purposes. If the addition/deduction affects more than one bid item, the proportionate application of the addition/deduction shall be mutually agreed upon by the Contractor and the District at the prejob.

<table>
<thead>
<tr>
<th>Addenda and/or Letter of Clarification</th>
</tr>
</thead>
<tbody>
<tr>
<td>By submitting a bid, Bidder certifies that any addenda and letters of clarification issued to these specifications, whether acknowledged or not below, shall be made a part of the contract. Bidder further agrees to perform all labor and services and furnish all materials, tools and appliances necessary for completing the work called out in the addenda or letter of clarification.</td>
</tr>
</tbody>
</table>

| Addenda received: |   |   |   |
| Letter of Clarification received: |   |   |   |

Person who inspected site of the proposed work as an employee of your firm: *(Representative must have inspected the jobsite and be an employee on the company’s payroll to be considered a responsive bidder)*

[Signature]

*(Name)*

7/29/2020

*(Date of Inspection)*
ADDENDUM NO. 1
EQUIPMENT AND MATERIAL

Identify the name of the manufacturer for the equipment and/or material items listed below, if not specified. Acceptable manufacturers listed shall be utilized by the Contractor in his construction. No substitution of the Contractor's listed manufacturer will be permitted without written justification and the approval of the District. **PRODUCTS OF MANUFACTURERS LISTED AS EQUALS TO THOSE SPECIFIED MUST BE SUBMITTED FOR REVIEW AND APPROVAL BY THE DISTRICT NOT LATER THAN THE TENTH (10TH) DAY PRECEDING THE DATE SET FOR RECEIPT OF BIDS.**

**FAILURE TO PROVIDE THIS INFORMATION MAY RENDER YOUR BID NON-RESPONSIVE**

<table>
<thead>
<tr>
<th>ITEM</th>
<th>MANUFACTURER</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-inch, 1.5-Inch and 2-inch Cross-Linked Polyethylene Pipe</td>
<td>Rehau Construction LLC</td>
</tr>
<tr>
<td>12-inch Double Ball Expansion Joints</td>
<td>EBAA Iron</td>
</tr>
</tbody>
</table>

**NOTE**
Please refer to Special Conditions SC-12 for Specified Equipment with No Equal Substitution.
EASTERN MUNICIPAL WATER DISTRICT  
SPECIFICATION NO. 1378W  
MCALL BOULEVARD PIPELINE REPLACEMENT PROJECT

BIDDER’S 8-YEAR EXPERIENCE RECORD & RESUMES OF KEY PERSONNEL

All bidders must provide a detailed 8-year experience record showing successful completion, as a Classification A – General Engineering Contractor and/or Classification C-34 – Pipeline Contractor, of at least (3) similar projects within the last (8) years as follows:

A. Contract Type - Public Works  
B. One Million Dollars or larger Contract Value  
C. Installation of 12-inch (and larger) C-900 PVC pipeline and 12-inch and larger CML&C pipeline experience

Additionally, bidders must include resumes of key personnel proposed to work on this project when submitting your bid. This information will be critical in meeting requirements as a responsible bidder.

Failure to submit any of the above-mentioned information with your bid “may” deem your bid non-responsive.
## Detailed Experience Record

**PLEASE USE ADDITIONAL SHEETS**

<table>
<thead>
<tr>
<th>Year</th>
<th>Type/Description of Work</th>
<th>Value of Work Performed</th>
<th>Location of Work (City)</th>
<th>Engineer / Contact Person Address &amp; Phone #</th>
<th>Owner / Contact Person Address &amp; Phone #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Helix Water District</td>
<td>La Mesa</td>
<td>Water</td>
<td>$1,242,143</td>
<td>2/3/12</td>
<td>Ernie</td>
</tr>
<tr>
<td>----------------------</td>
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<td>------------</td>
<td>--------</td>
<td>-------</td>
</tr>
<tr>
<td>City of Carlsbad</td>
<td>Carlsbad</td>
<td>Water</td>
<td>$2,846,557</td>
<td></td>
<td>Clint Baze</td>
</tr>
<tr>
<td>Rincon del Diablo MWD</td>
<td>Escondido</td>
<td>Water</td>
<td></td>
<td></td>
<td>Clint Baze</td>
</tr>
<tr>
<td>City of Huntington Beach</td>
<td>2000 Main Street</td>
<td>Water, Sewer, &amp; Street Improvements</td>
<td>$6,436,798</td>
<td>(NOC 9/13/13)</td>
<td>Andrew Ferrigno</td>
</tr>
<tr>
<td>Fallbrook P U D</td>
<td>Fallbrook</td>
<td>Water</td>
<td>$348,210</td>
<td>9/23/13</td>
<td>Jack Bebee</td>
</tr>
<tr>
<td>Rancho California Water District</td>
<td>42135 Winchester Rd</td>
<td>Install 1966LF 36&quot; CML&amp;C</td>
<td></td>
<td></td>
<td>Cooly Smith</td>
</tr>
<tr>
<td>South Coast Water District</td>
<td>Dana Point</td>
<td>Water, Sewer, Storm Drain</td>
<td>$2,609,796</td>
<td></td>
<td>John</td>
</tr>
<tr>
<td>Santa Fe Irrigation District</td>
<td>Rancho Santa Fe, Ca 92067</td>
<td>Water</td>
<td>$1,475,000</td>
<td>11/21/13</td>
<td>Bill Hunter</td>
</tr>
<tr>
<td>Santa Fe Irrigation District</td>
<td>Rancho Santa Fe, Ca 92067</td>
<td>Water</td>
<td>$3,461,200</td>
<td>3/28/14</td>
<td>Bill Hunter</td>
</tr>
<tr>
<td>Rincon del Diablo MWD</td>
<td>Escondido</td>
<td>Water</td>
<td>$588,700</td>
<td>6/18/14</td>
<td>Clint Baze</td>
</tr>
<tr>
<td>City of Huntington Beach</td>
<td>2000 Main Street</td>
<td>Water, Sewer, &amp; Street Improvements</td>
<td>$6,436,798</td>
<td>(NOC 9/13/13)</td>
<td>Andrew Ferrigno</td>
</tr>
<tr>
<td>Fallbrook P U D</td>
<td>Fallbrook</td>
<td>Water</td>
<td>$348,210</td>
<td>9/23/13</td>
<td>Jack Bebee</td>
</tr>
<tr>
<td>Rancho California Water District</td>
<td>42135 Winchester Rd</td>
<td>Install 1966LF 36&quot; CML&amp;C</td>
<td></td>
<td></td>
<td>Cooly Smith</td>
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<tr>
<td>South Coast Water District</td>
<td>Dana Point</td>
<td>Water, Sewer, Storm Drain</td>
<td>$2,609,796</td>
<td></td>
<td>John</td>
</tr>
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<td>Rancho Santa Fe, Ca 92067</td>
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<td>$1,475,000</td>
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<tr>
<td>Rincon del Diablo MWD</td>
<td>Escondido</td>
<td>Water</td>
<td>$588,700</td>
<td>6/18/14</td>
<td>Clint Baze</td>
</tr>
</tbody>
</table>

