## PROPOSAL PACKAGE INFORMATION SHEET

**SPECIFICATION NO. 14015**

**MVRWRF SOLIDS HANDLING MCC REPLACEMENT**

**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., **TUESDAY, AUGUST 25, 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. the next day.

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 Acknowledgement required for Surety and Contractor**

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**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: CSI Electrical Contractors, Inc.

Address: 10623 Fulton Wells Avenue, Santa Fe Springs, CA 90670 Date: 8/24/2020

By: Steve Watts
(Print Name) (Name should appear below) (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>Steve Watts CEO</td>
<td></td>
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<tr>
<td>Paul Pica President</td>
<td></td>
</tr>
<tr>
<td>Rick Yauney CFO</td>
<td></td>
</tr>
</tbody>
</table>

For further details on this proposal, please contact:

Name: Mike Denning Address: 10623 Fulton Wells Ave., Santa Fe Springs
Email Address: mike.denning@csielectric.com Telephone: 562-946-0700 X231

C3-1 00024 Proposal (7 day)
EASTERN MUNICIPAL WATER DISTRICT
SPECIFICATION NO. 14015
MVRWRF SOLIDS HANDLING MCC REPLACEMENT

BIDDING SHEETS

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:

None.
BASIS OF AWARD: Additive Bid Item(s) Included in Total Bid Price.
Public Contract Code 20103.8(b) provides for basis of award as follows:

b) The lowest bid shall be the lowest total of the bid prices on the base contract and those additive or deductive items that were specifically identified in the bid solicitation as being used for the purpose of determining the lowest bid price.

Public Contract Code 20103.8 does not preclude the District from adding to or deducting any of the additive or deductive items after the lowest responsible bidder has been determined.

Failure to provide a cost for the additive or deductive bid items may deem your bid non-responsive.
## EASTERN MUNICIPAL WATER DISTRICT
### SPECIFICATION NO. 1401S
#### MVRWRF SOLIDS HANDLING MCC REPLACEMENT

## 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>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>Eighty thousand dollars (words) $ PRESET $ 80,000</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>LS</td>
<td>Provide Electrical Hazard Assessment Study per project Contract Documents. (Refer to Appendix C for details.)</td>
<td>Six thousand one hundred dollars (words) $ 6,100</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td>LS</td>
<td>Furnish all materials, labor, and supplies to replace motor control center MCC-6 and MCC-7, modifications to existing MCC-4A MCC-4B and MCC-8A, install new power distribution panel DP-4, modifications to existing switchboard MS-1, replace specified lighting panel boards, relocate power supply to specified lighting panel boards, installation of RTU enclosure A/C units, and installation of HVAC safety monitoring system in accordance with contract drawings and specifications.</td>
<td>Seven hundred eighty thousand, five hundred dollars $ Lump Sum $ 780,500</td>
<td></td>
</tr>
</tbody>
</table>

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BS-3 00020 Bidding Sheets
## 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>
</table>
| 4        | 1   | LS   | Provide Process Control and Integration Services.  
**FIFTY-ONE THOUSAND DOLLARS** | $ Lump Sum $56,000 |
| 5        | 1   | LS   | ADDITION OR DEDUCTION  
NONE | | |
| Additive Bid Item | | | | | |

**A1** 1 T&M Replace existing aboveground and underground conduits found to be unusable during construction. This line item is an allowance and all work will be tracked in accordance with time and materials procedures and as directed by the District.  

**Fifty thousand dollars**  
(words) $ PRESET $50,000

TOTAL BID (Basis of award)  $967,600
**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) __________ (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.

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**Addenda and/or Letter of Clarification**

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.

<table>
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<th>Addenda received:</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Letter of Clarification received:</td>
<td>0</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**Charlie Cox**

(Name)

**8-5-20**

(Date of Inspection)
EQUIPMENT AND MATERIAL

No substitution will be permitted without written justification and the approval of the District prior to the bid opening.

PRODUCTS OF MANUFACTURERS LISTED AS EQUALS TO THOSE SPECIFIED IN THE CONTRACT DOCUMENTS MUST BE SUBMITTED FOR REVIEW AND APPROVAL BY THE DISTRICT NO LATER THAN THE TENTH (10TH) DAY PRECEDING THE DATE SET FOR RECEIPT OF BIDS.

NOTE

Please refer to Special Conditions SC-12 for Specified Equipment with No Equal Substitution.
EASTERN MUNICIPAL WATER DISTRICT
SPECIFICATION NO. 1401S
MVRWRF SOLIDS HANDLING MCC REPLACEMENT

BIDDER’S 10-YEAR EXPERIENCE RECORD & RESUMES OF KEY PERSONNEL

All bidders must provide a detailed 10-year experience record showing successful completion, as a Classification A General Engineering Contractor and/or a Classification C-10 Electrical Contractor, of at least three similar projects within the last 10 years as follows:

A. Contract Type - Public Works
B. Replacement of a motor control center(s) at a treatment facility while maintaining operation
C. One Million Dollars or larger Contract Value

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*
<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>2018</td>
<td>Replace 3 PLC Panels and Upgrade SCADA System at Long Beach WD Groundwater Plant, while plant online</td>
<td>Prime, $1,010,000</td>
<td>Long Beach</td>
<td>HDR/ MWH Luanne Bean 949-241-7924</td>
<td>LBWD, Jake Hester, Luanne Bean 562-595-1585</td>
</tr>
<tr>
<td>2020</td>
<td>Replace 9 PLC Panels and 4 480V Control Panels at Coachella Valley WD Water Reclamation Plant 7 with plant online</td>
<td>Prime, $2,990,000</td>
<td>Indio</td>
<td>Lee &amp; Ro Rick Liskow/ 626-667-5329</td>
<td>CVWD, Florentino Raya/ 760-636-9504</td>
</tr>
<tr>
<td>2020</td>
<td>Replace MCC components and PLC Panels and multiple Control Panels for Chemical System</td>
<td>$2,686,000</td>
<td>Indio</td>
<td>Brandon Valadez, Krieger &amp; Stewart 951-684-6900</td>
<td>CVWD, Jignesh Ladhawala/ 760-574-2933</td>
</tr>
<tr>
<td></td>
<td>Upgrade at CVWD WRP 10</td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>
RESUMES OF KEY PERSONNEL
(ATTACH HERE)
Gabe Dalgoff
Project Manager

Gabe has been a valued member of CSI's team, managing numerous projects with various public and private entities. Over the last ten years, he has worked on critical facilities, industrial facilities, healthcare, and renewable energy projects.

As a Project Manager, Gabe will allocate 100% of his time to this project coordinating procurement and onsite construction activities with the project team, field personnel, and the client’s representatives. Gabe will also manage the day-to-day aspects of the project by maintaining logs that track RFI’s, daily reports, and submittals. It will also ensure that both office and field employees have the information and materials needed to construct a quality project for CSI customers.

Relevant Experience

USC HSC Cooling Tower Relocation
Los Angeles, CA
Project Value: $529,000
This project consisted of a cooling tower relocation.

Lytle Creek & Roemer Hydroelectric
Los Angeles, CA
Project Value: $1,151,000
This project included power and instrumentation for turnout and hydroelectric plant.

RIX Expansion Test Wells
San Bernardino, CA
Project Value: $1,246,000
The RIX expansion included construction of a new well, modifying 4 existing wells, and a new control building.

Sunshine Landfill Gas to Energy
Sylmar, CA
Project Value: $4,000,000
This project consisted of electrical construction to the gas renewable energy facility.

Brea-Olinda Landfill Gas to Energy
Brea, CA
Project Value: $4,100,000
This project was a electrical for gas-to-energy project.

LA Reservoir UV Plant
Sylmar, CA
Project Value: $9,000,000
This project included electrical construction to the new UV water disinfection facility.

Education

B.S. in Construction Engineering Technology from Cal Poly Pomona

Certifications

OSHA 10 Certified
NFPA 70E
Lockout/Tagout Training

5 Years at CSI
John Hogan
Project Executive
As the Project Executive, John is responsible for facilitating all aspects of the project including preconstruction, design, budgeting, value engineering, and contract award. He will be on the pulse of the project, managing CSI resources to fulfill all contractual commitments and to ensure customer satisfaction. He will actively monitor construction cost reports in order to address and act upon any anomalies.

Education
Bachelor of Science in Electrical Engineering

Certifications
OSHA 30

Relevant Experience
Eastern Municipal Water District (EMWD)
Perris, CA
Project Value: $1,246,000
This project included Design Build Photovoltaic Systems at five Easter Municipal Water District sites.
Rodney Harriel
General Foreman

Educated and state-certified in their profession, experienced in the electrical trade, and continually trained on industry trends and methodologies, CSI General Foremen consistently demonstrate the ability to produce successful projects within established time and budget parameters. With a keen awareness of construction scope and objectives, our General Foremen apply the leadership capabilities necessary to direct front line field supervisors and crews to perform safe electrical installations that meet job specifications and drawings. It is the General Foremen’s skillfulness to effectively and efficiently plan and organize workflow, schedule and coordinate crews, control costs, uphold quality, ensure safety, and sustain productivity that meets the high standards of CSI and our clients’ expectations.

Certifications
- IBEW Member
- OHSA 10
- NFPA 70E
- Man Lift
- Hilti Qualified Operator
- Cad-Weld
- CPR
- General Electrician
- Fall Arrest Protection Training

5 1/2 Years at CSI

Relevant Experience

Colorado River Aqueduct
Twentynine Palms, CA
Project Value: $455,000
This project consisted of the replacement bridge crane electrical components.

MWD/Emergency Radio Communication System Replacement
Los Angeles, CA
Project Value: $1,121,000
This project included modifications to 26 antennas and 4 plants.

La Palma Recharge Basin OC
La Palma, CA
Project Value: $462,000
This project consisted of multiple basin upgrades.

SCE Mountain View Control Room
Redlands, CA
Project Value: $285,000
This project included the remodel of the existing control room building.

WRF2 Tertiary Filtration
Corona, CA
Project Value: $701,000
This project included electrical construction to the WRF2 tertiary filtration.

WRP 10 Secondary Effluent Pump Station - Current Project
Project Value: $3,105,000

Coachella Valley Water District - Current Project
Project Value: $2,783,001

WRP 4, 7 & 10 Chemical System Safety Upgrades - Current Project
Project Value: $2,490,000
Steve Foster
Field Supervisor

Educated and state-certified in his profession, experienced in the electrical trade, and continually trained on industry trends and methodologies, Steve consistently demonstrates the ability to produce successful projects within established time and budget parameters. With a keen awareness of the construction scope and objectives, Steve applies the leadership capabilities necessary to direct the frontline field supervisors and crews to perform safe electrical installations that meet job specifications and drawings. It is his skillfulness to effectively and efficiently plan and organize workflow, schedule and coordinate teams, control costs, uphold quality, ensure safety, and sustain productivity that meets the high standards of CSI and our clients’ expectations.

Certifications
- IBEW Member: 1998
- CPR/First Aid/AED-BBP
- High Voltage Safety
- NFPA 70E
- OSHA 30

Relevant Experience

**LA Reservoir UV Plant**
Sylmar, CA
Project Value: $9,000,000
This project included electrical construction to the new UV water disinfection facility.

**Colorado River Aqueduct**
Twenty Nine Palms, CA
Project Value: $455,000
This project included replacing the bridge crane electrical components.

**Diemer West Basin**
Yorba Linda, CA
Project Value: $3,500,000
This project included electrical construction to the west basin and filter building rehabilitation.

**Tapia WRF Process Air Improvements**
Calabasas, CA
Project Value: $1,335,580
This project featured process air improvements including the replacement of the existing 900 HP MV Blowers with new High-Speed 400 HP 480V Blowers, VFD’s, and Switchgear. Construction also included modifications to Aeration Basin Mixers and new Dissolved Oxygen Analyzers.

