Riverside County
Perris, California

SPECIFICATION NO. 1366W

Corwin Booster Electrical Replacement

Work Order # 419410

A PUBLIC WORKS PROJECT

Contents:
Specifications | Notice Inviting Bids | Bidding Requirements | Bid Forms | Contract Forms | Conditions of Contract

Paul D. Jones, II, P.E. - General Manager

Safety is of paramount and overriding importance to
Eastern Municipal Water District

Visit our website at www.emwd.org to view currently advertised projects
Navigate to Construction ⇐ Construction Bid Opportunities
EASTERN MUNICIPAL WATER DISTRICT
SPECIFICATION NO. 1366W
CORWIN BOOSTER ELECTRICAL 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:

- Kingfisher RTU and major appurtenances, including RTU backbone OIT and appurtenances.

The Contractor shall pick up all furnished items at the District yard. Furnished items will be loaded onto the Contractor's truck by the District.
# EASTERN MUNICIPAL WATER DISTRICT
## SPECIFICATION NO. 1366W
## CORWIN BOOSTER ELECTRICAL REPLACEMENT

## BIDDING SHEETS

<table>
<thead>
<tr>
<th>Item</th>
<th>Qty</th>
<th>Unit</th>
<th>Description</th>
<th>Unit Price (Figures)</th>
<th>Total Amount (Figures)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>LS</td>
<td>Mobilization and Approved: Bonds, Insurance, and Schedule of Values (see Section 01026) and Project Control Schedule (see Section 01310)</td>
<td>$ PRESET</td>
<td>$ 50,000</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>LS</td>
<td>Furnish and install all necessary materials and equipment for providing temporary power during construction, including a temporary portable MCC with VFDs, portable generator, and appurtenances, as required; in accordance with the Contract Documents.</td>
<td>$ Lump Sum</td>
<td>$ 145,000</td>
</tr>
<tr>
<td>3</td>
<td>1</td>
<td>LS</td>
<td>Furnish and install all necessary materials and equipment for the Corwin Booster Electrical Upgrade facilities, complete as specified herein and as shown on the Contract Drawings, tested and ready for operation, all for the lump sum price of</td>
<td>$ Lump Sum</td>
<td>$ 836,350</td>
</tr>
</tbody>
</table>

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BS-2
00020 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>4</td>
<td>1</td>
<td>LS</td>
<td>ADDITION OR DEDUCTION</td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
<td>N/A</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>(words)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Circle one (If applicable):

- Addition (+)
- Deduction (-) $0

TOTAL BID (Basis of award) $1,018,635
EASTERN MUNICIPAL WATER DISTRICT
SPECIFICATION NO. 1366W
CORWIN BOOSTER ELECTRICAL REPLACEMENT

BIDDING SHEETS

ADDITION OR DEDUCTION: Provision is made here for the bidder to include an
addition/deduction in their bid, if desired, to reflect any last minute adjustments in prices. The
addition/deduction, if made, will be proportionately applied to item(s) ______ (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.

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

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

_____________  2.11.2020
(Charlie Cox)  (Date of Inspection)

(Name)
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.
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: 2/25/2020

By: Paul Pica / President (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>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paul Pica</td>
<td></td>
<td>President</td>
</tr>
<tr>
<td>Steve Watts</td>
<td>CEO</td>
<td></td>
</tr>
<tr>
<td>Richard Yauney</td>
<td>CFO</td>
<td></td>
</tr>
</tbody>
</table>

For further details on this proposal, please contact:

<table>
<thead>
<tr>
<th>Name: Joe Williams</th>
<th>Address: 10623 Fulton Wells Ave. Santa Fe Springs, CA 90670</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email Address: <a href="mailto:joe.williams@csielectric.com">joe.williams@csielectric.com</a></td>
<td>Telephone: 562-946-0700</td>
</tr>
</tbody>
</table>

C3-1 00024 Proposal (7 day)
DESIGNATION OF SUBCONTRACTORS

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 below: (a) The name and the location of the place of business of 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; and (b) the portion of the work which will be done by each such subcontractor.

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. Each subcontractor shall be registered with the Department of Industrial Relations at time of bid and during the performance of the Contract.

