

DOCUMENT 00 43 14

BIDDER REGISTRATION FORM

INDEPENDENT CONTRACTOR REGISTRATION

Contractor's License # 585965 - B General BuildingContractor's DIR Registration # 1001172474Date: August 19, 2026 Fed I.D. # 95-4234625Full Corporate Name of Company: Perera Construction & Design, Inc.Street Address: 2890 Inland Empire Blvd., Suite 102Ontario, CA 91764Mailing Address: 2890 Inland Empire Blvd., Suite 102Ontario, CA 91764Phone: 949-355-1684 Fax: 909-484-3439Name of Principal Contact: Keith PokrywaType of Business: ☐ Sole Proprietor ☐ Partnership
☐ Non-Profit 501(c)(3) ☒ Corporation
☐ other (please explain: _____)

INSURANCE

Workers' Compensation:Carrier: American Home Assurance Co. (ADP TotalSource)Address: 5800 Windward Parkway, Alpharetta, GA 30005Phone and Fax: 800-743-8130Policy Number: WC 017397695 CAGeneral Liability:Carrier: Alliant Insurance Services, Inc.Address: 18100 Von Karman Ave., 10th Floor, Irvine, CA 92612Phone and Fax: Phone No. 949-42-6291 / Fax No. 949-756-2713Policy Number: 72UEAAZ4G6WPolicy Limits: \$ \$6,000,000.00

A.M. Best Rating: A+: XV (Admitted)

Automobile Liability:

Carrier: Alliant Insurance Services, Inc. / Trumbull Insurance Co.

Address: 18100 Von Karman Ave., 10th Floor, Irvine, CA 92612

Phone and Fax: Phone No. 949-42-6291 / Fax No. 949-756-2713

Policy Number: 72UEACB3199

Policy Limits: \$ \$1,000,000.00

A.M. Best Rating: A+: XV (Admitted)

All-risk Course of Construction (if applicable, as required by Document 00 73 16 – Insurance and Indemnification):

Carrier: Alliant Insurance Services, Inc. / Trumbull Insurance Co.

Address: 18100 Von Karman Ave., 10th Floor, Irvine, CA 92612

Phone and Fax: Phone No. 949-242-6291 / Fax No. 949-756-2713

Policy Number: 72RHAAZ4G72

Policy Limits: \$ Use Per Specification Limits

A.M. Best Rating: A+: XV (Admitted)

Professional Liability (if applicable, as required by Document 00 73 16 – Insurance and Indemnification):

Carrier: Alliant Insurance Services, Inc. / Lexington Insurance

Address: 18100 Von Karman Ave., 10th Floor, Irvine, CA 92612

Phone and Fax: Phone No. 949-242-6291 / Fax No. 949-756-2713

Policy Number: 72MSCM2088

Policy Limits: \$ \$5,000,000.00

A.M. Best Rating: A+: XV (Non-Admitted)

Pollution Legal Liability Insurance (if applicable, as required by Document 00 73 16 – Insurance and Indemnification):

Carrier: Alliant Insurance Services, Inc. / Westchester Surplus Lines Insurance Co.

Address: 18100 Von Karman Ave., 10th Floor, Irvine, CA 92612

Phone and Fax: Phone No. 949-42-6291 / Fax No. 949-756-2713

Policy Number: G71749071007

Policy Limits: \$ \$5,000,000.00

A.M. Best Rating: A++: XV (Non-Admitted)

BIDDER CERTIFIES, UNDER PENALTY OF PERJURY, THAT THE FOREGOING INFORMATION IS CURRENT AND ACCURATE AND AUTHORIZES OWNER, AND ITS AGENTS AND REPRESENTATIVES TO OBTAIN A CREDIT REPORT AND/OR VERIFY ANY OF THE ABOVE INFORMATION.



SIGNATURE Keith Pokrywa - CEO & President

August 19, 2026

DATE

DOCUMENT 00 43 13

BOND ACCOMPANYING BID

KNOW ALL BY THESE PRESENTS:

That the undersigned

Perera Construction & Design, Inc.

(Name of Contractor)

as Principal and the undersigned as Surety are held and firmly bound unto Owner, **BUENA PARK LIBRARY DISTRICT**, as obligee, in the penal sum of (Dollar Amount In Words)

Ten Percent of the Total Amount Bid Dollars (\$ 10% of Bid) lawful money of the United States of America being at least ten percent (10%) of the aggregate amount of said Principal's base Bid, for the payment of which, well and truly to be made, we bind ourselves, our successors, executors, administrators, and assigns, jointly and severally, firmly by these presents.