**County Sanitation Districts of Los Angeles Co.**
Los Angeles, CA
Project Value: $26,987
Travis England
General Foreman

Educated and state-certified in their profession, experienced in the electrical trade, and continually trained on industry trends and methodologies, CSI General Foremen consistently demonstrate the ability to produce successful projects within established time and budget parameters. With a keen awareness of construction scope and objectives, our General Foremen apply the leadership capabilities necessary to direct front line field supervisors and crews to perform safe electrical installations that meet job specifications and drawings. It is the General Foremen’s skillfulness to effectively and efficiently plan and organize workflow, schedule and coordinate crews, control costs, uphold quality, ensure safety, and sustain productivity that meets the high standards of the company and our clients’ expectations.

Certifications
- IBEW Member
- State Certified Electrician
- OSHA 30
- First aid and CPR Trained
- Boom, Scissor and Fork Lift Certified
- Certified Rigger
- Certified Welder
- NFPA 70E certified
- Hilti Qualified Operator

Relevant Experience

RIX Expansion Test Wells
San Bernardino, CA
Project Value: $1,246,000
The RIX expansion included construction of a new well, modifying 4 existing wells, and a new control building.

Lytle Creek & Roemer Hydroelectric
Los Angeles, CA
Project Value: $1,151,000
This project included power and instrumentation for turnout and hydroelectric plant.

WRF2 Tertiary Filtration
Corona, CA
Project Value: $701,000
This project included electrical construction to the WRF2 tertiary filtration.

Colorado River Aqueduct
Twentynine Palms, CA
Project Value: $455,000
This project consisted of the replacement bridge crane electrical components.

SCE Mountain View Control Room
Redlands, CA
Project Value: $285,000
This project included the remodel of the existing control room building.

AVEK W. Ave H Wellfield
Los Angeles, CA
This project included the installation electrical components and controls.

Elysian Reservoir Water
Los Angeles, CA
This project included improvements to the existing facility.
LIST OF DESIGNATED SUBCONTRACTORS

SPEC #: 1401 S
PROJECT TITLE: Moreno Valley RWRF Solids Handling MCC Replacement
NAME OF CONTRACTOR: CSI ELECTRICAL CONTRACTORS INC.

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>
<tbody>
<tr>
<td>Company Name: Halco Service Corp.</td>
<td>License #: 342752</td>
<td>ELECTRICAL TESTING 3RD PARTY</td>
<td>2.3%</td>
</tr>
<tr>
<td>Address: 5777 Venice Blvd, Los Angeles, CA</td>
<td>DIR Registration #: 100025646</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address: J. Courtney @ Halco.net</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Company Name:</td>
<td>License #:</td>
<td></td>
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<td>Address:</td>
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<td>Email Address:</td>
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C-5(d) 00028 Designation of Subcontractors
<table>
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<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: Bowers Systems</td>
<td>License #:</td>
<td>Programming Instrumentation System</td>
<td>4.6 %</td>
</tr>
<tr>
<td>Address: 303 Van Ness St. #100b, Torrance, CA</td>
<td>DIR Registration #:</td>
<td>1000027190</td>
<td></td>
</tr>
<tr>
<td>Email Address: <a href="mailto:Jim@Bowers.com">Jim@Bowers.com</a></td>
<td></td>
<td></td>
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(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)
******************************************************************************
Contractor Information

- **Legal Entity Name**: CSI Electrical Contractors, Inc.
- **Legal Entity Type**: Corporation
- **Status**: Active
- **Registration Number**: PW-LR-1000438973
- **Registration effective date**: 7/16/2019
- **Registration expiration date**: 6/30/2022
- **Mailing Address**: 12150 E 112th Ave, Henderson 80640 CO United St...
- **Physical Address**: 10623 Fulton Wells Ave., Santa Fe Springs 90670 CA...
- **Email Address**: Trade Name/DBA
- **License Number(s)**: CSLB:1055811

Legal Entity Information

- **Corporation Number**:
- **Federal Employment Identification Number**:
- **President Name**: Paul Pica
- **Vice President Name**:
- **Treasurer Name**:
- **Secretary Name**:
- **CEO Name**: Steven Watts

**Agent of Service Name**: C T Corporation System

**Agent of Service Mailing Address**: 818 West Seventh Street, Suite 930, Los Angeles 90017 CA United States of America

Workers Compensation

- **Do you lease employees through Professional Employer Organization (PEO)**?: No
**Contractor Information**

<table>
<thead>
<tr>
<th>Legal Entity Name</th>
<th>HALCO SERVICE CORPORATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Legal Entity Type</td>
<td>Corporation</td>
</tr>
<tr>
<td>Status</td>
<td>Active</td>
</tr>
<tr>
<td>Registration Number</td>
<td>1000025646</td>
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<tr>
<td>Registration effective date</td>
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</tr>
<tr>
<td>Registration expiration date</td>
<td>6/30/2021</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>5773 VENICE BLVD. LOS ANGELES 90019 CA Uni...</td>
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<tr>
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<tr>
<td>Email Address</td>
<td></td>
</tr>
<tr>
<td>Trade Name/DBA</td>
<td>HALCO TESTING SERVICES</td>
</tr>
<tr>
<td>License Number(s)</td>
<td>CSLB:C10 342752</td>
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**Registration History**

<table>
<thead>
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</thead>
<tbody>
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<td>7/1/2019</td>
<td>6/30/2020</td>
</tr>
<tr>
<td>7/1/2020</td>
<td>6/30/2021</td>
</tr>
</tbody>
</table>
Legal Entity Information

Agent of Service Name: KEITH ORUM
Agent of Service Mailing Address: 5773 VENICE BLVD. LOS ANGELES 90019 CA United States of America

Corporation Number:
Federal Employment Identification Number:
President Name: Keith Orum
Vice President Name:
Treasurer Name: Don Genutis
Secretary Name: Don Genutis
CEO Name: Don Genutis

Workers Compensation

Do you lease employees through Professional Employer Organization (PEO)?: No
Please provide your current workers compensation insurance information below:

PEO Name
PEO Phone
PEO Email

Insured by Carrier
Policy Holder Name: HALCO SERVICE CORP
Insurance Carrier: Farmers Insurance
Policy Number: A09491895
Inception date: 8/28/2019
Expiration Date: 8/28/2020
Contractor Information

**Legal Entity Name**
HALCO SERVICE CORPORATION

**Legal Entity Type**
Corporation

**Status**
Active

**Registration Number**
1000025646

**Registration effective date**
7/1/2020

**Registration expiration date**
6/30/2021

**Mailing Address**
5773 VENICE BLVD. LOS ANGELES 90019 CA... United States of America

**Physical Address**
5773 VENICE BLVD. LOS ANGELES 90019 CA... United States of America

**Email Address**

**Trade Name/DBA**
HALCO TESTING SERVICES

**License Number(s)**
- CSLB:342752
- CSLB:C10 342752

Registration History

<table>
<thead>
<tr>
<th>Effective Date</th>
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<tr>
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<td>6/30/2020</td>
</tr>
<tr>
<td>7/1/2020</td>
<td>6/30/2021</td>
</tr>
</tbody>
</table>

Legal Entity Information

**Agent of Service Name:**
KEITH ORUM

**Agent of Service Mailing Address:**
5773 VENICE BLVD. LOS ANGELES 90019 CA United States of America

**Corporation Number:**

**Federal Employment Identification Number:**

**President Name:**
Keith Orum

**Vice President Name:**

**Treasurer Name:**
Don Genutis

**Secretary Name:**
Don Genutis

**CEO Name:**
Don Genutis

Workers Compensation

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Expiration Date</th>
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<tbody>
<tr>
<td>5/22/2018</td>
<td>6/30/2019</td>
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<td>6/30/2018</td>
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<td>6/30/2016</td>
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<td>7/1/2019</td>
<td>6/30/2020</td>
</tr>
<tr>
<td>7/1/2020</td>
<td>6/30/2021</td>
</tr>
</tbody>
</table>
Do you lease employees through Professional Employer Organization (PEO)?: No

Please provide your current workers compensation insurance information below:

<table>
<thead>
<tr>
<th>PEO Information Name</th>
<th>PEO Phone</th>
<th>PEO Email</th>
</tr>
</thead>
</table>

Insured by Carrier

**Policy Holder Name:** HALCO SERVICE CORP  
**Insurance Carrier:** Farmers Insurance  
**Policy Number:** A09491895  
**Inception date:** 8/28/2019  
**Expiration Date:** 8/28/2020
Contractor Information

Legal Entity Name
BEAVENS SYSTEMS, INC.

Legal Entity Type
Corporation

Status
Active

Registration Number
1000029190

Registration effective date
7/1/2019

Registration expiration date
6/30/2021

Mailing Address
383 VAN NESS AVE., SUITE 1604 TORRANCE 90501 CA...

Physical Address
383 VAN NESS AVE., SUITE 1604 TORRANCE 90501 CA...

Email Address
Trade Name/DBA
License Number(s)

Legal Entity Information

Corporation Number:
CO765266

Federal Employment Identification Number:

President Name:
GREGORY ARGANO

Vice President Name:
ARTHUR BEAVENS

Treasurer Name:
GREGORY ARGANO

Secretary Name:
BRENDA ARGANO

CEO Name:
GREGORY ARGANO

Agent of Service Name:
RICHARD F G THOMAS

Agent of Service Mailing Address:
2512 Artesia Blvd., Suite 210 Redondo Beach 90278 CA United States of America

Workers Compensation

Do you lease employees
No
through Professional Employer Organization (PEO)?

Please provide your current workers compensation insurance information below:

<table>
<thead>
<tr>
<th>PEO</th>
<th>PEO</th>
<th>PEO</th>
</tr>
</thead>
</table>

PEO Information

Insured by Carrier

**Policy Holder Name:** BEAVENS SYSTEMS, INC  
**Insurance Carrier:** FARMERS INSURANCE EXCHANGE  
**Policy Number:** A0920-32-49  
**Inception date:** 9/23/2014  
**Expiration Date:** 9/23/2019
**CONTRACTOR'S LICENSING STATEMENT**

The undersigned is licensed in accordance with the laws of the State of California 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**  Electrical Contractor

**LICENSE NUMBER**  1055811  **TYPE** C10.C7.A  **EXPIRATION DATE**  7/31/2021

---

### 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: |  |

<table>
<thead>
<tr>
<th>SIGNATURE:</th>
<th>TITLE:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE:</th>
<th>TITLE:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SIGNATURE:</th>
<th>TITLE:</th>
</tr>
</thead>
</table>

---

### C. CORPORATION

| NAME OF CORPORATION: | CSI Electrical Contractors, Inc. |
| BUSINESS ADDRESS: | 10623 Fulton Wells Avenue, Santa Fe Springs, CA 90670 |
| PHONE NUMBER: | 562-946-0700 |
| SIGNATURE OF AUTHORIZED OFFICER OF CORPORATION: |  |

| SIGNATURE: | TITLE: Steve Watts | CEO |

---

C6-1  00030 Contractors Licensing Statement
NON-COLLUSION DECLARATION

TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID

The undersigned declares:

I am the CEO of CSI Electrical Contractors, 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 8/24/2020 [date], at Santa Fe Springs [city], California [state]

Signed: ________________________________

Name: Steve Watts
(Print Name Here)

C7-1 00032 Non-Collusion Declaration
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>CSI Electrical Contractors, Inc.</td>
<td>84-1788580</td>
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</table>

<table>
<thead>
<tr>
<th>By (Authorized Signature)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Printed Name and Title of Person Signing</th>
<th>Date Executed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steve Watts</td>
<td>8/24/2020</td>
</tr>
</tbody>
</table>

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>
All establishments covered by CCR Title 8 Section 14300 must complete this Annual Summary, 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 Cal/OSHA Form 300 in its entirety. They also have limited access to the Cal/OSHA Form 301 or its equivalent. See CCR Title 8 Section 14300.35, in Cal/OSHA’s recordkeeping rule, for further details on the access provisions for these forms.