If the Contractor fails to specify a subcontractor for any portion of the work to be performed under the contract in excess of one-half of one percent (1/2 of 1%) of the Contractor's total bid, he agrees that he is fully qualified to perform that work himself, and that he shall perform that work himself, and that he shall perform that portion himself.

The Contractor shall not, without the consent of the District, or unless, either: (a) Substitute any person as subcontractor in place of the subcontractor designated in the original bid; (b) Permit any such subcontract to be assigned or transferred or allow it to be performed by anyone other than the original subcontractor listed in the bid; or (c) Sublet or subcontract any portion of the work in excess of one-half of one percent (1/2 of 1%) of the Contractor's total bid as to which his original bid did not designate a subcontractor.

In the following instances, the District may consent to the substitution of another subcontractor:

(1) When the subcontractor listed in the bid after having a reasonable opportunity to do so fails or refuses to execute the written contract which is based upon the general terms, conditions, plans and specifications of the involved project or the terms of the subcontractor's written bid when it is presented to the subcontractor by the prime subcontractor;

(2) When the listed subcontractor becomes bankrupt or insolvent;

(3) When the listed subcontractor fails or refuses to perform his or her subcontract;

(4) When the listed subcontractor fails or refuses to meet the bond requirements of the prime Contractor to furnish a bond guaranteeing prompt and faithful performance of the subcontract and the payment of all claims for labor and materials furnished or used pursuant to Public Contract Code 4108;

(5) When the prime Contractor demonstrates to the District, as set forth in Public Contract Code 4107.5 that the name of the subcontractor was listed as the result of an inadvertent clerical error;
As a condition to assert claim of clerical error, the Contractor must give written notice of the inadvertent clerical error to the District with copies to both the listed and intended subcontractor within two (2) working days of the time of the prime bid opening. The District shall consent to the substitution if the prime Contractor and both subcontractor listed in error and the intended subcontractor each submit an affidavit to the District within eight (8) working days of the time of the prime bid opening indicating that an inadvertent clerical error was made.

The District shall also consent to the substitution of the intended Contractor if affidavits are filed by both the prime Contractor and the intended Subcontractor within six (6) working days and the subcontractor claimed to be listed in error does not submit within six (6) working days a written objection to the claim to both the District and the Contractor.

However, if the listed subcontractor submits a written objection to the Contractor's claim of inadvertent clerical error within six (6) working days from the time of the prime bid opening, the District shall investigate the claims of the parties and shall hold a public hearing as described herein to determine the validity of those claims.

Any declarations submitted must be submitted under penalty of perjury by all three (3) parties and supported by testimony under oath and subject to cross-examination.

(6) When the listed Contractor is not licensed pursuant to the Contractor's license law;

(7) When the District determines that the work performed by the listed subcontractor is substantially unsatisfactory and not in substantial accordance with the plans and specifications, or that the subcontractor is substantially delaying or disrupting the progress of the work.

Prior to any substitution of a subcontractor, the District shall give notice in writing to the listed subcontractor of the request to substitute subcontractors and the reasons for the request. The notice shall be served by registered or certified mail to the last known address of the subcontractor. The listed subcontractor who has been so notified shall have five (5) working days within which to submit written objections to the substitution to the District. Failure to file these written objections shall constitute the listed subcontractor's consent to the substitution. If written objections are filed, the District shall give notice in writing of at least five (5) working days to the listed subcontractor of a hearing by the District on the Contractor's request for substitution.

The original bid need not designate a subcontractor for the performance of any change orders.

No subletting or subcontracting of any portion of the work in excess of one-half of one percent (1/2 of 1%) of the prime Contractor's total bid shall be permitted except in cases of public emergency or necessity and then only after a written finding is made by the District as a public record setting forth the facts constituting the emergency or necessity.