City of Carlsbad
1635 Faraday Ave
Carlsbad, CA 92008
Joseph.mcmahon@carlsbadca.gov

City of Huntington Beach
2000 Main Street
Huntington Beach CA 92648
Springdale water and street improvements 2-Deep Wells $6,436,798 (NOC 9/13/13)

Water, Sewer, & Street Improvements
30" CML&C (12000 LF)
10" VCP (2100 LF) 30" casing (60 LF)

Install 1966LF 36" CML&C
Install 985 LF of 24" CML&C
Install 7850 CY Soil Cement
Grading improvement 98 acres
Discharge structures & flow control stations
$2,524,871 NOC 2/21/14

Water, Sewer, Storm Drain
8" & 10" PVC (6,057 LF)
8", 12", 15" Sewer (1170 LF)
24", 36", 48" RCP (1024LF) NOC 4/1/14

Water
Group 2 Pipeline Replacement
Project (four locations) NOC 7/17/14

Water
Pressure Reducing Stations (eight each)
1050 LF of 8" pipeline NOC 3/18/15

Northwest Quadrant recycled water
4" & 6" 3750LF NOC 9/26/14
<table>
<thead>
<tr>
<th>Project Details</th>
<th>Project Details</th>
<th>Project Details</th>
<th>Project Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inland Empire Utilities Agency</td>
<td>Fontana</td>
<td>Water</td>
<td>$10,378,000 Adam Almasri 6075 Kimball Ave 36&quot;-42&quot; CML&amp;C (13,057 LF) 949 993-1622 Chino Hills, CA 24&quot; CML&amp;C (5,124 LF) <a href="mailto:aalmasri@ieua.org">aalmasri@ieua.org</a> Wineville Extension Rec Water Seg A #1401 NOC 8/7/15</td>
</tr>
<tr>
<td>Location</td>
<td>City</td>
<td>Project</td>
<td>Category</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>-----------------</td>
<td>---------------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Irvine Ranch Water District</td>
<td>Irvine</td>
<td>#1705</td>
<td>Water</td>
</tr>
<tr>
<td>15600 Sand Canyon Ave</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Irvine, CA 92619-7000</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>City of Huntington Beach</td>
<td>Westminster</td>
<td>#1801</td>
<td>Water</td>
</tr>
<tr>
<td>2000 Main Street</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Huntington Beach, CA 92648</td>
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<td></td>
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<tr>
<td>City of Escondido</td>
<td>Brine Line</td>
<td>#1802</td>
<td>Sewer</td>
</tr>
<tr>
<td>201 North Broadway</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Escondido, Ca</td>
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<tr>
<td>Helix Water District</td>
<td>Lemon Grove</td>
<td>#1902</td>
<td>Water</td>
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<tr>
<td>7811 University Ave</td>
<td></td>
<td></td>
<td>Valve Replacement</td>
</tr>
<tr>
<td>La Mesa, Ca</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Helix Water District</td>
<td>El Cajon</td>
<td>#1903</td>
<td>Water</td>
</tr>
<tr>
<td>7811 University Ave</td>
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<td>La Mesa, Ca</td>
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<td></td>
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<tr>
<td>Sweetwater Authority</td>
<td>Chula Vista</td>
<td>#1904</td>
<td>Water</td>
</tr>
<tr>
<td>505 Garrett Ave</td>
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<td></td>
<td></td>
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<tr>
<td>Chula Vista, CA</td>
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<td></td>
</tr>
</tbody>
</table>
RESUMES OF KEY PERSONNEL
(ATTACH HERE)
RODNEY L. CHILCOTE
14224 EAGLE MINE DRIVE
POWAY, CA 92064
(760) 525-1883
RCHILCOTE@YAHOO.COM

PROFESSIONAL EXPERIENCE

CCL Contracting, Inc.
Estimator / Project Manager  
Sep 2009 - Present
- Estimator and Project Manager for public and private works projects for underground utilities, including Jamacha Road consisting of 27,000 LF of 36-54" CMLC Steel Waterline at 14.2 million for Otay Water District, Yorktown 36"-48" CMLC Steel Waterline Rehab for City of Huntington Beach at 2.6 million, Pipeline Project 2242 with 7,500 LF of 8"-10" PVC Water at 1.2 million for Helix Water District, Springdale Street 36" CMLC Steel Pipe Waterline and Street Rehab for the city of Huntington Beach at 6.4 million, Dana Point Town Center - 2,000 LF of 18"-60" RCP Storm Drain, 3,000 LF of 8"-15" PVC Sewer, 7,000 LF of 8"-10" PVC Water at 4.8 million for So. Coast Water District, Wineville Segment A - 19,000 LF of 36"-54" CMLC Steel Pipe at 10.7 million for Inland Empire Utilities Agency (IEUA), Tesoro Zone II And Zone B - 15,400 LF of 20"-24" CMLC Steel Pipe for domestic and reclaim water, 1,500 LF of 18" PVC sewer and bypass, grading and roadway improvements at 4.9 million for Santa Margarita Water District

Chilcote & Company
President – Construction Management  
Aug 2005 - Sep 2009
- Manages and directs day-to-day operations
- Prepares budgets and feasibility studies
- Manages and monitors contractors and consultants selected to perform, design and inspect the project’s site developments from earthwork thru building improvements
- Oversees development of bid documents, contractor solicitations, and bid results and contract administration for both private and public works improvements
- Reviews, negotiates and mitigates contractor initiated change orders
- Develops schedules for construction activities

J.T. Krueer & Company
Manager – Estimating & Technical Services  
Feb 2005 – Aug 2005
- Acts as Chief Estimator
- Manages the Estimating & Technical Services staff
- Prepares budgets and feasibility studies
- Oversees development of bid documents, contractor solicitations, and bid results
- Integrates successful bid awards’ information to Contract Administrator

Project Manager, Senior Estimator  
1999 – Jan 2005
- Director of construction activities for the Rancho Cielo Estates project, including management, administration and coordination of all contractors and consultants actively working on this project Manages the Estimating & Technical Services staff
- Construction manager for the Rancho Santa Fe Fire Station No. 4 (approx. 10,000 sf / $4,150,000 facility) and Cielo Clubhouse (approx. $7,000,000 facility) in the Rancho Cielo Estates project
- Performs on-site management of grading, underground utilities, surface improvements and landscaping phases as Senior Construction Manager for San Diego Spectrum (a $15 million Lennar Partners project)
- Manages and monitors contractors and consultants selected to perform, design and inspect the project’s site improvements
- Develops schedules and budgets for construction activities
- Reviews, negotiates and mitigates contractor initiated change orders
Rodney L. Chilcote
(760) 525-1883
rchilcoteCCL@yahoo.com