<table>
<thead>
<tr>
<th>Number of Cases</th>
<th>Total number of deaths</th>
<th>Total number of cases with days away from work</th>
<th>Total number of cases with job transfer or restriction</th>
<th>Total number of other recordable cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>(G)</td>
<td>(H)</td>
<td>(I)</td>
<td>(J)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Days</th>
<th>Total number of days of job transfer or restriction</th>
<th>Total number of days away from work</th>
</tr>
</thead>
<tbody>
<tr>
<td>(K)</td>
<td>(L)</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Injury and Illness Types</th>
<th>Total number of...</th>
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<tbody>
<tr>
<td>(1) Injuries</td>
<td>(4) Poisonings</td>
</tr>
<tr>
<td>(2) Skin disorders</td>
<td>(5) Hearing loss</td>
</tr>
<tr>
<td>(3) Respiratory conditions</td>
<td>(6) All other Illnesses</td>
</tr>
</tbody>
</table>

Post this Annual Summary from February 1 to April 30 of the year following the year covered by the form.
Cal/OSHA Form 300A (Rev. 7/2007)
Summary of Work-Related Injuries and Illnesses

All establishments covered by CCR Title 8 Section 14300 must complete this Annual Summary, 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 Cal/OSHA Form 300 in its entirety. They also have limited access to the Cal/OSHA Form 301 or its equivalent. See CCR Title 8 Section 14300.35, in Cal/OSHA's recordkeeping rule, for further details on the access provisions for these forms.

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<table>
<thead>
<tr>
<th>Total number of deaths</th>
<th>Total number of cases with days away from work</th>
<th>Total number of cases with job transfer or restriction</th>
<th>Total number of other recordable cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 (c)</td>
<td>2 (b)</td>
<td>6 (a)</td>
<td>6</td>
</tr>
</tbody>
</table>

### Number of Days

<table>
<thead>
<tr>
<th>Total number of days away from work</th>
<th>Total number of days of job transfer or restriction</th>
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</thead>
<tbody>
<tr>
<td>90 (f)</td>
<td>285 (e)</td>
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### Injury and Illness Types

<table>
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<th>(M)</th>
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</thead>
<tbody>
<tr>
<td>(1) Injuries</td>
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<td>(2) Skin Disorders</td>
<td>0</td>
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<td>(3) Respiratory Conditions</td>
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<td>(4) Poisonings</td>
<td>0</td>
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<tr>
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</tr>
<tr>
<td>(6) All other illnesses</td>
<td>0</td>
</tr>
</tbody>
</table>

Post this Annual Summary from February 1 to April 30 of the year following the year covered by the form.

---

**Facility Information**

Establishment name: CSI Electrical Contractors, Inc.
Street: 10923 Fulton Wells Avenue
City: Santa Fe Springs
State: CA
ZIP: 90670

Industry description:

Standard Industrial Classification (SIC) 1731
If known (e.g., SIC 3715)

**Employment Information**

(If you don't have these figures, use the optional Worksheet to estimate)

Annual average number of employees: 1,770
Total hours worked by all employees last year: 1,930,860

**Sign Here**

Knowingingly falsifying this document may result in a fine.

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

Company executive: [Signature]
[Date]

[Printed Name] VP Safety / Risk Mgr.
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: 8/25/2020  Contractor’s Standard Industry Code: 1731

<table>
<thead>
<tr>
<th>Specification No.</th>
<th>Project Name:</th>
<th>1401S</th>
<th>MVRWRF Solids Handling MCC Replacement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractor name:</td>
<td>CSI Electrical Contractors, Inc.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contractor Address:</td>
<td>10623 Fulton Wells Avenue, Santa Fe Springs, CA 90670</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contractor License No.</td>
<td>1055811</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone No:</td>
<td>562-946-0700 X231</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact Person:</td>
<td>Mike Denning</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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?  Yes [x]  Under appeal (see attached)
   
   *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?  Yes [x]
   
   *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: Steve Watts | CEO  Date: 8/24/2020

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

FOR EMWD USE ONLY:  Field Engineering to forward to Risk Management for review

| Approved:  | No [ ]  Yes [ ] |
| Reviewed by Risk Management (signature required):  | 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
OSHA VIOLATION (2019)

Inspection Number: 1399221.015
Issuance Date: 10/15/2019
Case Status: Violation Under Contest (attached)
Contest Date: 10/21/2019

Statement
On April 17, 2019, electricians from CSI Electrical Contractors, Inc. (CSI) were working at the Cal Flats Solar Farm project when one of our electricians was shocked. This occurred when the General Contractor energized the “system” without notifying CSI.

CSI was required by contract to operate under the General Contractor’s Lock Out Tag Out (LOTO) Program. It was apparent after the accident that the General Contractor was not handling the LOTO process properly; therefore, CSI implemented a Site Specific LOTO Plan (attached) for the rest of the project.
SITE SPECIFIC LOTO PLAN

CAL FLATS SOLAR PROJECT

19855 E. Highway 41, Shandon, CA 93461

Site Supervision responsible for implementation of this plan:

CSI Project Manager: Amy Arnold  562-332-2048
CSI Site Superintendent: Jaron Batte  562-322-7611
CSI Site Safety Manager: Jay Maddux  562-631-3499

This LOTO (Lockout/Tagout) plan is developed for the Cal Flats Solar Project. The plan consists of the following attached documents and detailed procedures:

Plan Documents:

1. Section II of CSI Electrical Safe Work Program (ESWP), Electrical Operations, Control of Hazardous Energy Program LOTO
2. Complex Lockout/Tagout Work Plan
3. LOTO Log Sheet
4. LOTO Checklist
5. LOTO Audit Form
6. ABC’s of Multimeter Safety
7. LOTO Addendum for Clarification of Interpretation

Training:

1. CSI Safety will conduct training with all authorized Site Supervisors and Journeyman Electricians to cover CSI LOTO Policies & Procedures, the details of this plan, and their responsibilities of implementing this plan.
2. All affected CSI employees and CSI Subcontractors will receive awareness training on this Site Specific LOTO plan as it pertains to their scope of work and exposure to hazardous energy.
Procedures:

1. CSI Site Supervision shall follow section 5.2.4 of the ESWP, Hazardous Electrical Energy Control Procedures for Simple LOTO and Complex LOTO. The following steps are meant to add additional details for the site and help aid in group LOTO scenarios.

2. As with all work tasks the use of a CSI AHA (Activity Hazard Analysis) must identify the need and use of LOTO. For a Complex LOTO there will be an additional plan template and briefing held to communicate to all authorized/affected employees. The sign in sheet will be used for proper documentation.

3. Site Supervision will determine through review of single line plans, verification with crew foreman, and visual verification of power sources/ terminations that circuits are safe and ready for energization. Site Safety shall be notified of this verification and review steps taken to ensure proper safe off before any energization. Take extra precautions to check for other sources of power such as emergency backup power and stored energy.

4. Site Supervision and Site Safety will document this verification on their daily logs.

5. Site Supervision will ensure all appropriate LOTO devices needed for site equipment are on hand and ready for placement.

6. Site Supervision may designate one or more crew foreman to help implement the LOTO plan as long as they have had CSI LOTO training to include this site specific plan.

7. Site Supervision or designee shall be the only person(s) to operate any breakers/switches/disconnecting devices and place an energy isolating LOTO device on the equipment. A lockout must then be used as originating isolation means to establish custody of the equipment under LOTO. A tag must be placed on each lock with name and phone #.

8. Site Supervision shall review with Site Safety the availability and use of proper PPE for any testing/troubleshooting.

9. All originating lockout keys to be placed in the lock box and in custody of Site Supervision. Site Supervision shall ensure his lock is placed on the lock box until all other locks have been removed by the authorized employees. If the Site Supervisor or his designee must leave the site there shall be a transfer of custody approved by the Site Supervisor and follow the same procedure. Lock boxes will be stored in a secure location after hours.

10. All CSI employees authorized to work under LOTO equipment will be given one Lock/key/tag, or one tag/zip tie combination to personally apply to a group hasp or lock box. The group LOTO must remain under the custody and control of a Site Supervisor or designee.

11. All other authorized contractors working under CSI controlled LOTO must follow the direction of the CSI LOTO Supervisor and CSI’s LOTO Plan, Policies, and Procedures.

12. All authorized CSI employees working on circuits and or equipment that has potential of energization shall verify status with their foreman. The individual shall then verify isolation and LOTO status at the source, apply LOTO when approved to perform work, and verify
absence of voltage using three point test (Live, Dead, Live). Verification of absence of voltage is completed with appropriately rated voltage meter. Inductance testers are not a means for testing for absence of voltage but can be used as a “double check” safe work practice after verification has been completed. (AC only)

13. Testing and troubleshooting is considered energized work and requires a hazard analysis to determine the voltage, appropriate PPE to be worn, and the boundaries for arc flash/shock.

14. LOTO logs will be placed in each area that LOTO may be applied. If there is not an appropriate area to keep the log then the LOTO Supervisor shall ensure safe keeping and accessibility. Application and removal of any LOTO must be documented on the LOTO log. Failure to complete the log is considered a safety violation and grounds for disciplinary action up to termination. (Log form Attached)

15. A group LOTO can only be removed by the original installer of the Lockout device. Once all employees have removed their tags and or locks, and the status of equipment is checked to be safe, then the LOTO may be removed. A tagout “only” carries the same weight and responsibility as a lock under the NFPA 70E standard for a group LOTO (NFPA 70E Article 120(D)(2)(d). The “LOTO Addendum for Clarification of Interpretation” form is attached for review.

16. Individual Locks/Tags are to be removed at the end of the day, or when the work is completed.

17. LOTO shall be inspected daily by the LOTO Supervisor for his area, and by any individual leaving a LOTO applied for more than one shift. Do not become complacent! Verify LOTO before continuing work!

18. The LOTO checklist shall be completed by the LOTO Supervisor before any work is performed down stream. This will be turned in and verified by Site Safety. (Form Attached)

19. The LOTO audit shall be completed by Site Supervision, or Site Safety, anytime a LOTO lasts for more than one shift, or anytime they deem necessary.

20. All LOTO forms shall be turned into Site Safety and hard copies kept on site for the duration of the project.
October 25, 2019

Via Email Only

George Bone
CSI Electrical Contractors, Inc.
10623 Fulton Wells Rd.
Santa Fe Springs, CA 90670
George.Bone@csielectric.com

RE: Appeal of CSI Electrical Contractors, Inc.
Inspection No: 1399221

Dear Mr. Bone:

Enclosed for your information and records is a copy of the “Notice of Docketed Appeal” regarding the appeal filed on behalf of CSI Electrical Contractors, Inc. in the above-referenced matter. Also enclosed is a Mandatory Notice to Employees, which is provided as a sample and must be posted, along with a copy of the docketed appeal forms, at or near the site of the violation or in a conspicuous place where it is readily observable by employees, such as a bulletin board.

As always, should you have any questions, please do not hesitate to contact me.

Sincerely,

Sean Paisan

SP/dk
Enclosures
ATTN: George Bone
CSI Electrical Contractors, Inc.
10623 Fulton Wells Rd.
Santa Fe Springs, CA 90670
DECLARATION OF SERVICE BY MAIL OR EMAIL

I, Wynnie Bell, declare:

1. I am at least 18 years of age, not a party to this action, and I am employed in Sacramento County at 2520 Venture Oaks Way, Suite 300, Sacramento, CA 95833.