WHEREAS, said Principal is submitting a Bid for Owner Contract Number **BPLD-24-01 REN**, Buena Park Library Renovation Project, located at 7150 La Palma Ave, Buena Park, CA 90620.

THE CONDITION OF THIS OBLIGATION IS SUCH that if the Bid submitted by the said Principal be accepted and the Contract be awarded to said Principal and said Principal shall within the required periods enter into the Contract so awarded and provide the required Construction Performance Bond, Construction Labor and Material Payment Bond, insurance certificates, Guaranty, and all other endorsements, forms, and documents required under Document 00 21 13 (Instructions to Bidders), then this obligation shall be void, otherwise to remain in full force and effect. The full payment of the sum stated above shall be due immediately if Principal fails to execute the Contract within fourteen (14) calendar days of the date of Owner's Notice of Award to Principal.

IN WITNESS WHEREOF, the above bounden parties have executed this instrument this 20th day of July, 2026.
(Month)

Perera Construction & Design, Inc.

(Corporate Seal)

By

Principal Kath Perera
CEO & PRESIDENT

By

Fidelity and Deposit Company of Maryland
Surety

(Corporate Seal)

By

Leigh McDonough
Attorney in Fact, Leigh McDonough

END OF DOCUMENT

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT**CIVIL CODE § 1189**

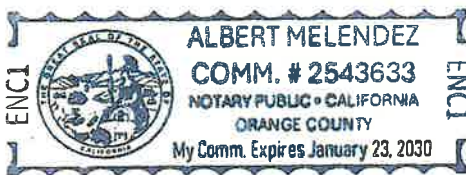
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of Orange)
On JUL 20 2020 before me, Albert Melendez, Notary Public
Date Here Insert Name and Title of the Officer
personally appeared Leigh McDonough
Name(s) of Signer(s)

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

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

WITNESS my hand and official seal.



Signature [Signature]
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: _____	Signer's Name: _____
Corporate Officer — Title(s): _____	Corporate Officer — Title(s): _____
Partner — Limited General	Partner — Limited General
Individual x Attorney in Fact	Individual Attorney in Fact
Trustee Guardian or Conservator	Trustee Guardian or Conservator
Other: _____	Other: _____
Signer Is Representing: _____	Signer Is Representing: _____

**ZURICH AMERICAN INSURANCE COMPANY
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY
FIDELITY AND DEPOSIT COMPANY OF MARYLAND
POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS: That the ZURICH AMERICAN INSURANCE COMPANY, a corporation of the State of New York, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, a corporation of the State of Illinois, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND a corporation of the State of Illinois (herein collectively called the "Companies"), by Christopher Nolan, Vice President, in pursuance of authority granted by Article V, Section 8, of the By-Laws of said Companies, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, do hereby nominate, constitute, and appoint **Rachelle RHEAULT, Leigh MCDONOUGH, Mark RICHARDSON, Kevin CATHCART, Terah LANE, Kim LUU, Heather SALTARELLI, Mike PARIZINO, Jeri L. APODACA, Kim HEREDIA** of Irvine, California, its true and lawful agent and Attorney-in-Fact, to make, execute, seal and deliver, for, and on its behalf as surety, and as its act and deed: any and all bonds and undertakings, and the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Companies, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the ZURICH AMERICAN INSURANCE COMPANY at its office in New York, New York., the regularly elected officers of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at its office in Owings Mills, Maryland., and the regularly elected officers of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at its office in Owings Mills, Maryland., in their own proper persons.

The said Vice President does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article V, Section 8, of the By-Laws of said Companies, and is now in force.

IN WITNESS WHEREOF, the said Vice-President has hereunto subscribed his/her names and affixed the Corporate Seals of the said ZURICH AMERICAN INSURANCE COMPANY, COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 14th day of October, A.D. 2025.



ATTEST:
**ZURICH AMERICAN INSURANCE COMPANY
COLONIAL AMERICAN CASUALTY AND SURETY COMPANY
FIDELITY AND DEPOSIT COMPANY OF MARYLAND**

By: *Christopher Nolan*
Vice President

By: *Dawn E. Brown*
Secretary

**State of Maryland
County of Baltimore**

On this 14th day of October, A.D. 2025, before the subscriber, a Notary Public of the State of Maryland, duly commissioned and qualified, **Christopher Nolan, Vice President and Dawn E. Brown, Secretary** of the Companies, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and acknowledged the execution of same, and being by me duly sworn, depose and saith, that he/she is the said officer of the Company aforesaid, and that the seals affixed to the preceding instrument are the Corporate Seals of said Companies, and that the said Corporate Seals and the signature as such officer were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporations.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal the day and year first above written.