Wier Construction
Project Superintendent
1998 - 1999
• Managed the schedule of the Rancho Santa Fe Road widening project for grading, underground and related improvements (this project was for the City of Encinitas) which encompassed underground utility locations to accommodate widening, surface improvements and cast-in-place retaining walls

Vadnais Corporation
Project Engineer and Manager
1995 – 1998
• Estimated and managed large public and private projects for underground, including Balboa Sinkhole Project (a $4.2 million emergency repair project for CalTrans) consisting of a 24-hour operation to replace a 108” CMP storm drain that failed
• Performed as Estimator, Project Manager and/or Contract Administrator for multiple projects, including Miramar Pipeline Project at $10.2 million, Irvine Sewer South Project at $2 million and Convention Center Water Improvements for the City of San Diego at $2 million

Chilcote, Incorporated
Vice President of Operations
1981 – 1995
• Oversaw all aspects of private and public projects, including the Ramona Pipeline for San Diego County Water Authority at $10.5 million, Highway-52 West at $16 million for CalTrans, the Temecula Creek Channel improvements at $11 million, Pomerado Business Park mass grading project at $25 million, the First San Diego river project for the City of San Diego at $25 million and the Morena Boulevard Sewer for the City of San Diego at $20 million
• Worked and participated closely with Project Manager, Superintendent and Contract Administrator
• Started as general labor for home building division, equipment repair shop
• Promoted multiple times to increasingly more responsible positions including Heavy Equipment Mechanic and Operator to Senior Estimator for underground and grading
Thomas Carmichael

Qualifications
Over 40 years of experience in underground construction of which 33 years have been in supervision. Experienced in all aspects of underground construction including installation of major aqueducts, small and large diameter sewer pipeline projects, water aqueduct encasements, storm drain systems (open concrete channel and box culverts) design and installation of steel liner systems used in the rehabilitation of major water lines as well as micro-tunneling.

Education
Apprenticeship Training: Local 12, Operating Engineers 6/78-6/82
Competent Person Training Seminar: Association of General Contractors 1988
Traffic Control Seminar: City Of San Diego 1996
Crane Safety Seminar: St. Paul’s Insurance 2001
Construction Safety Management and Regulatory Compliance Training: City of San Diego 2001
First Aid Training: On going, re-certified every three years
CPR Training: On going, re-certified every year

Employment
2002-Present Superintendant/President, CCL Contracting Inc
Responsible for fieldwork, scheduling, public liaison, and safety.

2001-2002 Superintendent, Vido Artukovich & Son, Inc
Responsible for organizing daily schedules for maximum productivity, supervision of 18 employees, safety management for crew and public, order all necessary materials and coordinate subcontractors.

1987-2001 Superintendent, Vadnais Corporation
Responsible for organizing daily schedules for maximum productivity on 2-5 projects per year ranging in size from one to ten million dollars. Responsible for mobilization, establishing accounts and crew set up for work out region. Maintain and maximize budget expectations. Supervision of crew sizes 15 to 25, safety management for crew and public, ordering of all necessary materials and subcontractors. Design of specialized equipment for lining division.

1984-1987 Foreman, Vido Artukovich & Son, Inc.
Running crews for installation of sewer and water pipeline projects.
1982-1984 Operating Engineer, Various Companies
Responsible for running heavy equipment as specified by foreman or superintendent at job site.

Complete apprenticeship training for Operating Engineers.
Russell Medina
(Foreman/Safety Manager)

Qualifications
Over 15 years of experience in underground construction of which 5 years have been in supervision and Safety. Experienced in all aspects of underground construction including installation of small and large diameter waterlines, small and large diameter sewer pipeline projects, storm drain systems.

Education
Apprenticeship Training: Laborers Union
40 hour HAZWOPER: 2012
24 Hour SWPPP: AGC California 2009
First Aid Training: On going, re-certified every three years
CPR Training: On going, re-certified every year
Confined space Training: NUCA 2010
Competent person Training: AGC 2007
Rail Road Safety Training: 2005

Employment
2002-Present Foreman/ Safety Manager, CCL Contracting Inc
Responsible for laborers and operators in the completion of daily field work, implementing daily traffic control, public liaison, and safety. Conduct weekly safety meetings.

2001-2002 Laborer, Vido Artukovich & Son, Inc
Set up traffic control, install shoring jacks, rig pipe, asphalt paving.
LIST OF DESIGNATED SUBCONTRACTORS

<table>
<thead>
<tr>
<th>SPEC #:</th>
<th>1378 W</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROJECT TITLE:</td>
<td>McCall Blvd. Pipeline Replacement</td>
</tr>
<tr>
<td>NAME OF CONTRACTOR:</td>
<td>OCL Contracting Inc</td>
</tr>
</tbody>
</table>

In compliance with the provisions of Sec. 4100-4111, inclusive, of the Public Contract Code of the State of California, and any amendments thereof, each bidder shall set forth: the name, location of the place of business, license number, portion of the work which will be done by each subcontractor who will perform work or labor or render service to the Contractor in or about the construction of the work or improvement in an amount in excess of one-half of one percent (1/2 of 1%) of the Contractor's total bid. Each portion of Subcontracted work noted in the below table must be specific and contain all major activities associated with completion of the project, outside of the services provided by the bidding Contractor. Ambiguous and/or incomplete Subcontracted work information may deem the bid nonresponsive. Each subcontractor shall possess, both at the time the bid is submitted and at all times when work is performed, a valid contractor's license for the appropriate classification necessary to perform the work for which that subcontractor is listed.

**BIDDER SHALL PROVIDE THE FOLLOWING INFORMATION:**
Company Name, Business Address, Email Address, License No., Contractor Registration No., Subcontract Work, and % Of Total Bid

*PLEASE WRITE LEGIBLY*

<table>
<thead>
<tr>
<th>LICENSED SUBCONTRACTOR'S NAME, BUSINESS ADDRESS, &amp; EMAIL ADDRESS</th>
<th>LICENSE #</th>
<th>SUBCONTRACT WORK (Be Specific)</th>
<th>% OF TOTAL BID</th>
</tr>
</thead>
</table>
| **Company Name:** ALL AMERICAN ASPHALT  
Address: P.O. Box 2229 Corona, CA  
Email Address: blot470@allamerican.com | License #: 267073  
DIR Registration #: 100001051 | ASPHALT GRIND & CAP | 5% |
| **Company Name:** CELL CRET  
Address: 135 E. Railroad Ave LA  
Email Address: | License #: 243404  
DIR Registration #: 1000000262 | CELLULAR CONCRETE FOR PIPE ABANDONMENT | .9% |
<table>
<thead>
<tr>
<th>LICENSED SUBCONTRACTOR'S NAME, BUSINESS ADDRESS, &amp; EMAIL ADDRESS</th>
<th>LICENSE #</th>
<th>SUBCONTRACT WORK (Be Specific)</th>
<th>% OF TOTAL BID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name: <strong>Bullseye Boring</strong> 915 Douglas St. CA. Calimesa</td>
<td>License #: 926356</td>
<td>Bore and install 1&quot; + 2&quot; PIPES</td>
<td>2%</td>
</tr>
<tr>
<td>Address:</td>
<td>DIR Registration #: 1000040255</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address: <strong><a href="mailto:Shelly@bullseyeboring.com">Shelly@bullseyeboring.com</a></strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Company Name: <strong>Techno Coatings</strong> 1391 Allec St. CA. 92805</td>
<td>License #: 296517</td>
<td>Painting</td>
<td>.8%</td>
</tr>
<tr>
<td>Address:</td>
<td>DIR Registration #: 100005841</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(Do not list alternative subcontractors for the same work) (Use additional pages if needed)
PUBLIC WORKS CONTRACTOR REGISTRATION
(Pursuant to SB 854)

This project is subject to compliance monitoring and enforcement by the Department of Industrial Relations.