2. On __ 10/21/2019 __, I served a copy of the attached Notice of Docketed Appeal in an envelope addressed as shown below and placed the envelope for collection and mailing on the date and at the place shown in Item 3 following our ordinary business practices. I am readily familiar with this business’s practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

3. Date mailed: 10/21/2019  Place mailed: (city, state): Sacramento, CA

   Attn: George Bone
   CSI Electrical Contractors, Inc.
   10623 Fulton Wells Rd.
   Santa Fe Springs, CA  90670

4. On __ 10/21/2019 __, I electronically served the document listed in Item 2 as follows:

<table>
<thead>
<tr>
<th>NAME OF PERSON SERVED</th>
<th>ELECTRONIC SERVICE ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chris Grossgart, DOSH Legal</td>
<td><a href="mailto:cgrossgart_doshlegal@dir.ca.gov">cgrossgart_doshlegal@dir.ca.gov</a></td>
</tr>
<tr>
<td>Rocío Reyes, DOSH Legal</td>
<td><a href="mailto:rrreyes_doshlegal@dir.ca.gov">rrreyes_doshlegal@dir.ca.gov</a></td>
</tr>
<tr>
<td>DOSH Northern Office</td>
<td><a href="mailto:doshlegal_oak@dir.ca.gov">doshlegal_oak@dir.ca.gov</a></td>
</tr>
<tr>
<td>Efren Gorrez</td>
<td><a href="mailto:Egomez@dir.ca.gov">Egomez@dir.ca.gov</a></td>
</tr>
<tr>
<td>Sean Palsan</td>
<td><a href="mailto:sean.palsan@ogletree.com">sean.palsan@ogletree.com</a></td>
</tr>
<tr>
<td>DOSH Southern Office</td>
<td><a href="mailto:doshlegal_la@dir.ca.gov">doshlegal_la@dir.ca.gov</a></td>
</tr>
</tbody>
</table>

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

Wynnie Bell

(TYPE OR PRINT NAME OF DECLARANT)  Wynnie Bell

(SIGNATURE OF DECLARANT)
The California Occupational Safety and Health Appeals Board (Appeals Board) has received your completed appeal. For all future correspondence, please use the Inspection Number that appears on this document above. Your appeal has been assigned to Administrative Law Judge James Kevin Elmendorf to begin the adjudication process.

The attached docketed appeal package contains the following information regarding your appeal:

1. A printed appeal form containing all the information you provided to the Appeals Board. Please review the appeal form carefully to ensure that we correctly entered your important information and all of the items you intended to appeal.

2. Employer's Mandatory Posting Requirements includes instructions and information explaining your obligation to post information about your appeal and report the posting to the Cal/OSHA District Manager.

3. A blank Mandatory Participation Notice to Employees for you to fill out and post at or near the worksite where the citation was issued.

Copies of this package have also been sent to your representative (if any), the Division of Occupational Safety and Health (Cal/OSHA) and any other party to this proceeding.

All communications and/or questions regarding your docketed appeal can be addressed by calling the California Occupational Safety and Health Appeals Board at (916) 274-5751.
## OSHAB APPEAL FORM

Note: You have a total of 15 working days from receipt of a citation to file an appeal. Attach a complete copy of your citation package along with this appeal form. Failure to file a completed form may result in dismissal of the appeal. Late appeals will not be accepted unless good cause is shown. Please print legibly or type all information.

### CITATION INFORMATION

<table>
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<tr>
<th>1. Case (Inspection) #: 1399221</th>
<th>Issuance date: 10/15/2019</th>
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<td>2. Employer: CSI ELECTRICAL CONTRACTORS, INC.</td>
<td>Date Citation Received: 10/15/2019</td>
<td></td>
</tr>
<tr>
<td>3. Employer legal name or DBA (Optional):</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Employer contact: George Bone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Address: 10623 FULTON WELLS RD.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State: CA</td>
<td>ZIP code: 90870</td>
<td></td>
</tr>
<tr>
<td>City: Santa Fe Springs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Primary phone: (662) 946-0700</td>
<td>Secondary phone:</td>
<td></td>
</tr>
<tr>
<td>7. Email address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Preferred method of service:</td>
<td>U.S. Postal Service</td>
<td>OR</td>
</tr>
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</table>

### REPRESENTATIVE INFORMATION (If any)

| 1. Firm name: Ogletree Deakins |
| 2. Representative name: Sean Paisan |
| 3. Address: 695 Town Center Drive, 15th Floor | |
| City: Costa Mesa | State: CA | ZIP code: 92626 |
| 4. Primary phone: (714) 800-7900 | Secondary phone: |
| 5. Email address: sean.paisan@ogletree.com | |
| 6. Preferred method of service: | U.S. Postal Service | OR | Email | (Choose one only) |

### CONTACT INFORMATION AND SIGNATURE

I am the: Representative | Employer | Other |

I understand that it is my responsibility under Appeals Board regulations to notify the Appeals Board in writing if there are any changes to either employer or representative address, telephone number, and/or email address.

**SIGNATURE ON FILE**

| October 16, 2019 |
| Signature of employer or employer's representative |
| Date |
| Sean Paisan | (714) 800-7900 |
| Print name and title | Phone No. |
1. This is an Appeal of:

   X CITATION AND NOTIFICATION OF PENALTY
   CITATION No.: 1 ITEM No.: 1
   __ NOTIFICATION OF FAILURE TO ABATE ALLEGED VIOLATION
   — SPECIAL ORDER / ORDER TO TAKE SPECIAL ACTION

2. Specific ground(s) for this appeal are: (Check all that apply)

   X The safety order was not violated.
   X The classification (i.e. serious, willful, repeat) is incorrect.
   __ The abatement requirements are unreasonable:
       Required changes  Time allowed to complete changes
   X The proposed penalty is unreasonable.

3. An affirmative defense is a justification or excuse that if proved by appellant relieves the
cited employer of all or some of the responsibility for the alleged violation. An affirmative
defense must be raised by the appellant in a timely manner. Affirmative defenses for this
appeal are: (Check all that apply)

   X Independent employee action caused the violation.
   X A different safety order applied to the work activity that is the subject of the citation, and
   the appellant was in compliance with that other safety order. (The different safety order
   should be identified.) TO BE DETERMINED
   X An exception exists in the California Code of Regulations, Title 8 which allows for the
   action that is the subject of the citation. (The specific safety order containing the exception
   should be identified.) TO BE DETERMINED
   X The inspection that gave rise to the citation was invalid because the Division employee
   who inspected the appellant's worksite failed to comply with laws governing administrative
   searches.
   X Another affirmative defense: other affirmative defenses may exist and can be asserted by
   the employer. If the appellant contends one or more affirmative defenses exist, the appellant
   may, but is not required to, provide a short, plain statement in writing setting forth the facts
   or circumstances which, if true, would prove the affirmative defense.
EMPLOYER'S MANDATORY POSTING REQUIREMENTS

This Notice must be posted in accordance with sections 356 and 356.1 of the California Code of Regulations, title 8. These rules are posted at www.dir.ca.gov/OSHA. Click on "Laws and Regulations".

PARTICIPATION NOTICE – Service and Posting
This notice to employees of their right to participate in the appeal process and a copy of the docketed Appeal and contested citation(s) must be posted at or near the site of the alleged violation or other conspicuous place where it can easily be seen by the employees. These documents must also be served on any authorized employee representative. These documents must also be served by employer on any employee who suffered a serious injury and on the representative of any employee who was killed. Following posting, an employer must file with the Division of Occupational Safety and Health (Cal/OSHA) proof of posting of the Participation Notice and any docketed Appeal Form. (Cal. Code Regs., title 8, § 356).

NOTICE OF HEARING
The Notice of Hearing must be posted in the same manner as this notice, and served by the employer on any authorized employee representative. The Notice of Hearing must also be served by the employer on any employee who suffered a serious injury and on the representative of any employee who was killed. (Cal. Code Regs., title 8, § 356).

DISCOVERY AND SUBPOENAS
Each party, upon written request to another party, may obtain (unless privileged) the names and addresses of witnesses known to the other party, or inspect and copy documents relating to the case in the possession of the other party (Cal. Code Regs., title 8, § 372 and § 372.1). Subpoenas for attendance of a person or production of documents or things at a hearing may be obtained from the Appeals Board (Cal. Code Regs., title 8, § 372.2).

CHANGE OF REPRESENTATIVE AND ADDRESS
If there is a change in the appointed representative or if the representative has a change in contact information (i.e. address, phone number, email address, etc.) after the appeal is filed, a written notification must be sent to the Appeals Board. Changes can also be made online by completing the applicable form available at www.dir.ca.gov/OSHA.

HEARING
The Hearing is before an administrative law judge, and evidence will be taken in a manner best suited to discover facts and safeguard the rights of the parties. Each party may call and examine witness, introduce exhibits, and question opposing witnesses on relevant issues. A party may be called to testify by the other party (Cal. Code Regs., title 8, § 376.1). Only relevant evidence will be admitted.

DECISION
A written Decision by the Administrative Law Judge will be issued after the case is submitted for decision.

PRINCIPAL OFFICE
Department of Industrial Relations
Occupational Safety & Health Appeals Board
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 274-5751

SOUTHERN CALIFORNIA OFFICE
Department of Industrial Relations
Occupational Safety & Health Appeals Board
100 N. Barranca Street, Suite 410
West Covina, CA 91791
(626) 332-1145
MANDATORY PARTICIPATION NOTICE
TO EMPLOYEES

Your Employer,

CSI Electrical Contractors, Inc.

(Name of Company)

has been cited by the California Division of Occupational Safety and Health for violation of an Occupational Safety and Health standard.

(Check which of the following is applicable)

X The citation and/or civil penalty has been contested and will be the subject of a hearing before the Occupational Safety and Health Appeals Board; and/or

___ The reasonableness of the period prescribed by the Division of Occupational Safety and Health for abatement of the violation has been contested and will be the subject of a hearing before the Occupational Safety and Health Appeals Board.

Affected employees are entitled to participate in this hearing as parties under terms and conditions established by the Occupational Safety and Health Appeals Board as published in the California Code of Regulations, title 8, commencing with section 345 by filing a motion for party status.

The motion for party status shall be sent to:

Occupational Safety and Health Appeals Board
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833

The motion for party status must be accompanied by a proof of service and shall indicate it was served on the Division of Occupational Safety and Health and the Employer and any other parties as provided in California Code of Regulations, title 8, section 355.3.

All papers filed relative to this matter may be inspected at:
(Describe location reasonably convenient to employees, preferably at or near workplace)
OSHA VIOLATION (2017)

Inspection Number: 1231617.015
Issuance Date: 5/31/2017
Case Status: Violation Under Contest (attached)
Contest Date: 6/21/2017
SAFETY ACTION PLAN

Cal-OSHA Citations

Date of citation notice: 5/31/2017
Inspection Number: 1231617.015
Citation 1 (General): Title 8 CCR Section 3395 Heat Illness Prevention

Inspection Site: 1900 E. Lambert Rd.
Brea, CA 92821

During the course of a Cal-OSHA inspection on 4/21/17, CSI Supervision was unable to provide training records for Heat Illness Prevention.

Immediate Corrective Actions:
The training records were not located on site and were provided to Cal-OSHA from the CSI main office the following day.

Root Cause:
Training records are not kept on site.

Additional Corrective Actions:
Heat Illness Prevention Training records will be easily accessible to all Supervisors via BOX files and or by reaching the CSI Safety Department.

Additional Actions:
CSI has filed an appeal to this citation.
Date of citation notice: 5/31/2017
Inspection Number: 1231617
Citation 2 (Serious): Title 8 CCR 3646 Operating Instructions (Elevating Work Platforms)

Inspection Site: 1900 E. Lambert Rd.
Brea, CA 92821

During the course of a Cal-OSHA inspection on 4/21/2017, a CSI employee was found to be working while standing on the mid-rail of an elevating work platform (Scissor lift- Skyjack SJ8831 RT). The employee was wearing a harness and fall restraint lanyard to ensure the employee could not fall outside the guard rail system.

**Immediate Corrective Actions:**
The employee halted his work and an immediate stand down with the crew performed to discuss modifying the job steps to complete the work without standing on the mid-rail.

**Root Cause:**
Employee needed to reach farther than the lift would allow while standing on the platform floor.
The module installation was poorly designed by the manufacturer.

**Additional Corrective Actions:**
All employees at this site were given additional remedial operator training.

CSI communicated citation to all Site Supervision and requested a stand-down with their crews to discuss safe Elevated Work Platform operations.