Genevieve M. Maison
Notary Public
My Commission Expires January 27, 2029



EXTRACT FROM BY-LAWS OF THE COMPANIES

"Article V, Section 8, Attorneys-in-Fact. The Chief Executive Officer, the President, or any Executive Vice President or Vice President may, by written instrument under the attested corporate seal, appoint attorneys-in-fact with authority to execute bonds, policies, recognizances, stipulations, undertakings, or other like instruments on behalf of the Company, and may authorize any officer or any such attorney-in-fact to affix the corporate seal thereto; and may with or without cause modify or revoke any such appointment or authority at any time."

CERTIFICATE

I, the undersigned, Vice President of the ZURICH AMERICAN INSURANCE COMPANY, the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY, and the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the foregoing Power of Attorney is still in full force and effect on the date of this certificate; and I do further certify that Article V, Section 8, of the By-Laws of the Companies is still in force.

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the ZURICH AMERICAN INSURANCE COMPANY at a meeting duly called and held on the 15th day of December 1998.

RESOLVED: "That the signature of the President or a Vice President and the attesting signature of a Secretary or an Assistant Secretary and the Seal of the Company may be affixed by facsimile on any Power of Attorney...Any such Power or any certificate thereof bearing such facsimile signature and seal shall be valid and binding on the Company."

This Power of Attorney and Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the COLONIAL AMERICAN CASUALTY AND SURETY COMPANY at a meeting duly called and held on the 5th day of May, 1994, and the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 10th day of May, 1990.

RESOLVED: "That the facsimile or mechanically reproduced seal of the company and facsimile or mechanically reproduced signature of any Vice-President, Secretary, or Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seals of the said Companies, this _____ day of _____

JUL 20 2020



MJ Pethick

Mary Jean Pethick
Vice President

TO REPORT A CLAIM WITH REGARD TO A SURETY BOND, PLEASE SUBMIT A COMPLETE DESCRIPTION OF THE CLAIM INCLUDING THE PRINCIPAL ON THE BOND, THE BOND NUMBER, AND YOUR CONTACT INFORMATION TO:

Zurich Surety Claims
1299 Zurich Way
Schaumburg, IL 60196-1056
reportsfclaims@zurichna.com
800-626-4577

SAFETY EXPERIENCE

The following statements as to the Bidder's safety experience are submitted with the Bid, as part thereof, and the Bidder guarantees the truthfulness and accuracy of all information.

1. List Bidder's interstate Experience Modification Rate for the last three years.
~~[20 26]~~ 0.77 ~~[20 25]~~ 0.80 ~~[20 24]~~ 0.77
2. Use Bidder's last year's Cal/OSHA 201 log to fill in the following number of injuries and illnesses:

a. Number of lost workday cases	0
b. Number of medical treatment cases	0
c. Number of fatalities	0
3. Employee hours worked last year 77,833
4. State the name of Bidder's safety engineer/manager: California

Attach a resume or outline of this individual's safety and health qualifications and experience.

I CERTIFY, UNDER PENALTY OF PERJURY, THAT THE FOREGOING INFORMATION IS CURRENT AND ACCURATE AND I AUTHORIZE OWNER, AND ITS AGENTS AND REPRESENTATIVES TO OBTAIN A CREDIT REPORT AND/OR VERIFY ANY OF THE ABOVE INFORMATION.

BIDDER:

By: Keith Pokrywa 
Signature

Its: CEO & President
Title

Date August 19, 2026

END OF DOCUMENT

OSHA's Form 300A (Rev. 04/2004)

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it. Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the [free Adobe PDF Reader](#).

Year 20 25

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

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

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

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

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>0</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of ... (M)	
(1) Injuries <u>0</u>	(4) Poisonings <u>0</u>
(2) Skin disorders <u>0</u>	(5) Hearing loss <u>0</u>
(3) Respiratory conditions <u>0</u>	(6) All other illnesses <u>0</u>

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

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name Perera Construction & Design, Inc
Street 2890 Inland Empire Blvd, Suite 102
City Ontario State CA Zip 91764

Industry description (e.g., *Manufacture of motor truck trailers*)

Construction

North American Industrial Classification (NAICS), if known (e.g., 336212)

236220

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 45
Total hours worked by all employees last year 77,833

Sign here

Knowingly falsifying this document may result in a fine.

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

Edith Serrano HR & Office Administrator
Company executive Title
Phone 9097764486 Date 12/31/2025

Reset

OSHA's Form 300A (Rev. 04/2004)

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it.
Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the [free Adobe PDF Reader](#).