As used in this designation, the term subcontractor means only those subcontractors who contract directly with the prime Contractor.
If the Contractor violates any of the provisions of this section, it is deemed to have violated and breached this contract, and the District may exercise the option in its own discretion of: (1) canceling the contract; or (2) assessing the contract or a penalty in an amount of not more than ten percent (10%) of the amount of the subcontract involved, and this penalty shall be deposited in the fund out of which the prime contract is awarded. The Contractor shall be entitled to a public hearing in five (5) days notice of the time and place of the hearing.
**LIST OF DESIGNATED SUBCONTRACTORS**

<table>
<thead>
<tr>
<th>SPEC #:</th>
<th>1366W</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROJECT TITLE:</td>
<td>Corwin Booster Electrical Replacement</td>
</tr>
<tr>
<td>NAME OF CONTRACTOR:</td>
<td>CSI Electrical Contractors, Inc.</td>
</tr>
</tbody>
</table>

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

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

* PLEASE WRITE LEGIBLY *

<table>
<thead>
<tr>
<th>LICENSED SUBCONTRACTOR'S NAME, BUSINESS ADDRESS, &amp; EMAIL ADDRESS</th>
<th>LICENSE #</th>
<th>SUBCONTRACT WORK (Be Specific)</th>
<th>% OF TOTAL BID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name: RSH CONSTRUCTION</td>
<td>License #: 806-747</td>
<td>Civil</td>
<td>16%</td>
</tr>
<tr>
<td>Address: 3993 JENIUTHALD BLVD B HEMET, CA, 92545</td>
<td>DIR Registration #: 100000 20911</td>
<td>Fencing, Concrete</td>
<td></td>
</tr>
<tr>
<td>Email Address: <a href="mailto:CPETERSON@RSHCONSTRUCTION.COM">CPETERSON@RSHCONSTRUCTION.COM</a></td>
<td>Company Name: HALCO TESTING SERVICES</td>
<td>License #: 2604825</td>
<td>Electrical Testing</td>
</tr>
<tr>
<td>Address: 5773 VENICE BLVD, LA, CA 90019</td>
<td>DIR Registration #: 1000025646</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address: <a href="mailto:JCOURTNEY@HALCO.NET">JCOURTNEY@HALCO.NET</a></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

C-5(d) 00028 Designation of Subcontractors
<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:</td>
<td>License #:</td>
<td></td>
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<tr>
<td>Address:</td>
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<td>Email Address:</td>
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</tbody>
</table>

(Do not list alternative subcontractors for the same work) (Use additional pages if needed)
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 General Engineering, Electrical C-7, Contractor C-7


A. INDIVIDUAL CONTRACTOR

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

B. FIRM OR PARTNERSHIP

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

| SIGNATURE: | TITLE: |
| SIGNATURE: | TITLE: |
| SIGNATURE: | TITLE: |

C. CORPORATION

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

| SIGNATURE OF AUTHORIZED OFFICER OF CORPORATION: |

| SIGNATURE: | TITLE: Paul Pica / President |

C6-1 00030 Contractors Licensing Statement
NON-COLLUSION DECLARATION

TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID

The undersigned declares:

I am the President 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 [2/25/2023][date], at [Santa Fe Springs][city], California.[state]

Signed: [Signature]

Name: Paul Pica / President

(Print Name Here)

C7-1 00032 Non-Collusion Declaration
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)
10623 Fulton Wells Ave., Santa Fe Springs, CA 90670
as Principal, hereinafter called the Principal, and

Great American Insurance Company, 750 The City Drive South, Suite 470, 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 ($...)
(Here insert full name, address and description of Project)
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 March 4, 2020, for Spec 1366W Corwin Booster

Electrical Replacement - 42625 Washington Ave., San Jacinto, CA 92583

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 19th day of February, 2020

CONTRACTOR AS PRINCIPAL
Company: CSI Electrical Contractors, Inc.

Signature: Name: President
Title:

SURETY
Company: Great American Insurance Company

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

Rev: 04/06/16

BB-1

00040 Bid Bond
State of California
County of Los Angeles

On February 19, 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 their/their authorized capacity(ies), and that by him/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:
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
STEVEN L. BROCKMEYER
MARY SMITH
EMILY PRECAIADO
RONALD C. WANGLIN

Address
ALL OF PASADENA, CA

Limit of Power
ALL $100,000,000

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 18TH day of SEPTEMBER 2019.

Attest

Assistant Secretary

STATE OF OHIO, COUNTY OF HAMILTON - ss:

On this 16TH day of SEPTEMBER 2019, before me personally appeared MARK VICA RIO, 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 thereeto by like authority.

Notary Public, State of Ohio
My Commission Expires 05-15-2020

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 and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to 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. BERAHA, 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 19th day of February 2020.