CSI Management has presented this citation to the Safety Committee for review. The Safety Committee has recommended:

- Filing for a variance with Cal-OSHA if extended reach is needed.
- Contacting the module manufacturer to encourage changing the poor design and installation method.

**Additional Actions:**
CSI has filed an appeal to this citation.
**Inspection Detail**

**Case Status: VIOLATIONS UNDER CONTEST**

**Note:** The following inspection has not been indicated as closed. Please be aware that the information shown may change, e.g., violations may be added or deleted. For open cases, in which a citation has been issued, the citation information may not be available for 5 days following receipt by the employer for Federal inspections or for 30 days following receipt by the employer for State Inspections.

**Inspection: 1231617.015 - CSI Electrical Contractors, Inc.**

**Inspection Information - Office: Ca Santa Ana District Office**

- **Nr:** 1231617.015
- **Report ID:** 0950631
- **Open Date:** 04/23/2017

**CSI Electrical Contractors, Inc.**

- **1900 E. Lambert Rd.,
  
  Brea, CA 92821**
- **Union Status:** Union
- **SIC:**
- **NAICS:** 238210/Electrical Contractors
- **Mailing:** 10023 Fulton Wells Ave., Santa Fe Springs, CA 90670

**Inspection Type:** Referral

**Scope:** Partial

**Owner:** Private

**Safety/Health:** Safety

**Close Conference:** 05/31/2017

**Close Case:**

**Related Activity:**

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**Violation Summary**

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**Violation Items**

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To:
CSI ELECTRICAL CONTRACTORS, INC.
and its successors
10623 Fulton Wells Ave.
Santa Fe Springs, CA 90670

Inspection Site:
1900 E. Lambert Rd.
Brea, CA 92821

Inspection #: 1231617
Inspection Date(s): 04/21/2017 - 05/31/2017
Issuance Date: 05/31/2017
CShO ID: Y7043
Optional Report #: 063-17
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.
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, repeated, 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
Cashier, Accounting Office
P. O. Box 420603
San Francisco, CA 94142-0603

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 timeframe 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
EMPLYEE 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.
Citation and Notification of Penalty

Company Name: CSI ELECTRICAL CONTRACTORS, INC.
Establishment DBA: and its successors
Inspection Site: 1900 E. Lambert Rd.
Brea, CA 92821

Citation 1 Item 1 Type of Violation: General

California Code of Regulations, Title 8 Section 3395. Heat Illness Prevention

(h) Training.

(1) Employee training. Effective training in the following topics shall be provided to each supervisory and non-supervisory employee before the employee begins work that should reasonably be anticipated to result in exposure to the risk of heat illness:

(A) The environmental and personal risk factors for heat illness, as well as the added burden of heat load on the body caused by exertion, clothing, and personal protective equipment.
(B) The employer's procedures for complying with the requirements of this standard, including, but not limited to, the employer's responsibility to provide water, shade, cool-down rests, and access to first aid as well as the employees' right to exercise their rights under this standard without retaliation.
(C) The importance of frequent consumption of small quantities of water, up to 4 cups per hour, when the work environment is hot and employees are likely to be sweating more than usual in the performance of their duties.
(D) The concept, importance, and methods of acclimatization pursuant to the employer's procedures under subsection (i)(4).
(E) The different types of heat illness, the common signs and symptoms of heat illness, and appropriate first aid and/or emergency responses to the different types of heat illness, and in addition, that heat illness may progress quickly from mild symptoms and signs to serious and life threatening illness.
(F) The importance to employees of immediately reporting to the employer, directly or through the employee's supervisor, symptoms or signs of heat illness in themselves, or in co-workers.
(G) The employer's procedures for responding to signs or symptoms of possible heat illness, including how emergency medical services will be provided should they become necessary.
(H) The employer's procedures for contacting emergency medical services, and if necessary, for transporting employees to a point where they can be reached by an emergency medical service provider.
(I) The employer's procedures for ensuring that, in the event of an emergency, clear and precise
directions to the work site can and will be provided as needed to emergency responders. These procedures shall include designating a person to be available to ensure that emergency procedures are invoked when appropriate.

Prior to and during the course of the inspection, including, but not limited to, on April 21, 2017, the employer failed to ensure effective training was provided to each supervisory and non-supervisory employee before the employee begins work that should reasonably be anticipated to result in exposure to the risk of heat illness.

Date By Which Violation Must Be Abated: July 05, 2017
Proposed Penalty: $420.00
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

Inspection #:  1231617  
Inspection Dates:  04/21/2017 - 05/31/2017  
Issuance Date:  05/31/2017  
CSHO ID:  Y7043  
Optional Report #:  053-17

Citation and Notification of Penalty

Company Name:  CSI ELECTRICAL CONTRACTORS, INC.  
Establishment DBA:  and its successors  
Inspection Site:  1900 E. Lambert Rd.  Brea, CA 92821

Citation 2 Item 1  
Type of Violation:  Serious

Title 8 California Code of Regulations 3646. Operating Instructions (Elevating Work Platforms).

(e) Employees shall not sit, stand or climb on the guardrails of an elevating work platform or use planks, ladders, or other devices to gain greater working height or reach.

Prior to and during the course of the inspection, including but not limited to, on April 21, 2017, the Employer failed to ensure that Employees would not stand on the guardrails of an elevating work platform (Skyjack SJ8831 RT) to gain greater working height or reach.

Date By Which Violation Must be Abated:  
Proposed Penalty:  
Corrected During Inspection:  $8435.00

Tom Birkett / Richard Fazdollahi  
Compliance Officer / District Manager

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 7 of 9  
Cal/OSHA-2 V1 Rev 2/2015
NOTICE OF PROPOSED PENALTIES

Company Name: CSI ELECTRICAL CONTRACTORS, INC.
Establishment DBA: and its successors
Inspection Site: 1900 E. Lambert Rd., Brea, CA 92821
Mailing Address: 10623 Fulton Wells Ave., Santa Fe Springs, CA 90670
Issuance Date: 05/31/2017
Reporting ID: 0950631
CSHO ID: Y7043

Summary of Penalties for Inspection Number 1231617

<table>
<thead>
<tr>
<th>Citation Item</th>
<th>Description</th>
<th>Penalty Amount</th>
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<tbody>
<tr>
<td>1 Item 1</td>
<td>General</td>
<td>$420.00</td>
</tr>
<tr>
<td>2 Item 1</td>
<td>Serious</td>
<td>$8435.00</td>
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<tr>
<td><strong>TOTAL PROPOSED PENALTIES:</strong></td>
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<td><strong>$8855.00</strong></td>
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Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form.

If you are paying electronically: Please have this form on-hand when you are ready to make your payment. The company name, reporting ID and Citation number(s) will be required 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: Mail this Notice of Proposed Penalties, the Penalty Remittance Form, along with a copy of the Citation and Notification of Penalty to:

DEPARTMENT OF INDUSTRIAL RELATIONS
CASHIER, ACCOUNTING OFFICE
P. O. BOX 420603
SAN FRANCISCO, CA 94142-0603

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.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH – CAL/OSHA
Accounting Office - Cashiering Unit
P.O. Box 420603
San Francisco, CA 94142-0603
Phone (415) 703-4291 or (415) 703-4308  Fax (415) 703-3037

Please mail or fax this form back to the above address to properly credit your payment.

PENALTY REMITTANCE FORM

<table>
<thead>
<tr>
<th>CIVIL PENALTY INFO</th>
<th>INSPECTION NO.:</th>
<th>1231517</th>
<th>REPORTING ID:</th>
<th>0950631</th>
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<tr>
<td>ESTABLISHMENT NAME:</td>
<td>CSI ELECTRICAL CONTRACTORS, INC.</td>
<td>FEIN/SEIN:</td>
<td>UNKNOWN</td>
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<tr>
<td>CONTACT PERSON:</td>
<td>Richard Samanieg</td>
<td>PHONE NO.:</td>
<td>UNKNOWN</td>
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<tr>
<td>SITE ADDRESS:</td>
<td>1900 E. Lambert Rd., Brea, CA 92821</td>
<td>FAX NO.:</td>
<td>UNKNOWN</td>
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<tr>
<td>MAILING ADDRESS:</td>
<td>10623 Fulton Wells Ave., Santa Fe Springs, CA 90670</td>
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<td></td>
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</table>

CITATION INFORMATION: Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this Citation, remittance is still due on all items that are not appealed.

PAYMENT INSTRUCTIONS:
- Put a "✓" next to the Citation(s) that you are paying.
- Write the amount paid in the "AMOUNT PAID" column.
- Please indicate the "TOTAL AMOUNT PAID".

<table>
<thead>
<tr>
<th>SUMMARY OF PENALTIES PAID</th>
<th>AMOUNT PAID</th>
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<tr>
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<td>$</td>
</tr>
<tr>
<td>Citation 2 Item 1, Serious</td>
<td>$</td>
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<tr>
<td>TOTAL AMOUNT PAID</td>
<td>$</td>
</tr>
</tbody>
</table>

TYPE OF PAYMENT ENCLOSED

Fill in the check, e-check reference, or money order information below:

| CHECK # ___________________ ENCLOSED IN THE AMOUNT OF: | $ |
| E-CHECK REFERENCE # ___________________ PAID IN THE AMOUNT OF: | $ |
| MONEY ORDER # ___________________ ENCLOSED IN THE AMOUNT OF: | $ |

Please make check or money order payable to Department of Industrial Relations - Cal/OSHA and mail to the Cashier, Accounting Office, at the above address. Reference the Inspection Number on the "memo" portion of your check or money order. Note: For your convenience, the Department of Industrial Relations accepts electronic payments at www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html. Again, please mail or fax this form to the above address or fax

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 9 of 9  Cal/OSHA-2 V1 Rev 2/2015
NOTICE OF VERIFICATION OF ABATEMENT OF SERIOUS VIOLATIONS

CSI ELECTRICAL CONTRACTORS, INC.
10623 Fulton Wells Ave.
Santa Fe Springs, CA 90670

During the course of an inspection or re-inspection at a place of employment located at:

1900 E. Lambert Rd.
Brea, CA 92821

The Division has verified abatement of the following Citation(s) alleging a serious violation or Special Orders(s) or Orders(s) to Take Special Action:

<table>
<thead>
<tr>
<th>Citation or Order No.</th>
<th>Number of Instances</th>
<th>Date Division Verified Abatement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Citation 2 Item 1</td>
<td>1</td>
<td>April 21, 2017</td>
</tr>
</tbody>
</table>

Signature: [Signature]
Date of Issuance: May 31, 2017

This notice is provided to the employer in accordance with the provisions of California Labor Code Section 6318(b). The employer is required to post this notice for three (3) working days at or near the location of the alleged violation.
EMPLOYER'S SIGNED STATEMENT OF ABATEMENT OF
REGULATORY AND/OR GENERAL VIOLATIONS

CSI ELECTRICAL CONTRACTORS, INC.
10623 Fulton Wells Ave.
Santa Fe Springs, CA 90670

The law requires that violations observed during the inspection completed on 05/31/2017 of the place of employment located at 1900 E. Lambert Rd., Brea, CA be corrected within the time limit specified. Please notify the Division as soon as these conditions have been corrected by returning this completed form. Your response by completing, signing and mailing this form to the issuing office on or before the compliance date may avoid a follow-up inspection of your facilities. Failure to timely complete and return this form may result in issuance of a citation and civil penalty for violation of 8 CCR 340.4(c).

NOTE: This form does not serve as a request for a time extension. If there are serious problems beyond your control that prevent meeting a specified abatement date, contact the Division early, well within the 15-day limit allowed for an appeal.

PLEASE COMPLETE AND MAIL BY June 5, 2017

LIST THE SPECIFIC MEASURES & EQUIPMENT TAKEN TO CORRECT EACH CITATION & ITEM NUMBER OF THE UNSAFE CONDITIONS AND DATE OF ABATEMENT.

