

## SECTION 00 43 50

PROPOSED SUBCONTRACTORS FORM  
(FOR SFMTA SBE FORM 2A)

Bidder shall provide the requested information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price. If this project involves the construction of streets, highways, or bridges, Bidder shall provide the information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price or \$10,000, whichever is greater. Under San Francisco Administrative Code section 6.21A(9) and California Public Contract Code section 4104, failure to provide at a minimum the name, location of the place of business, contractor's license number and the portion of work to be performed by each such subcontractor may render the bid nonresponsive or the Bidder unqualified to perform the work under this Contract. Bidders may provide license numbers or additional identifying information within 24 hours of the time bids are received. Where the City cannot identify a subcontractor with the information provided by a Bidder or where conflicting information is provided, the City may consider the subcontractor unlisted for purposes of Public Contract Code section 4106.

**Important Notice:** No subcontractor may be listed in a bid for a public works project unless registered with the California Department of Industrial Relations ("DIR") pursuant to Labor Code § 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code § 1771.1(a)]. An inadvertent listing of a subcontractor who is not registered under § 1725.5 will not be grounds for a bid protest or for determining a bid nonresponsive if the conditions set forth in Labor Code § 1771.1(c)(1) or (2) are met.

Bidder shall list all subcontractors (both SBE and Non-SBE) and indicate the annual gross receipts per the form.

## A. BIDDER'S PORTION OF WORK

1. NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: <u>A. Ruiz Construction Co. &amp; Associate Inc.</u>		
2. BID ITEMS/PORTION OF WORK TO BE SELF-PERFORMED (IF LESS THAN 100% OF THE CONTRACT WORK):		
3. DOLLAR AMOUNT OF WORK TO BE SELF-PERFORMED: \$ <u>7,348,279.47</u>	4. PERCENTAGE OF WORK TO BE SELF-PERFORMED: <u>69</u> %	5. DATE: <u>9/16/2020</u>

## B. LIST OF SUBCONTRACTORS

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>CMC Traffic Control Specialists</u>	8. SUBCONTRACTOR AMOUNT <u>250,00</u>
3. ADDRESS <u>3450 3rd St, Suite 3G</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA, 94124</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415. 206. 1700</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <u>792059</u>	13. SCOPE OF WORK: <u>Partial Traffic Control</u>

Continued on next page.

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Asphalt Impressions	8. SUBCONTRACTOR AMOUNT 152,296
3. ADDRESS 8150 37th Ave	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE Sacramento, CA 95824	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 915.383.0441	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. 20-8614153	12. AGE OF FIRM (YRS): 13
7. CA CONTRACTOR'S LICENSE NO. 900385	13. SCOPE OF WORK: Thermoplastics

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Ground Cover Landscaping Inc	8. SUBCONTRACTOR AMOUNT 113,300
3. ADDRESS 1 Boutwell St	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 415.298.6623	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. 36-4580887	12. AGE OF FIRM (YRS): 16
7. CA CONTRACTOR'S LICENSE NO. 930933	13. SCOPE OF WORK: landscaping

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME MD Construction & Project Mgmt	8. SUBCONTRACTOR AMOUNT 100,000
3. ADDRESS 3150 18th St Suite 510	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94110	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415.601.5056	11. SBE No. (If Applicable): 2020611
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>SoCal Stormwater Runoff Solution</u>	8. SUBCONTRACTOR AMOUNT <u>3,055</u>
3. ADDRESS <u>15030 Ventura Blvd</u> <u>#669</u>	9. ANNUAL GROSS RECEIPTS: <input checked="" type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Sherman Oaks, CA 94103</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>310.343.8313</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>45-5623834</u>	12. AGE OF FIRM (YRS): <u>8</u>
7. CA CONTRACTOR'S LICENSE NO. <u>C3483049</u>	13. SCOPE OF WORK: <u>Stormwater</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>CMP Environmental, Inc</u>	8. SUBCONTRACTOR AMOUNT <u>120,000</u>
3. ADDRESS <u>1821 Union St.</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input checked="" type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94123</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <u>415 5525511</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>82-3078668</u>	12. AGE OF FIRM (YRS): <u>40</u>
7. CA CONTRACTOR'S LICENSE NO. <u>1042760</u>	13. SCOPE OF WORK: <u>Environmental</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Lou's Concrete Sawing &amp; Breaking</u>	8. SUBCONTRACTOR AMOUNT <u>150,000</u>
3. ADDRESS <u>1485 Bayshore Blvd</u> <u>#205</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415 257 2606</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <u>513832</u>	13. SCOPE OF WORK: <u>Saw cutting</u>