Pursuant to Section 1771.1 of the Labor Code, no contractor or subcontractor shall be qualified to bid on, be listed in a bid proposal pursuant to Section 4104 of the Public Contract Code, or engage in the performance of any contract for public work unless currently registered to perform public work pursuant to Section 1725.5 of the Labor Code. It shall not be a violation of this section for an unregistered contractor to submit a bid that is authorized by Section 7029.1 of the Business and Professions Code or by Sections 10164 or 20103.5 of the Public Contract Code, provided the contractor is registered to perform public work pursuant to Section 1725.5 at the time the contract is awarded.

BIDDERS AND THEIR SUBCONTRACTORS (listed on the Designation of Subcontractors List C-05) are to provide an extract (pdf or excel) at time of bid showing active registration from the Public Works Contractor Registration online registration at https://cadir.secure.force.com/ContractorSearch

**********************************************************************************************************************************************

SUBMIT BIDDER & SUBCONTRACTORS CONTRACTOR REGISTRATION EXTRACTS WITH BID PROPOSAL (Either pdf or Excel Format)
**********************************************************************************************************************************************

Rev: 6/3/19  C22-1  00057 Contractor Registration
CONTRACTOR'S LICENSING STATEMENT

The undersigned is licensed in accordance with the laws of the State of ___________ providing for the registration of contractors. The representations made herein and in the proposal documents are made under penalty of perjury. The undersigned is hereby representing that he is properly licensed both at the time that he submits a bid as well as at the time the contract is awarded, if the contract is awarded to the undersigned.

**CONTRACTOR'S CLASSIFICATION** A - GENERAL ENGINEERING

**LICENSE NUMBER** 798819  **TYPE** A  **EXPIRATION DATE** 8/31/21

A. INDIVIDUAL CONTRACTOR

| NAME OF INDIVIDUAL CONTRACTOR: |
| BUSINESS ADDRESS: |
| PHONE NUMBER: |
| SIGNATURE OF OWNER: |

B. FIRM OR PARTNERSHIP

| NAME OF FIRM OR PARTNERSHIP: |
| BUSINESS ADDRESS: |
| PHONE NUMBER: |
| SIGNATURE(S) & TITLE OF MEMBERS SIGNING ON BEHALF OF THE PARTNERSHIP: |
| SIGNATURE:  TITLE: |
| SIGNATURE:  TITLE: |
| SIGNATURE:  TITLE: |

C. CORPORATION

| NAME OF CORPORATION: CCL CONTRACTING INC |
| BUSINESS ADDRESS: 1938 NON LES PLACE |
| PHONE NUMBER: 760 743-2254 |
| SIGNATURE OF AUTHORIZED OFFICER OF CORPORATION: |
| SIGNATURE:  TITLE: Secretary |

C6-1  00030 Contractors Licensing Statement
NON-COLLUSION DECLARATION

TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID

The undersigned declares:

I am the Secretary of CCL CONTRACTING INC.,
the party making the foregoing bid.

The bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation. The bid is genuine and not collusive or sham. The bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham bid. The bidder has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else to put in a sham bid, or to refrain from bidding. The bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the bid price of the bidder or of any other bidder, or to fix any overhead, profit, or cost element of the bid price, or of that of any other bidder. All statements contained in the bid are true. The bidder has not, directly or indirectly, submitted his or her bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, to any corporation, partnership, company, association, organization, bid depository, or to any member or agent thereof, to effectuate a collusive or sham bid, and has not paid, and will not pay, any person or entity for such purpose.

Any person executing this declaration on behalf of a bidder that is a corporation, partnership, joint venture, limited liability company, limited liability partnership, or any other entity, hereby represents that he or she has full power to execute, and does execute, this declaration on behalf of the bidder.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on 8/3/2020 [date], at ESCONDIDO [city], CALIFORNIA [state]

Signed: ____________________________

Name: Bryan Lank
(Print Name Here)

00032 Non-Collusion Declaration
WORKERS' COMPENSATION INSURANCE CERTIFICATE

The Contractor shall execute the following form as required by the California Labor Code, Sections 1860 and 1861:

I am aware of the provisions of Section 3700 of the Labor Code which require every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that code, and I will comply with such provisions before commencing the performance of the work of this contract.

Date: 8/3/2026

CC2 CONTRACTING INC
(Contractor)

By: 
(Signature)

Secretary
(Title)

Rev: 11/15

C11-1 00042 Worker's Compensation Certificate
IRAN CONTRACTING ACT CERTIFICATION

Pursuant to the Iran Contract Act of 2010 (Public Contract Code 2200-2208), Vendors/Bidders are ineligible to bid on or submit a proposal for any contract with a public entity for goods or services of one million dollars ($1,000,000) or more if the Vendor/Bidder engages in investment activities in Iran.

MUST BE SUBMITTED WITH BID PROPOSAL IF BID AMOUNT IS $1,000,000 OR MORE

Prior to bidding on, submitting a proposal, or executing a contract or renewal for a public entity contract for goods or services of $1,000,000 or more, a vendor must either: a) certify it is not on the current list of persons engaged in investment activities in Iran created by the California Department of General Services ("DGS") pursuant to Public Contract Code section 2203(b) and is not a financial institution extending $20,000,000 or more in credit to another person, for 45 days or more, if that other person will use the credit to provide goods or services in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS; or b) demonstrate it has been exempted from the certification requirement for that solicitation or contract pursuant to Public Contract Code section 2203(c) or (d).

To comply with this requirement, please insert your vendor or financial institution name and Federal ID Number (if available) and complete one of the options below. Please note: California law establishes penalties for providing false certifications, including civil penalties equal to the greater of $250,000 or twice the amount of the contract for which the false certification was made, contract termination, and three-year ineligibility to bid on contracts. (Pub. Cont. Code § 2205.)