☐ Continued on additional page

All affected employees and their representatives have been informed about abatement activities referenced in this document in conformance with 8 CCR Section 340.4(g). ☐ Yes ☐ No

This certifies that all the unsafe conditions listed in the Division's citation dated UNKNOWN have now been corrected and all submitted abatement information is accurate.

Signature: ___________________________ Date: ___________________________

Name: ___________________________ Title: ___________________________

OFFICE USE ONLY

Compliance Safety and Health Officer: ___________________________ Date: ___________________________

District Manager: ___________________________ Date: ___________________________

[ ] Close/Comments

RID: 0950631 Inspection Nr: 1231617 CSHO ID: Y7043 Optional Report Nr: 053-17

Date mailed or delivered: May 31, 2017
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

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFRS 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 have ADDITIONAL INSURED provisions or 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: Bolton & Company
3475 E. Foothill Blvd., Suite 100
Pasadena, CA 91107
www.boltonco.com 0008309

INSURER(S):
CSI Electrical Contractors, Inc.
CSI, Inc.
PO: Box 2887
Santa Fe Springs, CA 90670

INSURED:

CERTIFICATE NUMBER: 57162672
REVISIION NUMBER:

COVERAGE

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

COVERAGES

INSTRUMENT TYPE OF INSURANCE ADD'L INSD INSD SUB-LOC POLICY NUMBER POLICY EFF (MM/DD/YYYY) POLICY EXP (MM/DD/YYYY) LIMITS

A ✓ COMMERCIAL GENERAL LIABILITY
CLAIMS-MADE ✓ OCCUR

BAP 0625288-01
7/15/2020
7/15/2021

ALERT LIABILITY

A ✓ ANY AUTO
OWNED AUTOS ONLY HIRED AUTOS ONLY SCHEDULED AUTOS NON-OWNED AUTOS ONLY

ZUP-61N16267-20-NF
7/15/2020
7/15/2021

B ✓ UMBRELLA LIABILITY
OCCUR CLAIMS-MADE

A ✓ WORKERS COMPENSATION AND EMPLOYER'S LIABILITY
E.L. DISEASE - EA EMPLOYEE

WC 0625287-01
7/15/2020
7/15/2021

CEO 6079006869
003444302
RH3 H267525 00
7/15/2020
7/15/2021
7/15/2021
7/15/2021

C Professional Liability, SIR $75,000
D Contractors Pollution Liability
E Installation Floater

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

Chau Tran

CERTIFICATE HOLDER

Re: MVRWRF Solids Handling MCC Replacement Bid
Eastern Municipal Water District
Attn: Field Engineering Department
P.O. Box 8300
Perris, CA 92570-8300

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ACORD 25 (2016/03)
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the:

- Business Auto Coverage Form
- Motor Carrier Coverage Form

A. Amended Who Is An Insured

1. The following is added to the Who Is An Insured Provision in Section II – Covered Autos Liability Coverage:

   The following are also "insureds":

   a. Any "employee" of yours is an "insured" while using a covered "auto" you don't own, hire or borrow for acts performed within the scope of employment by you. Any "employee" of yours is also an "insured" while operating an "auto" hired or rented under a contract or agreement in an "employee's" name, with your permission, while performing duties related to the conduct of your business.

   b. Anyone volunteering services to you is an "insured" while using a covered "auto" you don't own, hire or borrow to transport your clients or other persons in activities necessary to your business.

   c. Anyone else who furnishes an "auto" referenced in Paragraphs A.1.a. and A.1.b. in this endorsement.

   d. Where and to the extent permitted by law, any person(s) or organization(s) where required by written contract or written agreement with you executed prior to any "accident", including those person(s) or organization(s) directing your work pursuant to such written contract or written agreement with you, provided the "accident" arises out of operations governed by such contract or agreement and only up to the limits required in the written contract or written agreement, or the Limits of Insurance shown in the Declarations, whichever is less.

2. The following is added to the Other Insurance Condition in the Business Auto Coverage Form and the Other Insurance – Primary and Excess Insurance Provisions Condition in the Motor Carrier Coverage Form:

   Coverage for any person(s) or organization(s), where required by written contract or written agreement with you executed prior to any "accident", will apply on a primary and non-contributory basis and any insurance maintained by the additional "insured" will apply on an excess basis. However, in no event will this coverage extend beyond the terms and conditions of the Coverage Form.

B. Amendment – Supplementary Payments

Paragraphs a.(2) and a.(4) of the Coverage Extensions Provision in Section II – Covered Autos Liability Coverage are replaced by the following:

(2) Up to $5,000 for the cost of bail bonds (including bonds for related traffic law violations) required because of an "accident" we cover. We do not have to furnish these bonds.

(4) All reasonable expenses incurred by the "insured" at our request, including actual loss of earnings up to $500 a day because of time off from work.

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C. Fellow Employee Coverage

The **Fellow Employee** Exclusion contained in Section II – **Covered Autos Liability Coverage** does not apply.

D. Driver Safety Program Liability and Physical Damage Coverage

1. The following is added to the **Racing** Exclusion in Section II – **Covered Autos Liability Coverage**:

   This exclusion does not apply to covered "autos" participating in a driver safety program event, such as, but not limited to, auto or truck rodeos and other auto or truck agility demonstrations.

2. The following is added to Paragraph 2. in the **Exclusions** of Section III – **Physical Damage Coverage** of the Business Auto Coverage Form and Paragraph 2.b. in the **Exclusions** of Section IV – **Physical Damage Coverage** of the Motor Carrier Coverage Form:

   This exclusion does not apply to covered "autos" participating in a driver safety program event, such as, but not limited to, auto or truck rodeos and other auto or truck agility demonstrations.

E. Lease or Loan Gap Coverage

The following is added to the **Coverage** Provision of the **Physical Damage Coverage** Section:

**Lease Or Loan Gap Coverage**

In the event of a total "loss" to a covered "auto", we will pay any unpaid amount due on the lease or loan for a covered "auto", less:

a. Any amount paid under the **Physical Damage Coverage** Section of the Coverage Form; and

b. Any:

   1. Overdue lease or loan payments at the time of the "loss";
   2. Financial penalties imposed under a lease for excessive use, abnormal wear and tear or high mileage;
   3. Security deposits not returned by the lessor;
   4. Costs for extended warranties, credit life insurance, health, accident or disability insurance purchased with the loan or lease; and
   5. Carry-over balances from previous leases or loans.

F. Towing and Labor

Paragraph A.2. of the **Physical Damage Coverage** Section is replaced by the following:

We will pay up to $75 for towing and labor costs incurred each time a covered "auto" of the private passenger type is disabled. However, the labor must be performed at the place of disablement.

G. Extended Glass Coverage

The following is added to Paragraph A.3.a. of the **Physical Damage Coverage** Section:

If glass must be replaced, the deductible shown in the Declarations will apply. However, if glass can be repaired and is actually repaired rather than replaced, the deductible will be waived. You have the option of having the glass repaired rather than replaced.

H. Hired Auto Physical Damage – Increased Loss of Use Expenses

The **Coverage Extension** for **Loss Of Use Expenses** in the **Physical Damage Coverage** Section is replaced by the following:

**Loss Of Use Expenses**

For Hired Auto Physical Damage, we will pay expenses for which an "insured" becomes legally responsible to pay for loss of use of a vehicle rented or hired without a driver under a written rental contract or written rental agreement. We will pay for loss of use expenses if caused by:
Includes copyrighted material of Insurance Services Office, Inc., with its permission.

(1) Other than collision only if the Declarations indicate that Comprehensive Coverage is provided for any covered "auto";

(2) Specified Causes Of Loss only if the Declarations indicate that Specified Causes Of Loss Coverage is provided for any covered "auto"; or

(3) Collision only if the Declarations indicate that Collision Coverage is provided for any covered "auto".

However, the most we will pay for any expenses for loss of use is $100 per day, to a maximum of $3000.

I. Personal Effects Coverage

The following is added to the Coverage Provision of the Physical Damage Coverage Section:

**Personal Effects Coverage**

a. We will pay up to $750 for "loss" to personal effects which are:

   (1) Personal property owned by an "insured"; and
   (2) In or on a covered "auto".

b. Subject to Paragraph a. above, the amount to be paid for "loss" to personal effects will be based on the lesser of:

   (1) The reasonable cost to replace; or
   (2) The actual cash value.

c. The coverage provided in Paragraphs a. and b. above, only applies in the event of a total theft of a covered "auto". No deductible applies to this coverage. However, we will not pay for "loss" to personal effects of any of the following:

   (1) Accounts, bills, currency, deeds, evidence of debt, money, notes, securities, or commercial paper or other documents of value.
   (2) Bullion, gold, silver, platinum, or other precious alloys or metals; furs or fur garments; jewelry, watches, precious or semi-precious stones.
   (3) Paintings, statuary and other works of art.
   (4) Contraband or property in the course of illegal transportation or trade.
   (5) Tapes, records, discs or other similar devices used with audio, visual or data electronic equipment.

Any coverage provided by this Provision is excess over any other insurance coverage available for the same "loss".

J. Tapes, Records and Discs Coverage

1. The Exclusion in Paragraph B.4.a. of Section III – Physical Damage Coverage in the Business Auto Coverage Form and the Exclusion in Paragraph B.2.c. of Section IV – Physical Damage Coverage in the Motor Carrier Coverage Form does not apply.

2. The following is added to Paragraph 1.a. Comprehensive Coverage under the Coverage Provision of the Physical Damage Coverage Section:

   We will pay for "loss" to tapes, records, discs or other similar devices used with audio, visual or data electronic equipment. We will pay only if the tapes, records, discs or other similar audio, visual or data electronic devices:

   (a) Are the property of an "insured"; and
   (b) Are in a covered "auto" at the time of "loss".

   The most we will pay for such "loss" to tapes, records, discs or other similar devices is $500. The Physical Damage Coverage Deductible Provision does not apply to such "loss".
K. Airbag Coverage

The Exclusion in Paragraph B.3.a. of Section III – Physical Damage Coverage in the Business Auto Coverage Form and the Exclusion in Paragraph B.4.a. of Section IV – Physical Damage Coverage in the Motor Carrier Coverage Form does not apply to the accidental discharge of an airbag.

L. Two or More Deductibles

The following is added to the Deductible Provision of the Physical Damage Coverage Section:

If an accident is covered both by this policy or Coverage Form and by another policy or Coverage Form issued to you by us, the following applies for each covered "auto" on a per vehicle basis:

1. If the deductible on this policy or Coverage Form is the smaller (or smallest) deductible, it will be waived; or
2. If the deductible on this policy or Coverage Form is not the smaller (or smallest) deductible, it will be reduced by the amount of the smaller (or smallest) deductible.

M. Physical Damage – Comprehensive Coverage – Deductible

The following is added to the Deductible Provision of the Physical Damage Coverage Section:

Regardless of the number of covered "autos" damaged or stolen, the maximum deductible that will be applied to Comprehensive Coverage for all "loss" from any one cause is $5,000 or the deductible shown in the Declarations, whichever is greater.

N. Temporary Substitute Autos – Physical Damage

1. The following is added to Section I – Covered Autos:

Temporary Substitute Autos – Physical Damage

If Physical Damage Coverage is provided by this Coverage Form on your owned covered "autos", the following types of vehicles are also covered "autos" for Physical Damage Coverage:

Any "auto" you do not own when used with the permission of its owner as a temporary substitute for a covered "auto" you do own but is out of service because of its:

1. Breakdown;
2. Repair;
3. Servicing;
4. "Loss"; or
5. Destruction.

2. The following is added to the Paragraph A. Coverage Provision of the Physical Damage Coverage Section:

Temporary Substitute Autos – Physical Damage

We will pay the owner for "loss" to the temporary substitute "auto" unless the "loss" results from fraudulent acts or omissions on your part. If we make any payment to the owner, we will obtain the owner's rights against any other party.