Year 20 24

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1216-0176

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

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

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

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
<u>0</u>	<u>0</u>
(K)	(L)

Injury and Illness Types

Total number of ... (M)			
(1) Injuries	<u>0</u>	(4) Poisonings	<u>0</u>
(2) Skin disorders	<u>0</u>	(5) Hearing loss	<u>0</u>
(3) Respiratory conditions	<u>0</u>	(6) All other illnesses	<u>0</u>

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

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name Perera Construction & Design

Street 2890 Inland Empire Blvd, Suite 102

City Ontario State CA Zip 91764

Industry description (e.g., *Manufacture of motor truck trailers*)

Construction

North American Industrial Classification (NAICS), if known (e.g., 336212)

236210

Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)

Annual average number of employees 40

Total hours worked by all employees last year 77,832.58

Sign here

Knowingly falsifying this document may result in a fine.

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

Edith Soriano HR & Office Administrator
Company executive Title
Phone 909.484.6350 Date 01/08/2025

Reset

Log of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it. Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader. In addition, the forms are programmed to auto-calculate as appropriate.

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

Year 20 23

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no 1218-0176

Please Record:

- Information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid.
- Significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional.
- Work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12.

Reminders:

- Complete an *Injury and Illness Incident Report* (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.
- Feel free to use two lines for a single case if you need to.
- Complete the 5 steps for each case.

Establishment name Perera Construction & Design, INCCity Ontario State CA

Step 1. Identify the person

Step 2. Describe the case

Step 3. Classify the case

SELECT ONLY ONE circle based on the most serious outcome.

Step 4.

Enter the number of days the injured or ill worker was:

Step 5.

Select one column:

[illegible]

^a While reporting results for this collection of outcomes it is important to average 14 minutes per response, including time to remove the questionnaire, write and enter the data collected, and compute and review the collection of outcomes. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates of any other aspect of this data collection, contact US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Add a Form Page

Page totals ▶ 0 0 0 0 0 0 0 0 0 0 0 0

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

(1)	(2)	(3)	(4)	(5)	(6)
Index	Quadratic	Quadratic	Quadratic	Quadratic	All other

OSHA's Form 300A (Rev. 04/2004)

Summary of Work-Related Injuries and Illnesses

Note: You can type input into this form and save it. Because the forms in this recordkeeping package are "fillable/writable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

Year 20 23



U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

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

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

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

Number of Cases			
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
(G)	(H)	(I)	(J)

Number of Days	
Total number of days away from work	Total number of days of job transfer or restriction
<u>0</u>	<u>0</u>
(K)	(L)

Injury and Illness Types			
Total number of (M)			
(1) Injuries	<u>0</u>	(4) Poisonings	<u>0</u>
(2) Skin disorders	<u>0</u>	(5) Hearing loss	<u>0</u>
(3) Respiratory conditions	<u>0</u>	(6) All other illnesses	<u>0</u>

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

Public reporting burden for this collection of information is estimated to average 55 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this data collection, including suggestions for reducing the burden, to Washington, DC 20203. Do not send the collection of information to the office.

Establishment information	
Your establishment name	<u>Perera Contruction & Design, Inc</u>
Street	<u>2890 Inland Empire Blvd, Suite 102</u>
City	<u>Ontario</u> State <u>CA</u> Zip <u>91764</u>
Industry description (e.g., <i>Manufacture of motor truck trailers</i>)	
<u>Construction</u>	
North American Industrial Classification (NAICS), if known (e.g., 336212)	
<u>236210</u>	
Employment information (If you don't have these figures, see the Worksheet on the next page to estimate.)	
Annual average number of employees	<u>40</u>
Total hours worked by all employees last year	<u>77,832.58</u>
Sign here	
Knowingly falsifying this document may result in a fine.	
I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.	
Company executive	<u>[Signature]</u>
Phone	<u>909.484.6350</u>
Date	<u>01/08/2024</u>
Reset	



March 6, 2026

Perera Construction & Design, Inc.
2890 Inland Empire Blvd., Suite 102
Ontario, CA 91764

Re: Experience Modification Rates

To whom it may concern,

The following are the Experience Modification Rate Factors for Perera Construction & Design, Inc. :

<u>Year</u>	<u>EMR</u>
2026 effective 3/4/2026	0.77
2025 effective 3/5/2025	0.80
2024 effective 8/2/2024	0.77

Perera Construction & Design, Inc. has a very good safety program and are doing a great job ensuring your jobsites are safe and your employees are taken care of. In addition, Perera Construction & Design, Inc. stays actively involved in your Workers Compensation program and monitor the resulting claims to ensure efficient and positive results.