**OPTION #1 - CERTIFICATION**

I, the official named below, certify I am duly authorized to execute this certification on behalf of the vendor/financial institution identified below, and the vendor/financial institution identified below is not on the current list of persons engaged in investment activities in Iran created by DGS and is not a financial institution extending twenty million dollars ($20,000,000) or more in credit to another person/vendor, for 45 days or more, if that other person/vendor will use the credit to provide goods or services in the energy sector in Iran and is identified on the current list of persons engaged in investment activities in Iran created by DGS.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

<table>
<thead>
<tr>
<th>Vendor Name/Financial Institution (Printed)</th>
<th>Federal ID Number (or n/a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCL CONTRACTING INC</td>
<td>33-0970168</td>
</tr>
</tbody>
</table>

By (Authorized Signature)  

Printed Name and Title of Person Signing  

Bryan Lusky  

Secretary  

Date Executed  

8/3/2020  

C13-3  00046 Iran Contracting Act Certification
OPTION #2 – EXEMPTION
Pursuant to Public Contract Code sections 2203(c) and (d), a public entity may permit a vendor/financial institution engaged in investment activities in Iran, on a case-by-case basis, to be eligible for, or to bid on, submit a proposal for, or enters into or renews, a contract for goods and services.

If you have obtained an exemption from the certification requirement under the Iran Contracting Act, please fill out the information below, and attach documentation demonstrating the exemption approval.

<table>
<thead>
<tr>
<th>Vendor Name/Financial Institution (Printed)</th>
<th>Federal ID Number (or n/a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>By (Authorized Signature)</td>
<td></td>
</tr>
<tr>
<td>Printed Name and Title of Person Signing</td>
<td>Date Executed</td>
</tr>
</tbody>
</table>
### OSHA's Form 300 (Rev. 01/2004)
#### Log of Work-Related Injuries and Illnesses

You must record information about every work-related death and about every work-related injury or illness that involves days away from work, restricted work activity, or job transfer, or permanent job disability. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.6 through 1904.12. Fail to use this form for a single case if you need to. You must file an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

#### Identify the person
- **(A)** Case no.
- **(B)** Employee’s name
- **(C)** Job title (e.g., Welder)

#### Describe the case
- **(D)** Date of injury or onset of illness
- **(E)** Where the event occurred (e.g., Cutting deck north end)
- **(F)** Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from arc flash)

#### Classify the case
- **(G)** Death
- **(H)** Days away from work
- **(I)** Job transfer or restriction
- **(J)** Other recordable cases
- **(K)** Remained at work
- **(L)** On job transfer or restriction

#### Enter the number of days the injured or ill worker was:
- **(M)** Check the "injury" column or choose one type of illness

---

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: U.S. Department of Labor, DOL/OAP/OE, Office of Statistical Analysis, Room N3064, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

---

Page totals

---

Be sure to transfer these totals to the Summary page (Form 300A) before you post a.
OSHA's Form 301
Injury and Illness Incident Report

This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the accompanying Summary, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent form. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year in which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Information about the employee

1) Full name: Carlos Perez
2) Street: 2650 Sanchea RD
3) City: El Cajon
4) Date of birth: 4/14/1976
5) Sex: Male
6) Name of physician or other health care professional: Sharp
7) Facility: Sharp
8) Was employee treated in an emergency room? Yes
9) Was employee hospitalized overnight as an in-patient? No

Information about the case

10) Case number from the Log: 1
11) Date of injury or illness: 4/20/20
12) Time employee began work: 7:00 AM
13) Time of event: 10:15 AM
14) What was the employee doing just before the incident? "In trench, make Grade"
16) What was the injury or illness? Tell us the part of the body that was affected and how it was affected: "Back".
17) What object or substance directly harmed the employee? Examples: "Concrete floor"; "Chlorine"; "Radic for saw". If this question does not apply to the incident, leave it blank.
18) If the employee died, when did death occur? Date of death: __/__/__

Complied by Bryan Casey
Secretary
Title: Secretary
Phone: 760.743.2234
Date: 4/20/20

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Public reporting burden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the Washington, DC 20210. Do not send the completed forms to this office.
OSHA's Form 300A  (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

<table>
<thead>
<tr>
<th>Number of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of deaths</td>
</tr>
<tr>
<td>(3)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of days away from work</td>
</tr>
<tr>
<td>(6)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Injury and Illness Types</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of...</td>
</tr>
<tr>
<td>(1) Injuries</td>
</tr>
<tr>
<td>(2) Skin disorders</td>
</tr>
</tbody>
</table>

Sign here

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

[Signature]

[Date]
Bidders shall complete and submit the attached C-17 form with the Proposal Package at time of bid

Failure to fully divulge, complete and submit this form “may” deem your bid non-responsive
C-17 Contractor’s Cal/OSHA Compliance History and SIC Code
THIS DOCUMENT IS TO BE SUBMITTED WITH THE PROPOSAL PACKAGE AT TIME OF BID

Bid Date: 8/3/2020
Contractor’s Standard Industry Code: [BLANK]

Specification No. 1378W Project Name: McCall Blvd Pipeline Replacement
Contractor name: CCL Contracting Inc
Contractor Address: 1938 Don Lee Pl., Escondido, CA, 92029
Contractor License No. 798819 Phone No: 760 743-2254
Contact Person: Bryan Lushy

Please answer the following questions:

1. Has the Contractor been cited by Cal/OSHA or any regulatory agency for a violation related to safety or environmental issues within the past seven (7) years? No ☐ Yes ☑

   If yes, please attach all documentation specific to each violation and what actions have been taken to ensure that there is not a repeat violation.

2. Has the Contractor had a fatality or serious incident per Cal/OSHA on a jobsite within the past ten (10) years? No ☐ Yes ☑

   If yes, please attach all documentation specific to each violation and what actions have been taken to ensure that there is not a repeat violation.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Contractor’s Representative signature: [Signature] Date: 8/3/20

Failure to fully divulge, complete and submit this form “may” deem your bid non-responsive

FOR EMWD USE ONLY:

Approved: No ☐ Yes ☐

Reviewed by Risk Management (signature required) [Signature] Date:

Return to (Field Eng.CAR)

By:

cc: Construction Administrator
File: C-17 Contractor’s Compliance History

C17-2 00052 CalOsha Compliance History & SIC Code
NOTICE OF NO ACCIDENT-RELATED VIOLATION AFTER INVESTIGATION

CCL Contracting, Inc
1938 Don Lee Place
Escondido, CA 92029

An investigation of an industrial accident or occupational illness was conducted by Jason Brissey at a place of employment located at Chapman Ave & Jamboree, Orange, on 06/01/2018.

Describe the condition(s) inspected:

Circumstances related to an accident involving two employees and a private vehicle on May 31, 2018.

It has been determined that no standard, rule, order or regulation set forth in Title 8, California Code of Regulations, and Division 5 of the California Labor Code, has been violated in connection with the above described industrial accident and/or occupational illness.

Signature

Compliance Safety and Health Officer

Signature

District Manager

Date of issuance: 08/27/2018

Date investigation completed: 08/27/2018

This notice is provided to the employer in accordance with the provisions of California Labor Code Section 6318(a). The employer is required to post this notice for three working days.