Assistant Secretary
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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

State of California  
County of Los Angeles  

On 02/25/2020 before me, Rachel Negrete, Notary Public 

Date  

personally appeared  

Name(s) of Signer(s)  

who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature(s) on the instrument the person, or the entity upon behalf of which the person 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: 2/25/20  
Number of Pages: 1  
Signer(s) Other Than Named Above: None

Capacity(ies) Claimed by Signer(s):

Signer's Name:  

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

Signer is Representing: CSI Electrical Contractors Inc.

Signer's Name:  

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

Signer is Representing:
IRAN CONTRACTING ACT CERTIFICATION
(Public Contract Code sections 2202-2208)

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.

For bids $1,000,000 or more, bidders must certify that it is not on the list of ineligible vendors prohibited from doing business with the State of California and shall complete the Iran Contract Act Certification attached and submit with their proposal at the time of bid. Failure to do so may deem your bid non-responsive.
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>
</tr>
</tbody>
</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>Paul Pica / President</td>
<td>2/30/2020</td>
</tr>
</tbody>
</table>
**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>
Cal/OSHA Form 300A

Annual Summary of Work-Related Injuries and Illnesses

Bidders shall provide the most current, completed Cal/OSHA Form 300A with their bid (blank form attached)

Failure to submit this form “may” deem your bid non-responsive
### Summary of Work-Related Injuries and Illnesses

**California Form 300A (REV. 7/2007)**

<table>
<thead>
<tr>
<th>Week</th>
<th>(a) All Other Exposure</th>
<th>(b) Respiratory Conditions</th>
<th>(c) Skin Disorders</th>
<th>(d) Hearing Loss</th>
<th>(e) Other Conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1112</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1129</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1136</td>
<td>0</td>
<td>0</td>
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<td>0</td>
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<td>1150</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

**Total Number of Days:**

- **Total Number of Days:**
- **Total Number of Employees:**
- **Total Number of Complaints:**
- **Total Number of Cases:**
- **Total Number of Other Conditions:**
- **Total Number of Hearing Loss:**
- **Total Number of Skin Disorders:**
- **Total Number of Respiratory Conditions:**

**Year:** 2013

**California Occupational Safety and Health Administration**

**Form 300A:** This form must be completed by the end of each calendar year. It must be signed and returned to the California Division of Labor Standards and Employment.
### Annual Summary of Work-Related Injuries and Illnesses

#### California OSHA Form 300A (Rev. 7/2007)

**Appendix B**

<table>
<thead>
<tr>
<th>Date</th>
<th>Total Number of Injuries</th>
<th>(g) Illnesses</th>
<th>(f) All Other Illnesses</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(h) All Employees</th>
<th>(i) Employees with Days Away From Work</th>
<th>(j) Employees with Work Restricted or Job Modified</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(k) Employee Injury and Illness Types</th>
<th>(l) Injury and Illness Report</th>
<th>(m) Injury and Illness Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>(n) Injury and Illness Report</td>
<td>(o) Injury and Illness Report</td>
<td>(p) Injury and Illness Report</td>
</tr>
</tbody>
</table>

**Employment Information**

- Standard Industrial Classification (SIC), if known (California Safety Code § 6307)
- Company/Executive Title
- Company/Executive Phone

**Work Information**

- Total Number of Employees
- Total Number of Days Away from Work
- Total Number of Days with Work Restricted or Job Modified

** Injury Information**

- Number of Cases
- Employee Description (Date of Injury or Illness)
- City
- State
- Zip
- Street
- Establishment Name

**Facility Information**

- Year 20...

---

All entries must be made by the employer's authorized representative. The California OSHA Form 300A must be posted in a conspicuous place in the workplace. It must be posted from March 2 to April 30 of the year following the calendar year for which the information was reported. The form must be posted in a location where employees are employed. The form must be kept in an accessible location for 3 years. The employer must keep the form for at least 3 years after the date the information is reported.
Bidders shall complete and submit the attached C-17 form with the Proposal Package at time of bid

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

| Bid Date: | 3/4/2020 | Contractor’s Standard Industry Code: | 1731 |
| Specification No. | 1366W | Project Name: | EMWD-Corwin Booster Electrical Replacement |
| Contractor name: | CSI Electrical Contractors, Inc. |
| Contractor Address: | 10623 Fulton Wells Avenue, Santa Fe Springs, CA 90670 |
| Contractor License No. | 1055811 | Phone No: | 562-946-0700 |
| Contact Person: | Joe Williams |

Please answer the following questions:

1. Has the Contractor been cited by Cal/OSHA or any regulatory agency for a violation related to safety or environmental issues within the past seven (7) years? No ☐ Yes ☒ Currently under appeal
   
   If yes, please attach all documentation specific to each violation and what actions have been taken to ensure that there is not a repeat violation.