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>RBS Constr. Man</u>	8. SUBCONTRACTOR AMOUNT <u>340,000</u>
3. ADDRESS <u>1555 Burke Ave Suite I</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input checked="" type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415 297 1280</u>	11. SBE No. (If Applicable): <u>2001998</u>
6. FEDERAL I.D. NO. <u>46-4676160</u>	12. AGE OF FIRM (YRS): <u>6</u>
7. CA CONTRACTOR'S LICENSE NO. <u>992019</u>	13. SCOPE OF WORK: <u>Concrete</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>SF Terrazzo</u>	8. SUBCONTRACTOR AMOUNT <u>28900</u>
3. ADDRESS <u>58 W. Portal Ave #247</u>	9. ANNUAL GROSS RECEIPTS: <input checked="" type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94110</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <u>415 710 3031</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>51-0437208</u>	12. AGE OF FIRM (YRS): <u>20</u>
7. CA CONTRACTOR'S LICENSE NO. <u>800938</u>	13. SCOPE OF WORK: <u>Terrazzo</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Bay Area Lightworks</u>	8. SUBCONTRACTOR AMOUNT <u>2900,000</u>
3. ADDRESS <u>1460 Yosemite Ave</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input checked="" type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415 822 2336</u>	11. SBE No. (If Applicable): <u>37334</u>
6. FEDERAL I.D. NO. <u>61-14608365</u>	12. AGE OF FIRM (YRS): <u>16</u>
7. CA CONTRACTOR'S LICENSE NO. <u>839612</u>	13. SCOPE OF WORK: <u>Electrical</u>

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Cobra Trucking</u>	8. SUBCONTRACTOR AMOUNT <u>175,000</u>
3. ADDRESS <u>918 Ingerson Ave</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415 330 9350</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>20-1303584</u>	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <u>467599</u>	13. SCOPE OF WORK: <u>Trucking</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION

## SECTION 00 43 51

PROPOSED SUBCONTRACTORS FORM - NOT SELECTED  
(FOR SFMTA SBE FORM 2A)

*This form must be submitted with the Bid. The Bidder shall list all subcontractors (both SBE and non-SBE) who provided a quote or bid but were not selected to participate as a subcontractor in this project. This is required for compliance with Title 49, Section 26 of the Code of Federal Regulations.*

NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER:

A. Ruiz Construction Co. &amp; Assoc., Inc.

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

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1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION

## SECTION 00 43 50

PROPOSED SUBCONTRACTORS FORM  
(FOR SFMTA SBE FORM 2A)

Bidder shall provide the requested information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price. If this project involves the construction of streets, highways, or bridges, Bidder shall provide the information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price or \$10,000, whichever is greater. Under San Francisco Administrative Code section 6.21A(9) and California Public Contract Code section 4104, failure to provide at a minimum the name, location of the place of business, contractor's license number and the portion of work to be performed by each such subcontractor may render the bid nonresponsive or the Bidder unqualified to perform the work under this Contract. Bidders may provide license numbers or additional identifying information within 24 hours of the time bids are received. Where the City cannot identify a subcontractor with the information provided by a Bidder or where conflicting information is provided, the City may consider the subcontractor unlisted for purposes of Public Contract Code section 4106.

**Important Notice:** No subcontractor may be listed in a bid for a public works project unless registered with the California Department of Industrial Relations ("DIR") pursuant to Labor Code § 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code § 1771.1(a)]. An inadvertent listing of a subcontractor who is not registered under § 1725.5 will not be grounds for a bid protest or for determining a bid nonresponsive if the conditions set forth in Labor Code § 1771.1(c)(1) or (2) are met.

Bidder shall list all subcontractors (both SBE and Non-SBE) and indicate the annual gross receipts per the form.

## A. BIDDER'S PORTION OF WORK

1. NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: <i>Esquivel Grading &amp; Paving, Inc.</i>		
2. BID ITEMS/PORTION OF WORK TO BE SELF-PERFORMED (IF LESS THAN 100% OF THE CONTRACT WORK): <i>R1-R18, Various L items, Various S items</i>		
3. DOLLAR AMOUNT OF WORK TO BE SELF-PERFORMED: <i>\$ 7,204,237.38</i>	4. PERCENTAGE OF WORK TO BE SELF-PERFORMED: <i>69.88 %</i>	5. DATE: <i>09/16/2020</i>

## B. LIST OF SUBCONTRACTORS

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <i>Lavina Trucking, Inc.</i>	8. SUBCONTRACTOR AMOUNT <i>\$150,000.00</i>
3. ADDRESS <i>P.O. Box 24595</i>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <i>San Francisco, CA 94124</i>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <i>(415) 860-3594</i>	11. SBE No. (If Applicable): <i>37949</i>
6. FEDERAL I.D. NO. <i>20-3983855</i>	12. AGE OF FIRM (YRS): <i>18 years</i>
7. CA CONTRACTOR'S LICENSE NO. <i>DMV: 318513</i>	13. SCOPE OF WORK: <i>Trucking</i>

Continued on next page.



Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>JDB + Sons Construction</u>	8. SUBCONTRACTOR AMOUNT <u>\$553,950.00</u>
3. ADDRESS <u>1595 B Fair Fax Ave</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input checked="" type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>(415) 834-5756</u>	11. SBE No. (If Applicable): <u>1769778</u>
6. FEDERAL I.D. NO. <u>83-0513558</u>	12. AGE OF FIRM (YRS): <u>13 years</u>
7. CA CONTRACTOR'S LICENSE NO. <u>876159</u>	13. SCOPE OF WORK: <u>Underground/sewer/drainage</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Bay Area Lightworks, Inc.</u>	8. SUBCONTRACTOR AMOUNT <u>\$2,000,000.00</u>
3. ADDRESS <u>1460 Yosemite Ave</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input checked="" type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>(415) 822-2336</u>	11. SBE No. (If Applicable): <u>37334</u>
6. FEDERAL I.D. NO. <u>61-1460835</u>	12. AGE OF FIRM (YRS): <u>16 years</u>
7. CA CONTRACTOR'S LICENSE NO. <u>839612</u>	13. SCOPE OF WORK: <u>Electrical</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Giron Construction, Inc.</u>	8. SUBCONTRACTOR AMOUNT <u>\$10,000</u>
3. ADDRESS <u>170 Quint St</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input checked="" type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>(510) 229-3918</u>	11. SBE No. (If Applicable): <u>33481</u>
6. FEDERAL I.D. NO. <u>90-0775721</u>	12. AGE OF FIRM (YRS): <u>8 years</u>
7. CA CONTRACTOR'S LICENSE NO. <u>950100</u>	13. SCOPE OF WORK: <u>Concrete</u>

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>MG Remediation, Inc.</u>	8. SUBCONTRACTOR AMOUNT <u>\$211,556.00</u>
3. ADDRESS <u>20951 Cabot Blvd.</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Hayward, CA 94545</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <u>(510) 293-3009</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>16-1709265</u>	12. AGE OF FIRM (YRS): <u>17 years</u>
7. CA CONTRACTOR'S LICENSE NO. <u>839709</u>	13. SCOPE OF WORK: <u>Hazardous Abatement</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Asphalt Impressions, Inc.</u>	8. SUBCONTRACTOR AMOUNT <u>\$179,597.20</u>
3. ADDRESS <u>8150 37th Ave</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Sacramento, CA 95824</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <u>(916) 383-0441</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>20-8614153</u>	12. AGE OF FIRM (YRS): <u>13 years</u>
7. CA CONTRACTOR'S LICENSE NO. <u>900385</u>	13. SCOPE OF WORK: <u>Asphalt street stamp</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION



## SECTION 00 43 51

PROPOSED SUBCONTRACTORS FORM - NOT SELECTED  
(FOR SFMTA SBE FORM 2A)

*This form must be submitted with the Bid. The Bidder shall list all subcontractors (both SBE and non-SBE) who provided a quote or bid but were not selected to participate as a subcontractor in this project. This is required for compliance with Title 49, Section 26 of the Code of Federal Regulations.*

NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER:

Esquivel Grading &amp; Paving Inc.

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Associated Terrazzo Co., Inc.	8. SUBCONTRACTOR AMOUNT \$28,500.00
3. ADDRESS 1991 Oakdale Ave	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input checked="" type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-647-1995	11. SBE No. (If Applicable): 22403
6. FEDERAL I.D. NO. 94-2458894	12. AGE OF FIRM (YRS): 43 Years
7. CA CONTRACTOR'S LICENSE NO. 359329	13. SCOPE OF WORK: Terrazzo Paving

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Ground Cover Landscaping Inc.	8. SUBCONTRACTOR AMOUNT \$113,140.00
3. ADDRESS 328 Highland Ave	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94110	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 415-859-0481	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. 36-4580887	12. AGE OF FIRM (YRS): 17 Years
7. CA CONTRACTOR'S LICENSE NO. 930933	13. SCOPE OF WORK: Landscaping

Continued on next page.

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME O' Shaughnessy Construction Inc.	8. SUBCONTRACTOR AMOUNT \$845,800.00
3. ADDRESS 48 Riverton Dr.	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input checked="" type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94132	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-799-7043	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. 20-5143043	12. AGE OF FIRM (YRS): 2 Years
7. CA CONTRACTOR'S LICENSE NO. 984235	13. SCOPE OF WORK: Underground

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Bassett Engineering	8. SUBCONTRACTOR AMOUNT \$798,621.00
3. ADDRESS 2330 Castro St	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input checked="" type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94131	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-598-7268	11. SBE No. (If Applicable): 2020395
6. FEDERAL I.D. NO. 84-2107370	12. AGE OF FIRM (YRS): 2 Years
7. CA CONTRACTOR'S LICENSE NO. 1043676	13. SCOPE OF WORK: Underground

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME R&S Construction Management, Inc.	8. SUBCONTRACTOR AMOUNT \$347,440.00
3. ADDRESS 1555 Burke Ave, Suit I	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input checked="" type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-746-9564	11. SBE No. (If Applicable): 2001998
6. FEDERAL I.D. NO. 46-4676160	12. AGE OF FIRM (YRS): 6 Years
7. CA CONTRACTOR'S LICENSE NO. 992019	13. SCOPE OF WORK: Structural