This notice relates solely and exclusively to the investigation of the industrial accident(s) and/or occupational illness(es) described above. It does not relate to any other conduct, condition or activity existing at the above-described place of employment either on the date of the investigation or presently.
DECLARATION OF SERVICE BY MAIL

I, the undersigned, declare the following:

I am a citizen of the United States, over the age of 18 years, and not a party to the within action. My place of employment and business address is 2000 E. McFadden Avenue, Suite 122, Santa Ana, CA 92705.

On November 2, 2018, I served the attached Citation and Notification of Penalty, by placing the original in a sealed envelope to the persons named below at the address set out immediately below each respective name, and by sealing and depositing said envelope in the United States Mail with postage thereon fully prepaid, in the United States mail at 2000 E. McFadden Avenue, Santa Ana, CA 92705 addressed as:

CCL Contracting, Inc.
1938 Don Lee Place
Escondido, CA 92029

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed on November 2, 2018 at Santa Ana, California.

[Signature]
Jennifer Kramer, Management Services Technician
Declarant
State of California
Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2000 E. McFadden Avenue, Suite 122
Santa Ana, CA 92705
Phone: (714) 558-4451 Fax: (714) 558-2035

CITATION AND NOTIFICATION OF PENALTY

To:
CCL Contracting, Inc
and its successors
1938 Don Lee Place
Escondido, CA 92029

Inspection Site:
Chapman Ave & Jamboree
Orange, CA 92869

Inspection #: 1319842
Inspection Date (s): 06/01/2018 - 08/27/2018
Issuance Date: 08/27/2018
CSHO ID: J2352
Optional Report #: 041-18
Reporting ID: 0950631

The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.

This Citation and Notification of Penalty (hereinafter Citation) is being issued in accordance with California Labor Code Section 6317 for violations that were found during the inspection/investigation. This Citation or a copy must be prominently posted upon receipt by the employer at or near the location of each violation until the violative condition is corrected or for three working days, whichever is longer. Violations of Title 8 of the California Code of Regulations or of the California Labor Code may result in some instances in prosecution for a misdemeanor.

YOU HAVE A RIGHT to contest this Citation and Notification of Penalty by filing an appeal with the Occupational Safety and Health Appeals Board. To initiate your appeal, you must contact the Appeals Board, in writing or by telephone, within 15 working days from the date of receipt of this Citation. If you miss the 15 working day deadline to appeal, the Citation and Notification of Penalty becomes a final order of the Appeals Board, not subject to review by any court or agency.

Informal Conference - You may request an informal conference with the manager of the district office which issued the Citation within 10 working days after receipt of the Citation. However, if the citation is appealed, you may request an informal conference at any time prior to the day of the hearing. Employers are encouraged to schedule a conference at the earliest possible time to assure an expeditious resolution of any issues. At the informal conference, you may discuss the existence of the alleged violation, classification of the violation, abatement date or proposed penalty.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities. Citation and Notification of Penalty Page 1 of 7 Cal/OSHA-2 V1 Rev 1/2018
Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an agreement which resolves this matter without litigation or contest.

APPEAL RIGHTS

The Occupational Safety and Health Appeals Board (Appeals Board) consists of three members appointed by the Governor. The Appeals Board is a separate entity from the Division of Occupational Safety and Health (Division) and employs experienced attorneys as administrative law judges to hear appeals fairly and impartially. To initiate an appeal from a Citation and Notification of Penalty, you must contact the Appeals Board, in writing or by telephone, within 15 working days from the date of receipt of a Citation. After you have initiated your appeal, you must then file a completed appeal form with the Appeals Board, at the address listed below, for each contested citation. Failure to file a completed appeal form with the Appeals Board may result in dismissal of the appeal. Appeal forms are available from district offices of the Division, or from the Appeals Board:

Occupational Safety and Health Appeals Board
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
Telephone: (916) 274-5751 or (877) 252-1987
Fax: (916) 274-5785

If the Citation you are appealing alleges more than one item, you must specify on the appeal form which items you are appealing. You must also attach to the appeal form a legible copy of the Citation you are appealing. In addition, please send a copy of Page 1 of this Citation and Notification of Penalty, the cover sheet.

Among the specific grounds for an appeal are the following: the safety order was not violated, the classification of the alleged violation (e.g., serious, repeat, willful) is incorrect, the abatement requirements are unreasonable or the proposed penalty is unreasonable.

Important: You must notify the Appeals Board, not the Division, of your intent to appeal within 15 working days from the date of receipt of the Citation. Otherwise, the Citation and Notification of Penalty becomes a final order of the Appeals Board not subject to review by any court or agency. An informal conference with the Division does not constitute an appeal and does not stay the 15 working day appeal period. If you have any questions concerning your appeal rights, call the Appeals Board, at (916) 274-5751 or (877) 252-1987.
PENALTY PAYMENT OPTIONS

Penalties are due within 15 working days of receipt of this Citation and Notification of Penalty unless contested. If you are appealing any item of the citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form for payment.

If you are paying electronically, please have the Penalty Remittance Form on-hand when you are ready to make your payment. The company name, inspection number, and Citation number(s) will be required in order to ensure that the payment is accurately posted to your account. Please go to www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html to access the secure payment processing site. Additionally, you must also mail the Penalty Remittance Form to the address below.

If you are paying by check, return one copy of the Citation, along with the Notice of Proposed Penalties Sheet and the Penalty Remittance Form and mail to:

Department of Industrial Relations
Cal/OSHA Penalties
P. O. Box 516547
Los Angeles, CA 90051-0595

CAL/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions, or endorsements do not exist.

NOTIFICATION OF CORRECTIVE ACTION

For violations which you do not contest, you should notify the Division of Occupational Safety and Health promptly by letter that you have taken appropriate corrective action within the time frame set forth on this Citation and Notification of Penalty. Please inform the district office listed on the Citation by submitting the Cal/OSHA 160 form with the abatement steps you have taken and the date the violation was abated, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. The adjusted penalty for general violations has already been reduced by 50% on the presumption that the employer will correct the violations by the abatement date. The adjusted penalty for serious violations, if any, has already been reduced by 50% because abatement of those violations has been completed.

Note: Return the Cal/OSHA 160 form to the district office listed on the Citation and as shown below:

Division of Occupational Safety and Health
Santa Ana District Office
2000 E. McFadden Avenue, Suite 122
Santa Ana, CA 92705
Telephone: (714) 558-4451
Fax: (714) 558-2035
EMPLOYEE RIGHTS

Employer Discrimination Unlawful - The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under Labor Code Section 6310 or 6311. An employee who believes that he/she has been discriminated against may file a complaint no later than six (6) months after the discrimination occurred with the Division of Labor Standards Enforcement.