2. Has the Contractor had a fatality or serious incident per Cal/OSHA on a jobsite within the past ten (10) years? No ☐ Yes ☒ Currently under appeal
   
   If yes, please attach all documentation specific to each violation and what actions have been taken to ensure that there is not a repeat violation.

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

Contractor’s Representative signature: [Signature] Date: 2/25/2020

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
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**

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

**Registration History**

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Expiration Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>7/16/2019</td>
<td>6/30/2022</td>
</tr>
</tbody>
</table>

**Legal Entity Information**

<table>
<thead>
<tr>
<th>Corporation Number:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal Employment Identification Number:</td>
<td></td>
</tr>
<tr>
<td>President Name:</td>
<td>Paul Pica</td>
</tr>
<tr>
<td>Vice President Name:</td>
<td>Steven Watts</td>
</tr>
<tr>
<td>Treasurer Name:</td>
<td></td>
</tr>
<tr>
<td>Secretary Name:</td>
<td></td>
</tr>
<tr>
<td>CEO Name:</td>
<td></td>
</tr>
</tbody>
</table>

**Agent of Service Name:**

CT 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
Please provide your current workers compensation insurance information below:

<table>
<thead>
<tr>
<th>PEO</th>
<th>PEO</th>
<th>PEO</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEO InformationName</td>
<td>Phone</td>
<td>Email</td>
</tr>
</tbody>
</table>

Insured by Carrier

**Policy Holder Name:** CSI Electrical Contractors, Inc. **Insurance Carrier:**
Zurich American Insurance Company **Policy Number:** WC0625287-00 **Inception date:**
6/30/2019 **Expiration Date:** 6/30/2020
Contractor Information

Legal Entity Name
RE CHAFFEE CONSTRUCTION

Legal Entity Type
Sole Proprietorship

Status
Expired

Registration Number
1000055585

Registration effective date
6/29/2018

Registration expiration date
6/30/2019

Mailing Address
7987 SAGE ST PHELAN 92371 CA United States ...

Physical Address
7987 SAGE ST PHELAN 92371 CA United States ...

Email Address

Trade Name/DBA

License Number(s)
CSLB:897948

Registration History

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Expiration Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>6/29/2018</td>
<td>6/30/2019</td>
</tr>
<tr>
<td>2/9/2018</td>
<td>6/30/2018</td>
</tr>
<tr>
<td>7/1/2019</td>
<td>6/30/2020</td>
</tr>
</tbody>
</table>

Legal Entity Information

Sole Proprietor Name:

Workers Compensation

Do you lease employees through Professional Employer Organization (PEO)?:

Please provide your current workers compensation insurance information below:

<table>
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<tr>
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https://cadir.secure.force.com/ContractorSearch/PrintRegDetails
Contractor Information

Legal Entity Name
RE CHAFFEE CONSTRUCTION
Legal Entity Type
Sole Proprietorship
Status
Expired
Registration Number
1000055585
Registration effective date
2/9/2018
Registration expiration date
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Physical Address
7987 SAGE ST PHELAN 92371 CA United States ...
Email Address
Trade Name/DBA
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Registration History

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<td>6/30/2013</td>
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<td>7/1/2019</td>
<td>6/30/2020</td>
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</table>

Legal Entity Information

Sole Proprietor Name:

Workers Compensation

Do you lease employees through Professional Employer Organization (PEO)?:
Please provide your current workers compensation insurance information below:

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

https://cadir.secure.force.com/ContractorSearch/PrintRegDetails
# Contractor Information