The deductible for the temporary substitute "auto" will be the same as the deductible for the covered "auto" it replaces.

O. Amended Duties In The Event Of Accident, Claim, Suit Or Loss

Paragraph a. of the Duties In The Event Of Accident, Claim, Suit Or Loss Condition is replaced by the following:

a. In the event of "accident", claim, "suit" or "loss", you must give us or our authorized representative prompt notice of the "accident", claim, "suit" or "loss". However, these duties only apply when the "accident", claim, "suit" or "loss" is known to you (if you are an individual), a partner (if you are a partnership), a member (if you are a limited liability company) or an executive officer or insurance manager (if you are a corporation). The failure of any
agent, servant or employee of the "insured" to notify us of any "accident", claim, "suit" or "loss" shall not invalidate the insurance afforded by this policy.

Include, as soon as practicable:

(1) How, when and where the "accident" or "loss" occurred and if a claim is made or "suit" is brought, written notice of the claim or "suit" including, but not limited to, the date and details of such claim or "suit";

(2) The "insured's" name and address; and

(3) To the extent possible, the names and addresses of any injured persons and witnesses.

If you report an "accident", claim, "suit" or "loss" to another insurer when you should have reported to us, your failure to report to us will not be seen as a violation of these amended duties provided you give us notice as soon as practicable after the fact of the delay becomes known to you.

P. Waiver of Transfer Of Rights Of Recovery Against Others To Us

The following is added to the Transfer Of Rights Of Recovery Against Others To Us Condition:

This Condition does not apply to the extent required of you by a written contract, executed prior to any "accident" or "loss", provided that the "accident" or "loss" arises out of operations contemplated by such contract. This waiver only applies to the person or organization designated in the contract.

Q. Employee Hired Autos – Physical Damage

Paragraph b. of the Other Insurance Condition in the Business Auto Coverage Form and Paragraph f. of the Other Insurance – Primary and Excess Insurance Provisions Condition in the Motor Carrier Coverage Form are replaced by the following:

For Hired Auto Physical Damage Coverage, the following are deemed to be covered "autos" you own:

(1) Any covered "auto" you lease, hire, rent or borrow; and

(2) Any covered "auto" hired or rented under a written contract or written agreement entered into by an "employee" or elected or appointed official with your permission while being operated within the course and scope of that "employee's" employment by you or that elected or appointed official's duties as respect their obligations to you.

However, any "auto" that is leased, hired, rented or borrowed with a driver is not a covered "auto".

R. Unintentional Failure to Disclose Hazards

The following is added to the Concealment, Misrepresentation Or Fraud Condition:

However, we will not deny coverage under this Coverage Form if you unintentionally:

(1) Fail to disclose any hazards existing at the inception date of this Coverage Form; or

(2) Make an error, omission, improper description of "autos" or other misstatement of information.

You must notify us as soon as possible after the discovery of any hazards or any other information that was not provided to us prior to the acceptance of this policy.

S. Hired Auto – World Wide Coverage

Paragraph 7a.(5) of the Policy Period, Coverage Territory Condition is replaced by the following:

(5) Anywhere in the world if a covered "auto" is leased, hired, rented or borrowed for a period of 60 days or less,

T. Bodily Injury Redefined

The definition of "bodily injury" in the Definitions Section is replaced by the following:

"Bodily injury" means bodily injury, sickness or disease, sustained by a person including death or mental anguish, resulting from any of these at any time. Mental anguish means any type of mental or emotional illness or disease.
U. Expected Or Intended Injury

The Expected Or Intended Injury Exclusion in Paragraph B. Exclusions under Section II – Covered Auto Liability Coverage is replaced by the following:

Expected Or Intended Injury

"Bodily injury" or "property damage" expected or intended from the standpoint of the "insured". This exclusion does not apply to "bodily injury" or "property damage" resulting from the use of reasonable force to protect persons or property.

V. Physical Damage – Additional Temporary Transportation Expense Coverage

Paragraph A.4.a. of Section III – Physical Damage Coverage is replaced by the following:

4. Coverage Extensions
   a. Transportation Expenses

   We will pay up to $50 per day to a maximum of $1,000 for temporary transportation expense incurred by you because of the total theft of a covered "auto" of the private passenger type. We will pay only for those covered "autos" for which you carry either Comprehensive or Specified Causes of Loss Coverage. We will pay for temporary transportation expenses incurred during the period beginning 48 hours after the theft and ending, regardless of the policy's expiration, when the covered "auto" is returned to use or we pay for its "loss".

W. Replacement of a Private Passenger Auto with a Hybrid or Alternative Fuel Source Auto

The following is added to Paragraph A. Coverage of the Physical Damage Coverage Section:

In the event of a total "loss" to a covered "auto" of the private passenger type that is replaced with a hybrid "auto" or "auto" powered by an alternative fuel source of the private passenger type, we will pay an additional 10% of the cost of the replacement "auto", excluding tax, title, license, other fees and any aftermarket vehicle upgrades, up to a maximum of $2500. The covered "auto" must be replaced by a hybrid "auto" or an "auto" powered by an alternative fuel source within 60 calendar days of the payment of the "loss" and evidenced by a bill of sale or new vehicle lease agreement.

To qualify as a hybrid "auto", the "auto" must be powered by a conventional gasoline engine and another source of propulsion power. The other source of propulsion power must be electric, hydrogen, propane, solar or natural gas, either compressed or liquefied. To qualify as an "auto" powered by an alternative fuel source, the "auto" must be powered by a source of propulsion power other than a conventional gasoline engine. An "auto" solely propelled by biofuel, gasoline or diesel fuel or any blend thereof is not an "auto" powered by an alternative fuel source.

X. Return of Stolen Automobile

The following is added to the Coverage Extension Provision of the Physical Damage Coverage Section:

If a covered "auto" is stolen and recovered, we will pay the cost of transport to return the "auto" to you. We will pay only for those covered "autos" for which you carry either Comprehensive or Specified Causes of Loss Coverage.

All other terms, conditions, provisions and exclusions of this policy remain the same.
COMMON POLICY CONDITIONS

All Coverage Parts included in this policy are subject to the following conditions.

A. Cancellation
   1. The first Named Insured shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.
   2. We may cancel this policy by mailing or delivering to the first Named Insured written notice of cancellation at least:
      a. 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or
      b. 30 days before the effective date of cancellation if we cancel for any other reason.
   3. We will mail or deliver our notice to the first Named Insured's last mailing address known to us.
   4. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.
   5. If this policy is cancelled, we will send the first Named Insured any premium refund due. If we cancel, the refund will be pro rata. If the first Named Insured cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.
   6. If notice is mailed, proof of mailing will be sufficient proof of notice.

B. Changes
   The policy contains all the agreements between you and us concerning the insurance afforded. The first Named Insured shown in the Declarations is authorized to make changes in the terms of this policy with our consent. This policy's terms can be amended or waived only by endorsement issued by us and made a part of this policy.

C. Examination Of Your Books And Records
   We may examine and audit your books and records as they relate to this policy at any time during the policy period and up to three years afterward.

D. Inspections And Surveys
   1. We have the right to:
      a. Make inspections and surveys at any time:
      b. Give you reports on the conditions we find; and
      c. Recommend changes.
   2. We are not obligated to make any inspections, surveys, reports or recommendations and any such actions we do undertake relate only to insurability and the premiums to be charged. We do not make safety inspections. We do not undertake to perform the duty of any person or organization to provide for the health or safety of workers or the public. And we do not warrant that conditions:
      a. Are safe or healthful; or
      b. Comply with laws, regulations, codes or standards.
   3. Paragraphs 1. and 2. of this condition apply not only to us, but also to any rating, advisory, rate service or similar organization which makes insurance inspections, surveys, reports or recommendations.
   4. Paragraph 2. of this condition does not apply to any inspections, surveys, reports or recommendations we may make relative to certification, under state or municipal statutes, ordinances or regulations, of boilers, pressure vessels or elevators.

E. Premiums
   The first Named Insured shown in the Declarations:
   1. Is responsible for the payment of all premiums; and
   2. Will be the payee for any return premiums we pay.

F. Transfer Of Your Rights And Duties Under This Policy
   Your rights and duties under this policy may not be transferred without our written consent except in the case of death of an individual named insured.
   If you die, your rights and duties will be transferred to your legal representative but only while acting within the scope of duties as your legal representative. Until your legal representative is appointed, anyone having proper temporary custody of your property will have your rights and duties but only with respect to that property.
Additional Insured – Automatic – Owners, Lessees Or Contractors

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</table>

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

Named Insured: CSI Electrical Contractors, Inc.

Address (including ZIP Code): 
CSI, Inc.
P.O. Box 2887
Santa Fe Springs, CA 90670

This endorsement modifies insurance provided under the: Commercial General Liability Coverage Part

A. Section II – Who Is An Insured is amended to include as an additional insured any person or organization whom you are required to add as an additional insured on this policy under a written contract or written agreement. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf,

in the performance of your ongoing operations or "your work" as included in the "products-completed operations hazard", which is the subject of the written contract or written agreement.

However, the insurance afforded to such additional insured:

1. Only applies to the extent permitted by law; and
2. Will not be broader than that which you are required by the written contract or written agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusion applies:

This insurance does not apply to:

"Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or failure to render, any professional architectural, engineering or surveying services including:

a. The preparing, approving or failing to prepare or approve maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
b. Supervisory, inspection, architectural or engineering activities.

This exclusion applies even if the claims against any insured allege negligence or other wrongdoing in the supervision, hiring, employment, training or monitoring of others by that insured, if the “occurrence” which caused the "bodily injury" or "property damage", or the offense which caused the “personal and advertising injury", involved the rendering of or the failure to render any professional architectural, engineering or surveying services.
C. The following is added to Paragraph 2, Duties In The Event Of Occurrence, Offense, Claim Or Suit of Section IV – Commercial General Liability Conditions:

The additional insured must see to it that:

1. We are notified as soon as practicable of an "occurrence" or offense that may result in a claim;
2. We receive written notice of a claim or "suit" as soon as practicable; and
3. A request for defense and indemnity of the claim or "suit" will promptly be brought against any policy issued by another insurer under which the additional insured may be an insured in any capacity. This provision does not apply to insurance on which the additional insured is a Named Insured if the written contract or written agreement requires that this coverage be primary and non-contributory.

D. For the purposes of the coverage provided by this endorsement:

1. The following is added to the Other Insurance Condition of Section IV – Commercial General Liability Conditions:

   Primary and Noncontributory insurance

   This insurance is primary to and will not seek contribution from any other insurance available to an additional insured provided that:

   a. The additional insured is a Named Insured under such other insurance; and
   b. You are required by written contract or written agreement that this insurance be primary and not seek contribution from any other insurance available to the additional insured.

2. The following paragraph is added to Paragraph 4.b. of the Other Insurance Condition of Section IV – Commercial General Liability Conditions:

   This insurance is excess over:

   Any of the other insurance, whether primary, excess, contingent or on any other basis, available to an additional insured, in which the additional insured on our policy is also covered as an additional insured on another policy providing coverage for the same "occurrence", offense, claim or "suit". This provision does not apply to any policy in which the additional insured is a Named Insured on such other policy and where our policy is required by a written contract or written agreement to provide coverage to the additional insured on a primary and non-contributory basis.

E. This endorsement does not apply to an additional insured which has been added to this policy by an endorsement showing the additional insured in a Schedule of additional insureds, and which endorsement applies specifically to that identified additional insured.

F. With respect to the insurance afforded to the additional insureds under this endorsement, the following is added to Section III – Limits Of Insurance:

   The most we will pay on behalf of the additional insured is the amount of insurance:

   1. Required by the written contract or written agreement referenced in Paragraph A. of this endorsement; or
   2. Available under the applicable Limits of Insurance shown in the Declarations, whichever is less.