Please let me know if there is anything else that you need.

Sincerely,

Soham Naik

Soham Naik
Account Executive
Alliant Insurance Services, Inc.

DOCUMENT 00 45 01

SITE VISIT CERTIFICATION

TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID
IF SITE VISIT WAS MANDATORY

PROJECT: Perera Construction & Design, Inc.

Check option that applies:

X I certify that I visited the Site of the proposed Work, received the attached 1,791 pages of information, and became fully acquainted with the conditions relating to construction and labor. I fully understand the facilities, difficulties, and restrictions attending the execution of the Work under contract.

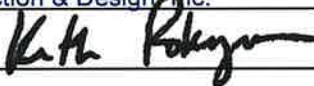
X I certify that Alan Bautista (Bidder's representative) visited the Site of the proposed Work, received the attached 1,791 pages of information, and became fully acquainted with the conditions relating to construction and labor. The Bidder's representative fully understood the facilities, difficulties, and restrictions attending the execution of the Work under contract.

Bidder fully indemnifies the Buena Park Library District, its Architect, its Engineers, its Construction Manager, and all of their respective officers, agents, employees, and consultants from any damage, or omissions, related to conditions that could have been identified during my visit and/or the Bidder's representative's visit to the Site.

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

Date: August 19, 2026

Proper Name of Bidder: Perera Construction & Design, Inc.

Signature: 

Print Name: Keith Pokrywa

Title: CEO & President

ATTACHMENTS:

1. Bid Instructions
2. Procurement and Contracting Requirements
3. Bid Set Drawings
4. Specifications - Project Manual END OF DOCUMENT
5. Attachment A Prequalification Questionnaire for Prime Contractors
6. Attachment B Available Project Information
7. 7-10-26 Pre Bid Meeting Attendance Sheets



BUENA PARK Library District



**BUENA PARK LIBRARY DISTRICT
Library Renovation Project
Mandatory Pre-construction Meeting Agenda
Introduction Notes**

Date: July 10, 2026
Time: 10:00 AM
Location: In-Person – 7150 La Palma Ave, Buena Park, CA 90620

A. ATTENDEE SIGN-IN SHEET (10:00am – 10:15am)

B. WELCOME & DISTRICT PROJECT TEAM INTRODUCTIONS

- 1) Buena Park Library District – Client.
- 2) Griffin Structures, Inc – Program & Construction Managers
- 3) LPA – Architect

C. KEY DATES

DATE & TIME	DEADLINE / PROCESS DESCRIPTION
July 10, 2026 @ 10:00am	Mandatory Pre-Bid Conference: Buena Park Library 7150 La Palma Ave, Buena Park, CA 90620
July 24, 2026 @ 5:00pm	Final Date / Deadline for Bidders to submit questions and requests for clarifications
August 07, 2026	Deadline for District to Issue Final Addendum regarding bidders questions and requests for clarifications
August 14, 2026 @ 10:00am	Prequalification Questionnaire (See Attachment A of Bid Documents) must be completed and submitted by all bidders on or before the deadline
August 19, 2026 @ 10:00am	Deadline for Pre-Qualified Prime Contractors Bid Submissions
August 19, 2026 @ 2:00pm	2:00pm Bids Opening
September 01, 2026	District intends to Vote Award of Contract to lowest responsive and responsible Bidder
September 02, 2026	Targeted Issuance of Notice of Intent to Award to selected Contractor
September 17, 2026 (TBC)	Pre-Construction Meeting
September 18, 2026 (TBC)	Issue Notice to Proceed to contractor
October 19, 2026 (TBC)	On-Site Start of Construction

D. PROTOCOL INSTRUCTIONS

- 1) As stated under Addendum #1 issued on July 8, 2026, the District encourages bidders to submit their completed Pre-qualification Questionnaires well before the August 14, 2026, 10:00 am deadline. The District reviews submissions on a rolling basis and will notify bidders of their status shortly after evaluation.
- 2) Only Prequalified Prime Contractors will be eligible to submit bids.
- 3) Prevailing Wage Compliance - The District's Labor Compliance Consultant will ensure Mandatory enforcement of state prevailing wage laws, payroll reporting, and DIR registration requirements.
- 4) The District will accept and note questions from bidders during this pre-bid meeting, however, all questions must also be submitted in writing as strictly required by the RFB.
- 5) No direct contact is allowed by bidders, subcontractors, suppliers etc., to District staff and/or District representatives throughout the bidding process.

E. ADDENDUMS

- 1) The District has adopted a proactive process for responding to bidder questions via issuance of addendums. All addendums are available on PlanetBids.