**Legal Entity Name:**
RE CHAFFEE CONSTRUCTION

**Legal Entity Type:**
Sole Proprietorship

**Status:**
Active

**Registration Number:**
1000055585

**Registration effective date:**
7/1/2019

**Registration expiration date:**
6/30/2020

**Mailing Address:**
7987 SAGE ST  PHelan 92371 CA United States ...

**Physical Address:**
7987 SAGE ST  PHelan 92371 CA United States ...

**Email Address:**

**Trade Name/DBA:**

**License Number(s):**
CSLB:897948

---

# Registration History

<table>
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<tr>
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<tr>
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<td>6/30/2018</td>
</tr>
<tr>
<td>7/1/2019</td>
<td>6/30/2020</td>
</tr>
</tbody>
</table>

---

# Legal Entity Information

**Sole Proprietor Name:**

---

# Workers Compensation

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

Please provide your current workers compensation insurance information below:

<table>
<thead>
<tr>
<th>PEO</th>
<th>PEO</th>
<th>PEO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Phone</td>
<td>Email</td>
</tr>
</tbody>
</table>

Insured by Carrier

**Policy Holder Name:** RE Chaffee Construction

**Insurance Carrier:**

**State Compensation Insurance FundPolicy Number:** 9236180-18

**Inception date:** 8/3/2018

**Expiration Date:** 8/3/2019
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 CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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

INSURED: CSI Electrical Contractors, Inc.
CSI, Inc.
P.O. Box 2887
Santa Fe Springs, CA 90670

INSURER(A): Zurich American Insurance Company
16535

INSURER(B): Travelers Property Casualty Co of Amer
25674

REVISION NUMBER:

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

<table>
<thead>
<tr>
<th>INSR</th>
<th>TYPE OF INSURANCE</th>
<th>ADD/ SUBR</th>
<th>POLICY NUMBER</th>
<th>POLICY EFF/ EXP</th>
<th>LIMITS</th>
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</thead>
<tbody>
<tr>
<td>A</td>
<td>COMMERCIAL GENERAL LIABILITY</td>
<td>CLAIMS-MADE</td>
<td>GLO 0625288-00</td>
<td>7/15/2019 - 7/15/2020</td>
<td>EACH OCCURRENCE $1,000,000</td>
</tr>
<tr>
<td></td>
<td></td>
<td>OCCUR</td>
<td></td>
<td>$300,000</td>
<td>PREMISES (Ex. occurrence)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$10,000</td>
<td>MED EXP (Any one person)</td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td>$1,000,000</td>
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</tr>
<tr>
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<td>GENERAL AGGREGATE</td>
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<td></td>
<td></td>
<td>$2,000,000</td>
<td>PRODUCTS - COMPROP AGG</td>
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<td></td>
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<td></td>
<td></td>
<td>$1,000,000</td>
<td>OTHER</td>
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<tr>
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<td>ANY AUTO</td>
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<td>7/15/2019 - 7/15/2020</td>
<td>COMBINED SINGLE LIMIT $1,000,000</td>
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<td>BODILY INJURY (Per person)</td>
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<td>NON-OWNED AUTOS ONLY</td>
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<td>$1,000,000</td>
<td>BODILY INJURY (Per accident)</td>
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<td>NON-OWNED AUTOS ONLY</td>
<td></td>
<td>$1,000,000</td>
<td>PROPERTY DAMAGE (Per accident)</td>
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<tr>
<td>B</td>
<td>UMBRELLA LIABILITY</td>
<td>OCCUR</td>
<td>ZUP-61116267-19-NF</td>
<td>7/15/2019 - 7/15/2020</td>
<td>EACH OCCURRENCE $1,000,000</td>
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<td>EXCESS LIAB</td>
<td>CLAIMS-MADE</td>
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<td>AGGREGATE</td>
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<tr>
<td>A</td>
<td>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</td>
<td>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER</td>
<td>WC 0625287-00</td>
<td>7/15/2019 - 7/15/2020</td>
<td>E L EACH ACCIDENT $1,000,000</td>
</tr>
<tr>
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<td></td>
<td>(Mandatory In NH)</td>
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<td>$1,000,000</td>
<td>E L DISEASE - EA EMPLOYER</td>
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<td></td>
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<td>(Mandatory In NH)</td>
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<td>$1,000,000</td>
<td>E L DISEASE - EA EMPLOYEE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Mandatory In NH)</td>
<td></td>
<td>$1,000,000</td>
<td>E L DISEASE - POLICY LIMIT</td>
</tr>
</tbody>
</table>