Employee Appeals - An employee or authorized employee's representative may, within 15 working days of the issuance of a citation, special order, or order to take special action, appeal to the Occupational Safety and Health Appeals Board the reasonableness of the period of time fixed by the Division of Occupational Safety and Health (Division) for abatement. An employee appeal may be filed with the Appeals Board or with the Division. No particular format is necessary to initiate the appeal, but the notice of appeal must be in writing.

If an Employee Appeal is filed with the Division, the Division shall note on the face of the document the date of receipt, include any envelope or other proof of the date of mailing, and promptly transmit the document to the Appeals Board. The Division shall, no later than 10 working days from receipt of the Employee Appeal, file with the Appeals Board and serve on each party a clear and concise statement of the reasons why the abatement period prescribed by it is reasonable.

Employee Appeal Forms are available from the Appeals Board, or from a district office of the Division.

Employees Participation in Informal Conference - Affected employees or their representatives may notify the District Manager that they wish to attend the informal conference. If the employer objects, a separate informal conference will be held.

DISABILITY ACCOMMODATION

Disability accommodation is available upon request. Any person with a disability requiring an accommodation, auxiliary aid or service, or a modification of policies or procedures to ensure effective communication and access to the programs of the Division of Occupational Safety and Health, should contact the Disability Accommodation Coordinator at the local district office or the Statewide Disability Accommodation Coordinator at 1-866-326-1616 (toll free). The Statewide Coordinator can also be reached through the California Relay Service, by dialing 711 or 1-800-735-2929 (TTY) or 1-800-855-3000 (TTY - Spanish).

Accommodations can include modifications of policies or procedures or provision of auxiliary aids or services. Accommodations include, but are not limited to, an Assistive Listening System (ALS), a Computer-Aided Transcription System or Communication Access Realtime Translation (CART), a sign-language interpreter, documents in Braille, large print or on computer disk, and audio cassette recording. Accommodation requests should be made as soon as possible. Requests for an ALS or CART should be made no later than five (5) days before the hearing or conference.
State of California  
Department of Industrial Relations  
Division of Occupational Safety and Health  
Santa Ana District Office  
2000 E. McFadden Avenue, Suite 122  
Santa Ana, CA 92705  
Phone: (714) 558-4451  
Fax: (714) 558-2035

Citation and Notification of Penalty

Company Name: CCL Contracting, Inc  
Establishment DBA: and its successors  
Inspection Site: Chapman Ave & Jamboree  
Orange, CA 92869

Citation 1 Item 1 Type of Violation: Regulatory

California Code of Regulations, Title 8 Section 341. Permit Requirements.

(c) Basic permit requirement.

(2) Annual Permits.

(b) An employer who conducts activity subject to Annual Permit requirements shall obtain an Annual Permit once per year and shall notify the Division each time the permit holder begins permit-required activity at a new site.

Prior to and during the course of the inspection, including but not limited to, on June 1, 2018, the Employer, who is a permit holder, failed to notify the Division of permit required activity, when the permit-required activity began at a jobsite located near E Santiago Canyon Rd & Jamboree Blvd in the City of Orange.

Date By Which Violation Must be Abated:  
Proposed Penalty: $560.00

Corrected During Inspection

Compliance Officer / District Manager
OSHA's Form 307

Injury and Illness Incident Report
Injury and Illness Incident Report

OSHA Form 301

Section 1: Employer Information

1. Employer Name: Acme Inc.
2. Employer Identification Number: 123-45-6789
3. Address: 123 Main St, Anytown, USA
4. Phone Number: (123) 456-7890

Section 2: Incident Information

1. Date of Injury: 01/12/2023
2. Time of Injury: 08:00 AM
3. Date of Illness: 01/11/2023
4. Time of Illness: 10:00 AM
5. Location: Production Floor
6. Nature of Injury: Cut
7. Nature of Illness: Exposure to Chemicals

Section 3: Injury Details

1. Number of Employees: 50
2. Number of Days Away from Work: 5
3. Number of Restricted Work: 3
4. Number of Medical Treatment: 1

Section 4: Illness Details

1. Number of Employees: 50
2. Number of Days Away from Work: 3
3. Number of Restricted Work: 2
4. Number of Medical Treatment: 0

Section 5: Preventive Measures

1. PPE Used: Gloves, Safety Shoes, Safety Glasses
2. Medical Advice Followed: Doctor's Orders
3. Training Provided: Safety Training

Section 6: Supervisory/Manager Information

1. Name: John Doe
2. Title: Safety Manager

Section 7: Signature & Date

1. Signature: [Signature]
2. Date: 01/13/2023
OSHA's Form 301

Injury and Illness Incident Report

Date: 7/5/17
Department: Human Resources

Employee Name: Tanya Smith
Employee ID: 123456
Employee Phone: 555-1234
Employee Email: tanya.smith@company.com

Date of Injury: 6/15/17
Date of Illness: 6/15/17

Time of Injury: 2:30 PM
Location of Injury: Office Building 2, Room 101

Type of Injury: Back Pain
Description: Employee was lifting heavy objects when injury occurred.

Treatment: Employee was treated by company physician.

Date of Return to Work: 7/5/17

Reported by: Vice President of Operations

Signature: [Signature]

Additional Information:

- Employee was provided with ergonomic training.
- New equipment was provided to reduce lifting requirements.

Employee Comments:

- The incident highlighted the need for improved safety protocols.

Company Comments:

- Immediate action was taken to address the incident.
- Ongoing safety training sessions were scheduled.

Employee Supervisor's Signature: [Signature]

Date: 7/5/17

Employee's Signature: [Signature]

Date: 7/5/17

Person In Charge: [Signature]

Date: 7/5/17
PROOF OF INSURANCE CERTIFICATE

The Contractor and his subcontractors shall take out and maintain insurance, with coverage acceptable to the District, at his sole cost and expense at all times during the life of the Contract, including the entire time of the Contractor's guarantee.

Note: An Aggregate limit (cap), Professional Employer Organization (PEO), or Self Insurance Plan is not acceptable.

Contractor to insert sample Insurance Certificate showing proof of acceptable Insurance
# Certificate of Liability Insurance

**Producer:**
Alliant Insurance Services, Inc.
CA License No. 0C36681
701 B Street, 6th Floor
San Diego CA 92101

**Contact:**
Name: Norma Figueroa
Phone: (619) 849-3871
Fax: (619) 699-2163
E-mail: nfigueroa@alliant.com

**Insured:**
CCL Contracting, Inc.
1938 Don Lee Place
Escondido CA 92029

**Certificate Number:** 567849852

**Coverages**

<table>
<thead>
<tr>
<th>Insured</th>
<th>Policy Number</th>
<th>Policy Dates</th>
<th>Limits</th>
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</thead>
<tbody>
<tr>
<td><strong>Commercial General Liability</strong></td>
<td>4/1/2020 to 4/1/2021</td>
<td>COHE524998</td>
<td></td>
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<tr>
<td>Ded. $5,000</td>
<td></td>
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<tr>
<td>Gen'l Aggregate Limit Applies Per:</td>
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<tr>
<td>Policy:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| **Automobile Liability** | 4/1/2020 to 4/1/2021 | 810BM547953 | 
| Owned Autos Only | | | 
| Scheduled Autos | | | 
| Non-Owned Autos Only | | | 

| **Umbrella Liability** | 4/1/2020 to 4/1/2021 | CUP3J055535 | 
| Occur | | | 
| Excess Liability | | | 
| Ded | Retention $10,000 | | 

| **Workers' Compensation and Employers' Liability** | 4/1/2020 to 4/1/2021 | UB3K120075 | 
| Any Proprietor/Partner/Executive Officer/Member/Excluded (Mandatory In NIP) | | | 
| If yes, describe under DESCRIPTION OF OPERATIONS below | | | 