   This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

All other terms and conditions of this policy remain unchanged.
THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

DESIGNATED CONSTRUCTION PROJECT(S) GENERAL AGGREGATE LIMIT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

<table>
<thead>
<tr>
<th>Designated Construction Project(s):</th>
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<tr>
<td>A GENERAL AGGREGATE LIMIT APPLIES TO EACH CONSTRUCTION PROJECT WHERE THE NAMED INSURED IS PERFORMING OPERATIONS, HOWEVER, A GENERAL AGGREGATE LIMIT DOES NOT APPLY TO ANY CONSTRUCTION PROJECT WHERE THE NAMED INSURED IS PERFORMING OPERATIONS THAT ARE INSURED UNDER A WRAP UP OR ANY OTHER CONSOLIDATED OR SIMILAR INSURANCE PROGRAM.</td>
</tr>
</tbody>
</table>

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section I — Coverage A, and for all medical expenses caused by accidents under Section I — Coverage C, which can be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:

1. A separate Designated Construction Project General Aggregate Limit applies to each designated construction project, and that limit is equal to the amount of the General Aggregate Limit shown in the Declarations.

2. The Designated Construction Project General Aggregate Limit is the most we will pay for the sum of all damages under Coverage A, except damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard", and for medical expenses under Coverage C regardless of the number of:
   a. Insureds;
   b. Claims made or "suits" brought; or
   c. Persons or organizations making claims or bringing "suits".

3. Any payments made under Coverage A for damages or under Coverage C for medical expenses shall reduce the Designated Construction Project General Aggregate Limit for that designated construction project. Such payments shall not reduce the General Aggregate Limit shown in the Declarations nor shall they reduce any other Designated Construction Project General Aggregate Limit for any other designated construction project shown in the Schedule above.

4. The limits shown in the Declarations for Each Occurrence, Damage To Premises Rented To You and Medical Expense continue to apply. However, instead of being subject to the General Aggregate Limit shown in the Declarations, such limits will be subject to the applicable Designated Construction Project General Aggregate Limit.
B. For all sums which the insured becomes legally obligated to pay as damages caused by "occurrences" under Section I – Coverage A, and for all medical expenses caused by accidents under Section I – Coverage C, which cannot be attributed only to ongoing operations at a single designated construction project shown in the Schedule above:

1. Any payments made under Coverage A for damages or under Coverage C for medical expenses shall reduce the amount available under the General Aggregate Limit or the Products-completed Operations Aggregate Limit, whichever is applicable; and

2. Such payments shall not reduce any Designated Construction Project General Aggregate Limit.

C. When coverage for liability arising out of the "products-completed operations hazard" is provided, any payments for damages because of "bodily injury" or "property damage" included in the "products-completed operations hazard" will reduce the Products-completed Operations Aggregate Limit, and not reduce the General Aggregate Limit nor the Designated Construction Project General Aggregate Limit.

D. If the applicable designated construction project has been abandoned, delayed, or abandoned and then restarted, or if the authorized contracting parties deviate from plans, blueprints, designs, specifications or timetables, the project will still be deemed to be the same construction project.

E. The provisions of Section III – Limits Of Insurance not otherwise modified by this endorsement shall continue to apply as stipulated.
COMMON POLICY CONDITIONS

All Coverage Parts included in this policy are subject to the following conditions.

A. Cancellation
   1. The first Named Insured shown in the Declarations may cancel this policy by mailing or delivering to us advance written notice of cancellation.
   2. We may cancel this policy by mailing or delivering to the first Named Insured written notice of cancellation at least:
      a. 10 days before the effective date of cancellation if we cancel for nonpayment of premium; or
      b. 30 days before the effective date of cancellation if we cancel for any other reason.
   3. We will mail or deliver our notice to the first Named Insured's last mailing address known to us.
   4. Notice of cancellation will state the effective date of cancellation. The policy period will end on that date.
   5. If this policy is cancelled, we will send the first Named Insured any premium refund due. If we cancel, the refund will be pro rata. If the first Named Insured cancels, the refund may be less than pro rata. The cancellation will be effective even if we have not made or offered a refund.
   6. If notice is mailed, proof of mailing will be sufficient proof of notice.

B. Changes
   This policy contains all the agreements between you and us concerning the insurance afforded. The first Named Insured shown in the Declarations is authorized to make changes in the terms of this policy with our consent. This policy's terms can be amended or waived only by endorsement issued by us and made a part of this policy.

C. Examination Of Your Books And Records
   We may examine and audit your books and records as they relate to this policy at any time during the policy period and up to three years afterward.

D. Inspections And Surveys
   1. We have the right to:
      a. Make inspections and surveys at any time:
      b. Give you reports on the conditions we find; and
      c. Recommend changes.
   2. We are not obligated to make any inspections, surveys, reports or recommendations and any such actions we do undertake relate only to insurability and the premiums to be charged. We do not make safety inspections. We do not undertake to perform the duty of any person or organization to provide for the health or safety of workers or the public. And we do not warrant that conditions:
      a. Are safe or healthful; or
      b. Comply with laws, regulations, codes or standards.
   3. Paragraphs 1. and 2. of this condition apply not only to us, but also to any rating, advisory, rate service or similar organization which makes insurance inspections, surveys, reports or recommendations.
   4. Paragraph 2. of this condition does not apply to any inspections, surveys, reports or recommendations we may make relative to certification, under state or municipal statutes, ordinances or regulations, of boilers, pressure vessels or elevators.

E. Premiums
   The first Named Insured shown in the Declarations:
   1. Is responsible for the payment of all premiums; and
   2. Will be the payee for any return premiums we pay.

F. Transfer Of Your Rights And Duties Under This Policy
   Your rights and duties under this policy may not be transferred without our written consent except in the case of death of an individual named insured.
   If you die, your rights and duties will be transferred to your legal representative but only while acting within the scope of duties as your legal representative. Until your legal representative is appointed, anyone having proper temporary custody of your property will have your rights and duties but only with respect to that property.
**WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY INSURANCE POLICY**

**WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT—CALIFORNIA**

This endorsement changes the policy to which it is attached effective on the inception date of the policy unless a different date is indicated below.

(The following “attaching clause” need be completed only when this endorsement is issued subsequent to preparation of the policy.)

This endorsement, effective on 7/15/2020 at 12:01 A.M. standard time, forms a part of Policy No. WC 0625287-01 of the ZURICH AMERICAN INSURANCE COMPANY issued to CSI ELECTRICAL CONTRACTORS, INC.

Premium (if any) $ INCL

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. (This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.)

You must maintain payroll records accurately segregating the remuneration of your employees while engaged in the work described in the Schedule.

The additional premium for this endorsement shall be % of the California workers’ compensation premium otherwise due on such remuneration.

**Schedule**

<table>
<thead>
<tr>
<th>Person or Organization</th>
<th>Job Description</th>
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<tbody>
<tr>
<td>ALL PERSONS AND/OR ORGANIZATIONS THAT ARE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT WITH THE INSURED, EXECUTED PRIOR TO THE ACCIDENT OR LOSS, THAT WAIVER OF SUBROGATION BE PROVIDED UNDER THIS POLICY FOR WORK PERFORMED BY YOU FOR THAT PERSON AND/OR ORGANIZATION.</td>
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CALIFORNIA CANCELATION ENDORSEMENT

This endorsement applies only to the insurance provided by the policy because California is shown in Item 3.A. of the information page.

The cancelation condition in Part Six (Conditions) of the policy is replaced by these conditions:

Cancelation

1. You may cancel this policy. You must mail or deliver advance written notice to us stating when the cancelation is to take effect.

2. We may cancel this policy for one or more of the following reasons:
   a. Non-payment of premium;
   b. Failure to report payroll;
   c. Failure to permit us to audit payroll as required by the terms of this policy or of a previous policy issued by us;
   d. Failure to pay any additional premium resulting from an audit of payroll required by the terms of this policy or any previous policy issued by us;
   e. Material misrepresentation made by you or your agent;
   f. Failure to cooperate with us in the investigation of a claim;
   g. Failure to comply with Federal or State safety orders;
   h. Failure to comply with written recommendations of our designated loss control representatives;
   i. The occurrence of a material change in the ownership of your business;
   j. The occurrence of any change in your business or operations that materially increases the hazard for frequency or severity of loss;
   k. The occurrence of any change in your business or operation that requires additional or different classification for premium calculation;
   l. The occurrence of any change in your business or operation which contemplates an activity excluded by our reinsurance treaties.

3. If we cancel your policy for any of the reasons listed in (a) through (f), we will give you 10 days advance written notice, stating when the cancelation is to take effect. Mailing that notice to you at your mailing address shown in item 1 of the Information Page will be sufficient to prove notice. If we cancel your policy for any of the reasons listed in items (g) through (l), we will give you 30 days advance written notice; however, we agree that in the event of cancelation and reissuance of a policy effective upon a material change in ownership or operations, notice will not be provided.

4. The policy period will end on the day and hour stated in the cancelation notice.
EASTERN MUNICIPAL WATER DISTRICT
BID BOND

Bid Bond No. BBSU

KNOW ALL MEN BY THESE PRESENTS, that we

CSI Electrical Contractors, Inc.

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

10823 Fulton Wells Ave., Santa Fe Springs, CA 90670 as Principal, hereinafter called the Principal, and

Great American Insurance Company, 750 The City Drive South, Orange, CA 92868

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

a corporation duly organized under the laws of the State of Ohio 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 The Amount Bid in $***** Dollars (10%$**********), 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 25, 2020 for Specification No. 1401S

MVRWRF Solids Handling MCC Replacement, 17140 Kitching Street, Moreno Valley, CA 92551

(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 21st day of August, 2020

CONTRACTOR AS PRINCIPAL
Company: CSI Electrical Contractors, Inc.

Signature: Name: Richard L. Yarney
Title: CPO

SURETY
Great American Insurance Company
Company: (Corporate Seal)

Signature: Name: Mary Smith
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

BB-1 00040 Bid Bond
CALIFORNIA 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 Los Angeles

On August 25th, 2020
Before me, Notary Public

personally appeared Richard Young

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

Signature of Notary Public

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: 8/21/2020

Number of Pages: 1

Signer(s) Other Than Named Above:

Capacity(ies) Claimed by Signer(s)

Signer’s Name: Richard Young

☐ Corporate Officer – Title(s):

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other:

Signer is Representing: CSI Electrical Contracting Inc.

Signer’s Name:

☐ Corporate Officer – Title(s):

☐ Partner – ☐ Limited ☐ General

☐ Individual ☐ Attorney in Fact

☐ Trustee ☐ Guardian or Conservator

☐ Other:

Signer is Representing:

©2019 National Notary Association
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

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

State of California
County of Los Angeles

On August 21, 2020 before me, Emily Preciado, Notary Public

Date

personally appeared MARY SMITH

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

Signature of Notary Public

Place Notary Seal Above

OPTIONAL

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

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

Capacity(ies) Claimed by Signer(s)
Signer's Name:
☐ Corporate Officer — Title(s):
☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other:

Signer Is Representing:

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

Signer Is Representing:

©2014 National Notary Association • www.NationalNotary.org • 1-800-US NOTARY (1-800-872-6682) Item #5907
The number of persons authorized by this power of attorney is not more than FOUR

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name | Address | Limit of Power
--- | --- | ---
STEVEN L. BROCKMEYER | PASADENA, CA | ALL OF 100,000,000
MARY SMITH |
EMILY PRECIADO |
RONALD C. WANGLIN |

This Power of Attorney revokes all previous powers issued on behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 11th day of August, 2020.

GREAT AMERICAN INSURANCE COMPANY

[Signature]
Assistant Secretary

[Signature]
Divisional Senior Vice President

STATE OF OHIO, COUNTY OF HAMILTON - ss:

On this 11th day of August, 2020, before me personally appeared MARK VICARIO, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.

SUSAN A. KOHORST
Notary Public
State of Ohio
My Comm. Expires
May 18, 2023

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority, and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile in any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, STEPHEN C. BERAH, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this 21st day of August, 2020.

[Signature]
Assistant Secretary