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

Proof of Insurance

CERTIFICATE HOLDER

Proof of Insurance $1M Umb

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

© 1988-2015 ACORD CORPORATION. All rights reserved.
<table>
<thead>
<tr>
<th>Year</th>
<th>Violation Status</th>
<th>Description</th>
<th>Type of Violation</th>
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</thead>
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<tr>
<td>2020 (YTD)</td>
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<td></td>
</tr>
<tr>
<td>2018</td>
<td>NO VIOLATIONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>NO VIOLATIONS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>NO VIOLATIONS</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**2020 (YTD)**

- **Issuance Date:** 10/15/2019
- **Inspection No.:** 1399221.015
- **Inspection Site:** Monterey County, CA
- **Description:** Violation 1, Item 1 Standard 29400013 L
- **Type of Violation:** Serious
- **Violation Status:** Under Contest
- **Contest Date:** 10/21/2019

**2018**

- **Issuance Date:** 5/31/2017
- **Inspection No.:** 1231617.015
- **Inspection Site:** 1900 E. Lambert Road, Brea
- **Description:** Violation 1, Item 1 Standard 3395 (H)(1)
- **Type of Violation:** General
- **Description:** Violation 2, Item 1 Standard 3646 (E)
- **Type of Violation:** Serious
- **Violation Status:** Under Contest
- **Contest Date:** 6/21/2017

**2016**

- **Issuance Date:** 11/21/2014
- **Fine Paid:** $560
- **Inspection No.:** 316983147
- **Inspection Site:** 10400 Helios Way, Santa Margarita
- **Description:** Violation 1, Item 1 Standard 14300029 A
- **Type of Violation:** Regulatory
- **Description:** Violation 1, Item 2 Standard 3385 B
- **Type of Violation:** General
- **Description:** Violation 1, Item 3 Standard 1511 B
- **Type of Violation:** General
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.Bones@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
STATE OF CALIFORNIA
DÉPARTEMENT OF INDUSTRIAL RELATIONS
OCUPATIONAL SAFETY AND HEALTH APPEALS BOARD
2520 VENTURE OAKS WAY, SUITE 300
SACRAMENTO, CA 95833

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

Inspection Number
1389221

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

Attention: George Done
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>Rodo Reyes, DOSH Legal</td>
<td><a href="mailto:rreyes_doshlegal@dir.ca.gov">rreyes_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 Gomez</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)  (SIGNATURE OF DECLARANT)

OSHAB 400 DECLARATION OF SERVICE BY MAIL OR EMAIL

Rev. 06/16
**NOTICE OF DOCKETED APPEAL**

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.
**STATE OF CALIFORNIA**
Department of Industrial Relations
Occupational Safety and Health Appeals Board

**Please mail all correspondence to:**
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833

---

**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.*

### A. CITATION INFORMATION

Please complete the following information as indicated on your citation.

<table>
<thead>
<tr>
<th>1. Case (Inspection) #: 1399221</th>
<th>Issuance date: 10/15/2019</th>
<th>Reporting ID#: 0950647</th>
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<tr>
<td>2. Employer: CSI ELECTRICAL CONTRACTORS, INC.</td>
<td>Date Citation Received: 10/15/2019</td>
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</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>City: Santa Fe Springs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State: CA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ZIP code: 90870</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Primary phone: (562) 946-0700</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary phone:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Email address:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Preferred method of service: X U.S. Postal Service OR _ Email (Choose one only)</td>
<td></td>
<td></td>
</tr>
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</table>

### B. REPRESENTATIVE INFORMATION (If any)

| 1. Firm name: Ogletree Deakins |
| 2. Representative name: Sean Palsan |
| 3. Address: 695 Town Center Drive, 15th Floor |
| City: Costa Mesa |
| State: CA |
| ZIP code: 92628 |
| 4. Primary phone: (714) 800-7900 |
| Secondary phone: |
| 5. Email address: sean.palsan@ogletree.com |
| 6. Preferred method of service: _ U.S. Postal Service OR X Email (Choose one only) |

### C. CONTACT INFORMATION and SIGNATURE

I am the: Representative X 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**

<table>
<thead>
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<tr>
<td>October 16, 2019</td>
</tr>
</tbody>
</table>

Signature of employer or employer's representative

<table>
<thead>
<tr>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Sean Palsan</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Phone No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(714) 800-7900</td>
</tr>
</tbody>
</table>

**OSHAB Appeal Form 100 (Rev. 2/16)**

Page 1 of 2
1. This is an Appeal of:

- 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)

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

- Independent employee action caused the violation.
- 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
- 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
- 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.
- 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.
EMPL YER’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/OSHAB. 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/OSHAB.