F. MANDATORY BID SUBMISSION PROCUREMENT FORMS & SUPPLEMENTS

- 1) Bidders are to strictly follow the required Bid Submission instructions as shown in the Procurement & Contracting Requirements Document.

Prequalification Questionnaire.....	(Refer to Attachment A)
Bid Form.....	00 41 13
Bond Accompanying Bid.....	00 43 13
Bidder Registration.....	00 43 14
Designated Subcontractor List.....	00 43 30
Site Visit Certification.....	00 45 01
Non-Collusion Declaration.....	00 45 19
Iran Contracting Act Certification.....	00 45 19.01
Bidder Certifications.....	00 45 46

G. CITY AND DEPUTY INSPECTIONS

- 1). City Inspections will be performed by the City of Buena Park's Public Works Department.
- 2). Special Inspections and Testing required by the Contract Documents for compliance with the California Building Code shall be performed by the District's Special Inspection Consultant.

H. SITE AVAILABILITY, SAFETY & SECURITY

- 1). The District has vacated the entire and property.
- 2). All areas will be accessible to the awarded contractor, with the strict exception of the garages.
- 3). The selected contractor shall maintain total responsibility for site and building safety and security until final project close-out.

I. PROJECT WALK THROUGH - (10:30am - 11:30am)

The design team will lead this morning's project walkthrough, providing overviews of the required SOW, comprising:

- 1) Building Exterior Improvements
- 2) Roof Improvements
- 3) Interiors from Basement through floor Level 2

DOCUMENT 00 45 19

NON-COLLUSION AFFIDAVIT

PUBLIC CONTRACT CODE § 7106

NON-COLLUSION AFFIDAVIT TO BE EXECUTED BY BIDDER AND SUBMITTED WITH BID

STATE OF CALIFORNIA)
) ss.
COUNTY OF _____)

Perera Construction & Design, Inc., being first duly sworn,
(Name of Principal of Bidder)

deposes and says that he or she is Keith Pokrywa
(Office of Affiant)

of Perera Construction & Design, Inc., the party
(Name of Bidder)

making the foregoing Bid, that the Bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the Bid is genuine and not collusive or sham; that Bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham Bid, and has not directly or indirectly colluded, conspired, connived or agreed with any bidder or anyone else to put in a sham Bid, or that anyone shall refrain from bidding, and that the Bidder has not in any manner, directly or indirectly, sought by agreement, communication or conference with anyone to fix the Bid price of Bidder or any other bidder, or to fix any overhead, profit or cost element of the Bid price, or of that of any other bidder, or to secure any advantage against Owner, or anyone interested in the proposed contract; that all statements contained in the Bid are true; and further, that Bidder has not, directly or indirectly, submitted its Bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, Bid depository, or to any member or agent thereof to effectuate a collusive or sham Bid.

Executed under penalty of perjury under the laws of the State of California:

Perera Construction & Design, Inc.
(Name of Bidder)

Keith Pokrywa
(Signature of Principal)

Keith Pokrywa

Subscribed and sworn before me Irene M. Enriquez

Irene M. Enriquez

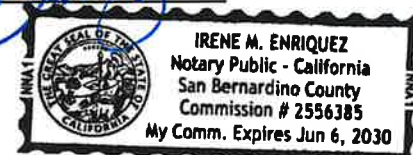
This 19th day of August, 2026

Notary Public of the State of California

In and for the County of San Bernardino

My Commission expires _____

(Seal)



NOTE: If Bidder is a partnership or a joint venture, this affidavit must be signed and sworn to by every member of the partnership or venture.

NOTE: If Bidder [including any partner or venturer of a partnership or joint venture] is a corporation, this affidavit must be signed by the Chairman, President, or Vice President and by the Secretary, Assistant Secretary, Chief Financial Officer, or Assistant Treasurer.

NOTE: If Bidder's affidavit on this form is made outside the State of California, the official position of the person taking such affidavit shall be certified according to law.

END OF DOCUMENT

DOCUMENT 00 45 19.01

IRAN CONTRACTING ACT CERTIFICATION
(Public Contract Code Sections 2202-2208)

PROJECT/CONTRACT NO.: Contract No. BPLD-24-01 REN between the Buena Park Library District ("Owner") and Perera Construction & Design, Inc.
 ("Contractor" or "Bidder") ("Contract" or "Project").

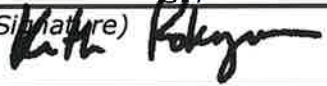
Prior to bidding on or submitting a proposal for a contract for goods or services of \$1,000,000 or more, the bidder/proposer must submit this certification pursuant to Public Contract Code section 2204.