**Description of Operations / Vehicles**
City of Chula Vista is included as additional insured.

**Certificate Holder:**
City of Chula Vista
276 4th Avenue
Chula Vista CA 91910

**Cancellation:**

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: [Signature]

© 1988-2015 ACORD CORPORATION. All rights reserved.
KNOW ALL MEN BY THESE PRESENTS, that we

CCL CONTRACTING, INC.

(Here Insert full name and address or legal title of Contractor)

1938 DON LEE PLACE, ESCONDIDO, CA 92029____ as Principal, hereinafter called the Principal, and

LIBERTY MUTUAL INSURANCE COMPANY

ATTN: SURETY CLAIMS DEPARTMENT, 1001 4TH AVENUE, SUITE 1300, SEATTLE, WA 98154

(Here Insert full name and address or legal title of Surety)

a corporation duly organized under the laws of the State of ____________ as Surety,
hereinafter called the Surety, are held and firmly bound unto Eastern Municipal Water District,
Obligee, hereinafter called the Obligee, in the sum of _____ TEN PERCENT OF GREATER AMOUNT BID _____ Dollars
(______ 10% _______), for the payment of which sum well and truly to be made, the said Principal and the
said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally
firmly by these presents.

WHEREAS, the Principal has submitted a bid, dated ______ AUGUST 3____, 20 20____, for ________

MCCALL BOULEVARD PIPELINE REPLACEMENT PROJECT, WORK ORDER #419569

(Here insert full name, address and description of Project)

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract
with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in
the bidding of Contract Documents with good and sufficient surety for the faithful performance of such Contract
and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the
failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the
Obligee the difference not to exceed the penalty hereof between the amount specified in said bid and such
larger amount for which the Obligee may in good faith contract with another party to perform the Work covered
by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect.

In the event suit is brought upon this Bond by Obligee and Judgement is recovered, the Surety shall pay all costs
incurred by Obligee in such suits to be fixed by the court.

Signed and sealed this ______ 28TH ______ day of ______ JULY ______, 2020____

CONTRACTOR AS PRINCIPAL

Company:

CCL CONTRACTING, INC.

Signature: 

Name: BRYAN LUSKY

Title: SECRETARY

SURETY

Company:

LIBERTY MUTUAL INSURANCE COMPANY

Signature:

Name: MARK D. IATAROLA

Title: Attorney-in-Fact

This Bid Bond (BB-1) form shall be submitted to be considered a responsive bid

Notary Public Acknowledgment required for Surety and Contractor

Rev:04/06/16

BB-1

00040 Bid Bond
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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

State of California
County of SAN DIEGO

On 7/28/2020 before me, TRACY LYNN RODRIGUEZ, NOTARY PUBLIC, here insert name and title of the officer, personally appeared MARK D. IATAROLA, name(s) of signer(s).

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

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

WITNESS my hand and official seal.

Signature

Place Notary Seal and/or Stamp Above

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

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

Capacity(ies) Claimed by Signer(s)
Signer's Name: MARK D. IATAROLA
☐ Corporate Officer – Title(s): _____________________________
☐ Partner – ☐ Limited ☐ General
☐ Individual ☐ Attorney In Fact
☐ Trustee ☐ Guardian of Conservator
☐ Other: _____________________________
Signer is Representing: _____________________________

☐ Corporate Officer – Title(s): _____________________________
☐ Partner – ☐ Limited ☐ General
☐ Individual ☐ Attorney In Fact
☐ Trustee ☐ Guardian of Conservator
☐ Other: _____________________________
Signer is Representing: _____________________________

©2017 National Notary Association
California All-Purpose Acknowledgment

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

State of California
County of SAN DIEGO

On 1/23/2020 before me, TRACY LYNN RODRIGUEZ, NOTARY PUBLIC,

Date

personally appeared BRYAN LUSKY

Name(s) of Signer(s)

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

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

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Optional
Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
Title or Type of Document: ______________________________

Document Date: ______________________________ Number of Pages: __________

Signer(s) Other Than Named Above: ______________________________

Capacity(ies) Claimed by Signer(s)
Signer's Name: BRYAN LUSKY
☐ Corporate Officer – Title(s): SECRETARY
☐ Partner – ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian of Conservator
☐ Other: ______________________________

Signer is Representing: ______________________________

Signer's Name: ______________________________

☑ Corporate Officer – Title(s): ______________________________

☐ Partner – ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian of Conservator
☐ Other: ______________________________

Signer is Representing: ______________________________

©2017 National Notary Association
This Power of Attorney limits the acts of those named herein, and they have no authority to bind the Company except in the manner and to the extent herein stated.

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

Certificate No: 8201849-024100

POWER OF ATTORNEY

KNOWN ALL PERSONS BY THESE PRESENTS: That the Ohio Casualty Insurance Company is a corporation duly organized under the laws of the State of New Hampshire, that Liberty Mutual Insurance Company is a corporation duly organized under the laws of the State of Massachusetts, and West American Insurance Company is a corporation duly organized under the laws of the State of Indiana (herein collectively called the "Companies"), pursuant to and by authority herein set forth, does hereby name, constitute and appoint, Sandra Figueroa, Mark D. Iatola, Helen Maloney, John G. Maloney, Jessica Schmal

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

IN WITNESS WHEREOF, this Power of Attorney has been subscribed by an authorized officer or official of the Companies and the corporate seals of the Companies have been affixed thereto this 12th day of August , 2019.

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

By: David M. Carey, Assistant Secretary

State of PENNSYLVANIA
County of MONTGOMERY

On this 12th day of August , 2019 before me personally appeared David M. Carey, who acknowledged himself to be the Assistant Secretary of Liberty Mutual Insurance Company, The Ohio Casualty Insurance Company, and West American Insurance Company, and that he, as such, being authorized so to do, execute the foregoing Instrument for the purposes herein contained by signing on behalf of the corporations by himself as a duly authorized officer.

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

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Teresa Pastella, Notary Public;
Upper Merion Twp., Montgomery County
My Commission Expires March 29, 2021
Member: Pennsylvania Association of Notaries

By: Teresa Pastella, Notary Public

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

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

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

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

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

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

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seals of said Companies this 28TH day of JULY, 2020.