END OF SECTION

## SECTION 00 43 50

PROPOSED SUBCONTRACTORS FORM  
(FOR SFMTA SBE FORM 2A)

Bidder shall provide the requested information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price. If this project involves the construction of streets, highways, or bridges, Bidder shall provide the information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price or \$10,000, whichever is greater. Under San Francisco Administrative Code section 6.21A(9) and California Public Contract Code section 4104, failure to provide at a minimum the name, location of the place of business, contractor's license number and the portion of work to be performed by each such subcontractor may render the bid nonresponsive or the Bidder unqualified to perform the work under this Contract. Bidders may provide license numbers or additional identifying information within 24 hours of the time bids are received. Where the City cannot identify a subcontractor with the information provided by a Bidder or where conflicting information is provided, the City may consider the subcontractor unlisted for purposes of Public Contract Code section 4106.

**Important Notice:** No subcontractor may be listed in a bid for a public works project unless registered with the California Department of Industrial Relations ("DIR") pursuant to Labor Code § 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code § 1771.1(a)]. An inadvertent listing of a subcontractor who is not registered under § 1725.5 will not be grounds for a bid protest or for determining a bid nonresponsive if the conditions set forth in Labor Code § 1771.1(c)(1) or (2) are met.

Bidder shall list all subcontractors (both SBE and Non-SBE) and indicate the annual gross receipts per the form.

## A. BIDDER'S PORTION OF WORK

1. NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: <i>M. Squared Construction Inc</i>		
2. BID ITEMS/PORTION OF WORK TO BE SELF-PERFORMED (IF LESS THAN 100% OF THE CONTRACT WORK): <i>CONCRETE - SEWER - STRUCTURAL</i>		
3. DOLLAR AMOUNT OF WORK TO BE SELF-PERFORMED: \$ <i>7,100,000</i>	4. PERCENTAGE OF WORK TO BE SELF-PERFORMED: <i>68</i> %	5. DATE: <i>9/16/20</i>

## B. LIST OF SUBCONTRACTORS

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <i>Ronan Construction Inc</i>	8. SUBCONTRACTOR AMOUNT <i>\$1,100,000</i>
3. ADDRESS <i>730 38th Avenue</i>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <i>San Francisco, CA 94121</i>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>NO</i>
5. PHONE NO. <i>415-779-5262</i>	11. SBE No. (If Applicable): <i>LOE - CMO-012216956</i>
6. FEDERAL I.D. NO. <i>46-5317062</i>	12. AGE OF FIRM (YRS): <i>Since 2014 -</i>
7. CA CONTRACTOR'S LICENSE NO. <i>997619</i>	13. SCOPE OF WORK: <i>Asphalt &amp; Concrete &amp; Traffic Control</i>

Continued on next page.



Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Asphalt Impressions</u>	8. SUBCONTRACTOR AMOUNT <u>\$152,297.<sup>00</sup></u>
3. ADDRESS <u>8150 37th Avenue</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Sacramento, CA 95824</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <u>916-383-0441</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <u>20-8614153</u>	12. AGE OF FIRM (YRS): <u>13.</u>
7. CA CONTRACTOR'S LICENSE NO. <u>900385</u>	13. SCOPE OF WORK: <u>stamp Asphalt</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Ground Cover Landscaping Inc</u>	8. SUBCONTRACTOR AMOUNT <u>\$91,700</u>
3. ADDRESS <u>1 Boutwell Street</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <u>LAE</u>
5. PHONE NO. <u>415-298-6623</u>	11. SBE No. (If Applicable): <u>LAE CND-112117100</u>
6. FEDERAL I.D. NO. <u>36-4580887</u>	12. AGE OF FIRM (YRS): <u>17 years</u>
7. CA CONTRACTOR'S LICENSE NO. <u>930933</u>	13. SCOPE OF WORK: <u>Landscaping</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Bay Area Lightworks, Inc.</u>	8. SUBCONTRACTOR AMOUNT <u>\$2,086,925</u>
3. ADDRESS <u>1460 Yosemite Avenue</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input checked="" type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415-822-2336</u>	11. SBE No. (If Applicable): <u>37334</u>
6. FEDERAL I.D. NO. <u>61-1460835</u>	12. AGE OF FIRM (YRS): <u>16</u>
7. CA CONTRACTOR'S LICENSE NO. <u>839612</u>	13. SCOPE OF WORK: <u>electrical</u>

END OF SECTION

*Copy this page as needed to provide a complete listing.*

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1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION

## SECTION 00 43 51

PROPOSED SUBCONTRACTORS FORM - NOT SELECTED  
(FOR SFMTA SBE FORM 2A)

This form must be submitted with the Bid. The Bidder shall list all subcontractors (both SBE and non-SBE) who provided a quote or bid but were not selected to participate as a subcontractor in this project. This is required for compliance with Title 49, Section 26 of the Code of Federal Regulations.

NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: <i>M Squared Construction Inc.</i>
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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <i>All Cities Trucking Services, Inc</i>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <i>1941 Jackson Street, Suite #6, Oakland CA, 94612</i>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <i>Oakland, CA 94612</i>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <i>510-461-8287</i>	11. SBE No. (If Applicable): <i>036987</i>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK: <i>Trucking</i>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <i>Day Line Cutting &amp; Coring Inc</i>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <i>501 Cesar Chavez, Suite 101 B</i>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> > \$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <i>San Francisco, CA 94124</i>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <i>415-508-1800</i>	11. SBE No. (If Applicable): <i>WBE - CMB = 022214255</i>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <i>809660</i>	13. SCOPE OF WORK: <i>Flat Sawing Asphalt/Concrete trench</i>

Continued on next page.



Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME CMC Traffic Control	8. SUBCONTRACTOR AMOUNT
3. ADDRESS Specialists, Inc 3450 3rd St, Suite 34.	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-206-1700	11. SBE No. (If Applicable): SBE 021713710
6. FEDERAL I.D. NO. 01-0620791	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 792059.	13. SCOPE OF WORK: Traffic Control.

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Golden Bay Trans Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 1485 Bayshore Blvd, Ste 320-0	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, California	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-854-1613	11. SBE No. (If Applicable): LBE 07211000329.
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK: Trucking.

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Hernandez Engineering	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 1390 Carroll Avenue	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415-824-4731	11. SBE No. (If Applicable): 55869.
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 756488	13. SCOPE OF WORK: Traffic Control

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>S &amp; S Trucking</u>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <u>477 Roland Way</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Oakland, CA 94621</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>510-383-3556</u>	11. SBE No. (If Applicable): <u>23533</u>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK: <u>Trucking</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Total Traffic Control</u>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <u>1475 Donner Avenue</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94124</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>925-440-7555</u>	11. SBE No. (If Applicable): <u>LBE - 10221000360</u>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <u>108669</u>	13. SCOPE OF WORK: <u>Traffic Control</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Marina Landscapes, Inc.</u>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <u>1683 E. Louise Ave</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Lathrop, CA 95330</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>925-250-4939</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <u>492062</u>	13. SCOPE OF WORK:

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Niles Rock Transport</u>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <u>1684 Delato Road, Unit 312</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Union City, CA 94587</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>510-455-6399</u>	11. SBE No. (If Applicable): <u>2009560</u>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK: <u>Trucking</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>Basset Engineering</u>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <u>2330 Castro Street</u>	9. ANNUAL GROSS RECEIPTS: <input checked="" type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>San Francisco, CA 94131</u>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>415-598-7268</u>	11. SBE No. (If Applicable): <u>2020395</u>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS): <u>1 year</u>
7. CA CONTRACTOR'S LICENSE NO. <u>1043676</u>	13. SCOPE OF WORK: <u>Sewer</u>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <u>TENNYSON Electric Inc</u>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <u>7275 National Drive Suite A</u>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <u>Livermore, CA 94550</u>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. <u>925-606-1038</u>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <u>717998</u>	13. SCOPE OF WORK: <u>Electrical</u>

END OF SECTION

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <i>Phoenix Electric Company</i>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <i>1350 Van Dyke Ave</i>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <i>San Francisco, CA 94124</i>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <i>415-671-3858</i>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <i>71-0900458</i>	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <i>811031</i>	13. SCOPE OF WORK: <i>Electrical</i>

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION

## SECTION 00 43 50

PROPOSED SUBCONTRACTORS FORM  
(FOR SFMTA SBE FORM 2A)

Bidder shall provide the requested information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price. If this project involves the construction of streets, highways, or bridges, Bidder shall provide the information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price or \$10,000, whichever is greater. Under San Francisco Administrative Code section 6.21A(9) and California Public Contract Code section 4104, failure to provide at a minimum the name, location of the place of business, contractor's license number and the portion of work to be performed by each such subcontractor may render the bid nonresponsive or the Bidder unqualified to perform the work under this Contract. Bidders may provide license numbers or additional identifying information within 24 hours of the time bids are received. Where the City cannot identify a subcontractor with the information provided by a Bidder or where conflicting information is provided, the City may consider the subcontractor unlisted for purposes of Public Contract Code section 4106.

**Important Notice:** No subcontractor may be listed in a bid for a public works project unless registered with the California Department of Industrial Relations ("DIR") pursuant to Labor Code § 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code § 1771.1(a)]. An inadvertent listing of a subcontractor who is not registered under § 1725.5 will not be grounds for a bid protest or for determining a bid nonresponsive if the conditions set forth in Labor Code § 1771.1(c)(1) or (2) are met.

Bidder shall list all subcontractors (both SBE and Non-SBE) and indicate the annual gross receipts per the form.