The bidder/proposer must complete **ONLY ONE** of the following two options. To complete OPTION 1, check the corresponding box **and** complete the certification below. To complete OPTION 2, check the corresponding box, complete the certification below, and attach documentation demonstrating the exemption approval.

- ☒ **OPTION 1.** Bidder/Proposer 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 we are not a financial institution extending twenty million dollars (\$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.
- ☐ **OPTION 2.** Bidder/Proposer has received a written exemption from the certification requirement pursuant to Public Contract Code sections 2203(c) and (d). *A copy of the written documentation demonstrating the exemption approval is included with our bid/proposal.*

CERTIFICATION:

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY, that I am duly authorized to legally bind the bidder/proposer to the OPTION selected above. This certification is made under the laws of the State of California.

<i>Vendor Name/Financial Institution (Printed)</i> Perera Construction & Design, Inc.	<i>Federal ID Number (or n/a)</i> 95-4234625
<i>By (Authorized Signature)</i> 	
<i>Printed Name and Title of Person Signing</i> Keith Pokrywa - CEO & President	<i>Date Executed</i> August 19, 2026

END OF DOCUMENT

DOCUMENT 00 45 46

BIDDER CERTIFICATIONS

TO BE EXECUTED BY ALL BIDDERS AND SUBMITTED WITH BID

The undersigned Bidder certifies to Owner as set forth in sections 1 through 7 below.

1. STATEMENT OF CONVICTIONS

By my signature hereunder, I hereby swear, under penalty of perjury, that no more than one final, unappealable finding of contempt of court by a Federal Court has been issued against Bidder within the past two years because of failure to comply with an order of a Federal Court or to comply with an order of the National Labor Relations Board.

2. CERTIFICATION OF WORKER'S COMPENSATION INSURANCE

By my signature hereunder, as the Contractor, I certify that I am aware of the provisions of Labor Code Section 3700 that require every employer to be insured against liability for worker's compensation or to undertake self-insurance in accordance with the provisions of that Code, and I will comply with such provisions before commencing the performance of the work of this Contract.

3. CERTIFICATION OF PREVAILING WAGE RATES AND RECORDS

By my signature hereunder, as the Contractor, I certify that I am aware of the provisions of Labor Code Section 1773 that requires the payment of prevailing wage on public projects. Contractor and any subcontractors under the Contractor shall comply with Labor Code Section 1776 regarding wage records, and with Labor Code Section 1777.5 regarding the employment and training of apprentices. Contractor is responsible to ensure compliance by any and all subcontractors performing work under this Contract.

4. CERTIFICATION OF COMPLIANCE WITH PUBLIC WORKS CHAPTER OF LABOR CODE

By my signature hereunder, as the Contractor, I certify that I am aware of Labor Code Sections 1777.1 and 1777.7 and Contractor and Subcontractors are eligible to bid and work on public works projects.

5. CERTIFICATION OF NON-DISCRIMINATION

By my signature hereunder, as the Contractor, I certify that there will be no discrimination in employment with regard to race, color, religion, gender, sexual orientation, age or national origin; that all federal, state, and local directives and executive orders regarding non-discrimination in employment will be complied with; and that the principal of equal opportunity in employment will be demonstrated positively and aggressively.

6. CERTIFICATION OF NON-DISQUALIFICATION

By my signature hereunder, as the Contractor, I swear, under penalty of perjury, that the below indicated Bidder, any officer of Bidder, or any employee of Bidder who has a proprietary interest in such Bidder, has never been disqualified, removed, or otherwise prevented from bidding on, or completing a Federal, State, or local government project because of a violation of law or safety regulation, except as indicated on the separate sheet attached hereto entitled "Previous Disqualifications." If a statement of "Previous Disqualifications" is attached, please explain the circumstances.

7. CERTIFICATION OF ADEQUACY OF CONTRACT AMOUNT

By my signature hereunder, as the Contractor, pursuant to Labor Code Section 2810(a), I certify that, if awarded the Contract based on the undersigned's Bid, the Contract will include funds sufficient to allow the Contractor to comply with all applicable local, state, and federal laws or regulations governing the labor or services to be provided. I understand that Owner will be relying on this certification if it awards the Contract to the undersigned.

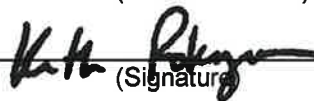
BIDDER:

Perera Construction & Design, Inc.