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) 274-3751

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

OSHAB 109
Rev. 3/16
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)

OSHAB 110
Rev. 3/16
CITATION AND NOTIFICATION OF PENALTY

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 #: 053-17
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.
Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an agreement which resolves this matter without litigation or contest.

APPEAL RIGHTS

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

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

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

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

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

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

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

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

Department of Industrial Relations
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 time frame set forth on this Citation and Notification of Penalty. Please inform the district office listed on the Citation by submitting the Cal/OSHA 160 form with the abatement steps you have taken and the date the violation was abated, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. The adjusted penalty for general violations has already been reduced by 50% on the presumption that the employer will correct the violations by the abatement date. The adjusted penalty for serious violations, if any, has already been reduced by 50% because abatement of those violations has been completed.

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

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

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

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

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

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

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

DISABILITY ACCOMMODATION

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

Accommodations can include modifications of policies or procedures or provision of auxiliary aids or services. Accommodations include, but are not limited to, an Assistive Listening System (ALS), a Computer-Aided Transcription System or Communication Access Realtime Translation (CART), a sign-language interpreter, documents in Braille, large print or on computer disk, and audio cassette recording. Accommodation requests should be made as soon as possible. Requests for an ALS or CART should be made no later than five (5) days before the hearing or conference.
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 D/B/A:  
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: $8435.00  
Corrected During Inspection

[Signature]  
Tom Birkett / Richard Fazlollahi  
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>Proposed Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Item 1, General</td>
<td></td>
<td>$420.00</td>
</tr>
<tr>
<td>2 Item 1, Serious</td>
<td></td>
<td>$8435.00</td>
</tr>
<tr>
<td>TOTAL PROPOSED PENALTIES:</td>
<td></td>
<td>$8855.00</td>
</tr>
</tbody>
</table>

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.d lr.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.
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.

PENDALY REMITTANCE FORM

<table>
<thead>
<tr>
<th>CIVIL PENALTY INFO</th>
<th>INSPECTION NO.: 1231617</th>
<th>REPORTING ID: 0950631</th>
</tr>
</thead>
<tbody>
<tr>
<td>ESTABLISHMENT NAME:</td>
<td>CSI ELECTRICAL CONTRACTORS, INC.</td>
<td>FEIN/SEIN: UNKNOWN</td>
</tr>
<tr>
<td>CONTACT PERSON:</td>
<td>Richard Samanieg</td>
<td></td>
</tr>
<tr>
<td>PHONE NO.:</td>
<td>UNKNOWN</td>
<td>FAX NO.: UNKNOWN</td>
</tr>
<tr>
<td>SITE ADDRESS:</td>
<td>1900 E. Lambert Rd., Brea, CA 92821</td>
<td></td>
</tr>
<tr>
<td>MAILING ADDRESS:</td>
<td>10623 Fulton Wells Ave., Santa Fe Springs, CA 90670</td>
<td></td>
</tr>
</tbody>
</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>✓</th>
<th>SUMMARY OF PENALTIES PAID</th>
<th>AMOUNT PAID</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Citation 1 Item 1, General</td>
<td>$</td>
</tr>
<tr>
<td></td>
<td>Citation 2 Item 1, Serious</td>
<td>$</td>
</tr>
<tr>
<td></td>
<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](http://www.dir.ca.gov/dosh/CalOSHA_PaymentOption.html). Again, please mail or fax this form to the above address or fax
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:

<table>
<thead>
<tr>
<th>1900 E. Lambert Rd.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Brea</td>
<td>CA</td>
</tr>
<tr>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

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.

<table>
<thead>
<tr>
<th>0950631</th>
<th>1231617</th>
<th>Y7043</th>
<th>053-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>RID</td>
<td>Inspection Nr.</td>
<td>CSHO ID</td>
<td>Optional Report Nr.</td>
</tr>
</tbody>
</table>
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