## A. BIDDER'S PORTION OF WORK

1. NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: Mitchell Engineering, Prime Contractor		
2. BID ITEMS/PORTION OF WORK TO BE SELF-PERFORMED (IF LESS THAN 100% OF THE CONTRACT WORK): <i>R-1 thru R-18 Portion, S-1 thru S-28 Portion, SW-1 thru SW-15</i>		
3. DOLLAR AMOUNT OF WORK TO BE SELF-PERFORMED: \$ <i>9,336,909 -</i>	4. PERCENTAGE OF WORK TO BE SELF-PERFORMED: <i>56</i> %	5. DATE: 9/16/2020

## B. LIST OF SUBCONTRACTORS

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Roadway Construction, Inc	8. SUBCONTRACTOR AMOUNT <i>348,224 -</i>
3. ADDRESS One Market Plaza Spear Tower, Suite 3600 San Francisco, CA 94105	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94105	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 415/293-8490	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 27-1043122	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 960732	13. SCOPE OF WORK: AC Paving - Partial

Continued on next page.

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Marina Landscape, Inc	8. SUBCONTRACTOR AMOUNT 151,450
3. ADDRESS 1683 E. Louise Avenue Lathrop, CA 95330	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE Lathrop, CA 95330	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 925/243-0288	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 95-3760820	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 492862	13. SCOPE OF WORK: Landscape - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Total Traffic Control	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 1475 Donner Avenue San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/963-0426	11. SBE No. (If Applicable): 2011279
6. FEDERAL I.D. NO. 81-3536373	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 1018669	13. SCOPE OF WORK: Traffic Control - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Apex Texting Laboratories, Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 1790 Yosemite Ave San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/550-9800	11. SBE No. (If Applicable): 1142740
6. FEDERAL I.D. NO. 13-4351450	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. N/A	13. SCOPE OF WORK: Testing - Partial

END OF SECTION

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Bay Area Lightworks	8. SUBCONTRACTOR AMOUNT 2,076,925
3. ADDRESS 1460 Yosemite Ave San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 415/822-2336	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 61-1460835	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 839612	13. SCOPE OF WORK: Electrical - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Ronan Construction, Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 730 38th Avenue San Francisco, CA 94121	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94121	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/779-5262	11. SBE No. (If Applicable): 2003232
6. FEDERAL I.D. NO. 46-5317062	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 997619	13. SCOPE OF WORK: AC Paving - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Tennyson Electric, Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 7275 National Drive, Suite A Livermore, CA 94550	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE Livermore, CA 94550	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 925/766-4042	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 94-3226331	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 717998	13. SCOPE OF WORK: Electrical - Partial

END OF SECTION



Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Asphalt Impressions, Inc	8. SUBCONTRACTOR AMOUNT 179,597 <sup>20</sup>
3. ADDRESS 8150 37th Ave Sacramento, CA 95824	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE Sacramento, CA 95824	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 20-8614153	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 900385	13. SCOPE OF WORK: Asphalt - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME 2040 Services	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 2345 Balboa Street San Francisco, CA 94121	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94121	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/815-7992	11. SBE No. (If Applicable): 2010975
6. FEDERAL I.D. NO. 83-0679096	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 1043603	13. SCOPE OF WORK: Concrete - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME R&S Construction Management, Inc	8. SUBCONTRACTOR AMOUNT 347,440 -
3. ADDRESS 1555 Burke Avenue, Suite I San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/746-9564	11. SBE No. (If Applicable): 2001998
6. FEDERAL I.D. NO. 46-4676160	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 992019	13. SCOPE OF WORK: Basement Concrete Roof Slab Work

END OF SECTION



Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME JM Environmental, Inc	8. SUBCONTRACTOR AMOUNT 2,500,600
3. ADDRESS PO Box 2189 Granite Bay, CA 95746	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input checked="" type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE Granite Bay, CA 95746	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 916/726-0304	11. SBE No. (If Applicable): 27080
6. FEDERAL I.D. NO. 68-0481718	12. AGE OF FIRM (YRS): 26 years
7. CA CONTRACTOR'S LICENSE NO. 693564	13. SCOPE OF WORK: Abatement & Demolition

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME On The Level Concrete	8. SUBCONTRACTOR AMOUNT 1,638,288.50
3. ADDRESS 190 Mendell Street San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 415/550-2663	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 56-2311794	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 813145	13. SCOPE OF WORK: Concrete - Partial

1. TYPE OF SUBCONTRACTOR: (Check one) <input type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME	8. SUBCONTRACTOR AMOUNT
3. ADDRESS	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK:

END OF SECTION

SECTION 00 43 51

PROPOSED SUBCONTRACTORS FORM - NOT SELECTED  
(FOR SFMTA SBE FORM 2A)

*This form must be submitted with the Bid. The Bidder shall list all subcontractors (both SBE and non-SBE) who provided a quote or bid but were not selected to participate as a subcontractor in this project. This is required for compliance with Title 49, Section 26 of the Code of Federal Regulations.*

NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: Mitchell Engineering, Prime Contractor
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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Total Traffic Control	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 1478 Donner Avenue San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/963-0426	11. SBE No. (If Applicable): 2011279
6. FEDERAL I.D. NO. 81-3536373	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 1018669	13. SCOPE OF WORK: Traffic Control

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Apex Texting Laboratories, Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 1790 Yosemite Ave San Francisco, CA 94124	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94124	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 415/550-9800	11. SBE No. (If Applicable): 1142740
6. FEDERAL I.D. NO. 13-4351450	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. N/A	13. SCOPE OF WORK: Testing

Continued on next page.

Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Ronan Construction, Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 730 38th Avenue San Francisco, CA 94121	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94121	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/779-5262	11. SBE No. (If Applicable): 2003232
6. FEDERAL I.D. NO. 46-5317062	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 997619	13. SCOPE OF WORK: AC Paving

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Tennyson Electric, Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 7275 National Drive, Suite A Livermore, CA 94550	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE Livermore, CA 94550	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. 925/766-4042	11. SBE No. (If Applicable): N/A
6. FEDERAL I.D. NO. 94-3226331	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 717998	13. SCOPE OF WORK: Electrical

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME 2040 Services	8. SUBCONTRACTOR AMOUNT
3. ADDRESS 2345 Balboa Street San Francisco, CA 94121	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE San Francisco, CA 94121	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO. 415/815-7992	11. SBE No. (If Applicable): 2010975
6. FEDERAL I.D. NO. 83-0679096	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. 1043603	13. SCOPE OF WORK: Concrete

END OF SECTION

## SECTION 00 43 50

PROPOSED SUBCONTRACTORS FORM  
(FOR SFMTA SBE FORM 2A)

Bidder shall provide the requested information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price. If this project involves the construction of streets, highways, or bridges, Bidder shall provide the information for each subcontractor who shall perform in excess of 1/2 of 1% of the Total Bid Price or \$10,000, whichever is greater. Under San Francisco Administrative Code section 6.21A(9) and California Public Contract Code section 4104, failure to provide at a minimum the name, location of the place of business, contractor's license number and the portion of work to be performed by each such subcontractor may render the bid nonresponsive or the Bidder unqualified to perform the work under this Contract. Bidders may provide license numbers or additional identifying information within 24 hours of the time bids are received. Where the City cannot identify a subcontractor with the information provided by a Bidder or where conflicting information is provided, the City may consider the subcontractor unlisted for purposes of Public Contract Code section 4106.

**Important Notice:** No subcontractor may be listed in a bid for a public works project unless registered with the California Department of Industrial Relations ("DIR") pursuant to Labor Code § 1725.5 [with limited exceptions from this requirement for bid purposes only under Labor Code § 1771.1(a)]. An inadvertent listing of a subcontractor who is not registered under § 1725.5 will not be grounds for a bid protest or for determining a bid nonresponsive if the conditions set forth in Labor Code § 1771.1(c)(1) or (2) are met.

Bidder shall list all subcontractors (both SBE and Non-SBE) and indicate the annual gross receipts per the form. \* On bid day TBC will provide name, location of business, contractor's license number and the portion of work. All other information will be provided within 24 hours of bid opening\*

## A. BIDDER'S PORTION OF WORK

1. NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER: Thompson Builders Corporation		
2. BID ITEMS/PORTION OF WORK TO BE SELF-PERFORMED (IF LESS THAN 100% OF THE CONTRACT WORK): <b>concrete, under ground, site work</b>		
3. DOLLAR AMOUNT OF WORK TO BE SELF-PERFORMED: \$ <b>4,500,000</b>	4. PERCENTAGE OF WORK TO BE SELF-PERFORMED: <b>61</b> %	5. DATE: <b>9/16/20</b>

## B. LIST OF SUBCONTRACTORS

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>BAY AREA LIGHTWORKS</b>	8. SUBCONTRACTOR AMOUNT: <b>\$ 2,086,000</b>
3. ADDRESS <b>SAN FRANCISCO, CA</b>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>94124</b>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable): <b>37334</b>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <b>839612</b>	13. SCOPE OF WORK: <b>Electrical</b>

Continued on next page.



Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>Cmc Traffic</b>	8. SUBCONTRACTOR AMOUNT <b>\$ 200,000</b>
3. ADDRESS <b>SAN FRANCISCO, CA</b>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>94124</b>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <b>792059</b>	13. SCOPE OF WORK: <b>Partial Traffic Control</b>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>Ronald NELSON</b>	8. SUBCONTRACTOR AMOUNT <b>\$1,822,707</b>
3. ADDRESS <b>SAN FRANCISCO, CA</b>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>94110</b>	10. CERTIFIED SBE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable): <b>111414869</b>
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <b>247431</b>	13. SCOPE OF WORK: <b>CONCRETE</b>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>ASPHALT IMPRESSIONS</b>	8. SUBCONTRACTOR AMOUNT <b>\$ 152,296</b>
3. ADDRESS <b>SACRAMENTO, CA</b>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input checked="" type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>95824</b>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO.	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO.	12. AGE OF FIRM (YRS):
7. CA CONTRACTOR'S LICENSE NO. <b>900385</b>	13. SCOPE OF WORK: <b>STAMPED ASPHALT</b>

END OF SECTION

## SECTION 00 43 51

PROPOSED SUBCONTRACTORS FORM - NOT SELECTED  
(FOR SFMTA SBE FORM 2A)

*This form must be submitted with the Bid. The Bidder shall list all subcontractors (both SBE and non-SBE) who provided a quote or bid but were not selected to participate as a subcontractor in this project. This is required for compliance with Title 49, Section 26 of the Code of Federal Regulations.*

NAME OF PRIME CONTRACTOR OR MAJORITY JOINT VENTURE PARTNER:

Thompson Builders Corporation

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME Bay Line Cutting & Coring Inc	8. SUBCONTRACTOR AMOUNT
3. ADDRESS SAN FRANCISCO, CA	9. ANNUAL GROSS RECEIPTS: UNKNOWN <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE 94124	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. (415) 508-1800	11. SBE No. (If Applicable): X
6. FEDERAL I.D. NO. UNKNOWN	12. AGE OF FIRM (YRS): UNKNOWN
7. CA CONTRACTOR'S LICENSE NO. 809660	13. SCOPE OF WORK: CUTTING & CORING

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME MD CONSTRUCTION 3	8. SUBCONTRACTOR AMOUNT 45,000
3. ADDRESS PROJECT MGMT SAN FRANCISCO, CA	9. ANNUAL GROSS RECEIPTS: UNKNOWN <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE 94110	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. (415) 601-5050	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. UNKNOWN	12. AGE OF FIRM (YRS): UNKNOWN
7. CA CONTRACTOR'S LICENSE NO. NONE	13. SCOPE OF WORK: PROJECT MANAGEMENT

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Copy this page as needed to provide a complete listing.

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1. TYPE OF SUBCONTRACTOR: (Check one) <b>(LJ)</b> <del>First</del> Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input checked="" type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>TOTAL TRAFFIC CONTROL</b>	8. SUBCONTRACTOR AMOUNT <b>2,700 / HR</b>
3. ADDRESS <b>SAN FRANCISCO, CA</b>	9. ANNUAL GROSS RECEIPTS: <b>UNKNOWN</b> <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>94124</b>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <b>(925) 440-7555</b>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <b>UNKNOWN</b>	12. AGE OF FIRM (YRS): <b>UNKNOWN</b>
7. CA CONTRACTOR'S LICENSE NO. <b>1018669</b>	13. SCOPE OF WORK: <b>TRAFFIC CONTROL</b>

1. TYPE OF SUBCONTRACTOR: (Check one) <input checked="" type="checkbox"/> First Tier; <input type="checkbox"/> Lower Tier; <input type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>TENNYSON ELECTRIC</b>	8. SUBCONTRACTOR AMOUNT
3. ADDRESS <b>LIVERMORE, CA</b>	9. ANNUAL GROSS RECEIPTS: <b>UNKNOWN</b> <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>94550</b>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <b>(925) 606-1038</b>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <b>UNKNOWN</b>	12. AGE OF FIRM (YRS): <b>UNKNOWN</b>
7. CA CONTRACTOR'S LICENSE NO. <b>717998</b>	13. SCOPE OF WORK: <b>ELECTRICAL</b>

1. TYPE OF SUBCONTRACTOR: (Check one) <b>(LJ)</b> <del>First</del> Tier; <input type="checkbox"/> Lower Tier; <input checked="" type="checkbox"/> Supplier; <input type="checkbox"/> Service Contractor (e.g. Trucker)	
2. SUBCONTRACTOR NAME <b>JREBAR</b>	8. SUBCONTRACTOR AMOUNT <b>15,000</b>
3. ADDRESS <b>SACRAMENTO, CA</b>	9. ANNUAL GROSS RECEIPTS: <input type="checkbox"/> < \$1 million <input type="checkbox"/> \$10-\$15 million <input type="checkbox"/> \$1-\$5 million <input type="checkbox"/> >\$15 million <input type="checkbox"/> \$5-\$10 million
4. CITY, STATE, ZIP CODE <b>95827</b>	10. CERTIFIED SBE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5. PHONE NO. <b>(916) 381-4680</b>	11. SBE No. (If Applicable):
6. FEDERAL I.D. NO. <b>UNKNOWN</b>	12. AGE OF FIRM (YRS): <b>UNKNOWN</b>
7. CA CONTRACTOR'S LICENSE NO.	13. SCOPE OF WORK: <b>STRUCTURAL STEEL</b>

END OF SECTION