(Name of Bidder)

Date: August 19, 2026, [201]

By:



(Signature)

Name: Keith Pokrywa

(Print Name)

Its: CEO & President

(Title)

END OF DOCUMENT

CALIFORNIA ACKNOWLEDGMENT

CIVIL CODE § 1189

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

State of California

County of San Bernardino }

On August 19, 2026 before me, Irene M. Enriquez
Date Here Insert Name and Title of the Officer

personally appeared Keith Richard Pokrywa
Name(s) of Signer(s)

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



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

WITNESS my hand and official seal.

Signature Irene M. Enriquez
Signature of Notary Public

Place Notary Seal and/or Stamp Above

OPTIONAL

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

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

☐ 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: _____

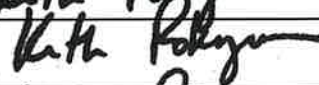
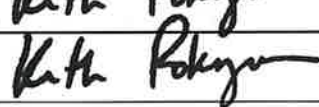
Signer is Representing: _____

DOCUMENT 00 41 13 (Rev 2)**BID FORM****BUENA PARK LIBRARY DISTRICT****To: Governing Board of the Buena Park Library District ("District" or "Owner")****THIS BID IS SUBMITTED BY:**Perera Construction & Design, Inc.

(Firm/Company Name)

Re: **Buena Park Library Renovation Project** at 7150 La Palma Ave, Buena Park, CA 90620
 Contract Number BPLD-24-01 REN

1. The undersigned has reviewed the Work outlined in the Contract Documents and fully understands the scope of Work required in this Proposal, understands the construction and project management function(s) is described in the Contract Documents, and that Bidder proposes and agrees, if this Bid is accepted, to enter into an agreement with the **BUENA PARK LIBRARY DISTRICT** in the form included in the Contract Documents, Document 00 52 00 (Agreement), to perform and furnish all Work as specified or indicated in the Contract Documents for the Contract Sum and within the Contract Time indicated in this Bid and in accordance with all other terms and conditions of the Contract Documents.
2. Bidder accepts all of the terms and conditions of the Contract Documents, Document 00 11 13 (Notice Inviting Bids), and Document 00 21 13 (Instructions to Bidders) including, without limitation, those dealing with the disposition of Bid Security. This Bid will remain subject to acceptance for 60 Days after the day of Bid opening, unless there is a bid protest, then 90 days after the day of bid opening.
3. In submitting this Bid, Bidder represents that Bidder has examined all of the Contract Documents, performed all necessary Pre-Bid investigations, attended the mandatory Pre-Bid Meeting, has notified Owner in writing of any discrepancies or omissions or of any doubt, questions, or ambiguities about the meaning of any of the Contract Documents, and received the following Addenda:

Addendum Number	<u>ADDENDUM DATE</u>	Signature of Bidder
Addendum No. 1	July 8, 2026	
Addendum No. 2	July 21, 2026	
Addendum No. 3	August 7, 2026	
Addendum No. 4	August 14, 2026	

4. Based on the foregoing, Bidder proposes and agrees to fully perform the Work within the time stated and in strict accordance with the Contract Documents for the following sums of money listed in the following Schedule of Bid Prices:

SCHEDULE OF BID PRICES

All Bid items, including lump sums, unit prices and alternates (if any), must be entered on this form completely and clearly. Bid items are described in Section 01 11 00 (Summary of Work). Quote in figures only unless words are specifically requested.

SUMMARY OF COSTS AND BID BREAKDOWN

Division #	Division Description (as applicable)	Division Total (\$)
01	General Conditions/Requirements	\$910,126.00
02	Existing Conditions	\$694,138.00
03	Concrete	\$363,500.00
04	Masonry	\$36,000.00
05	Metals	\$222,715.00
06	Wood, Plastics and Composites	\$518,218.00
07	Thermal & Moisture Protection	\$362,772.00
08	Openings	\$493,489.98
09	Finishes	\$1,098,828.00
10	Specialties	\$90,910.00
11	Equipment	\$12,075.00
12	Furnishings	\$3,700.00
13	Special Construction (NOT USED)	-
14	Conveying Equipment	\$191,578.00
21	Fire Suppression	\$309,400.00
22	Plumbing	\$281,780.00
23	Heating, Ventilating, and Air-Conditioning (HVAC)	\$149,963.00
25	Integrated Automation (NOT USED)	
26	Electrical	\$887,000.00
27	Communications	\$445,500.00
28	Electronic Safety and Security	\$47,292.00
31	Earthwork	\$97,500.00
32	Exterior Improvements	\$282,306.50
33	Utilities (NOT USED)	
34	Transportation (NOT USED)	
35	Waterway and Marine Construction (NOT USED)	
40	Process Integration (NOT USED)	
42	Process Heating, Cooling, and Drying Equipment (NOT USED)	
44	Pollution (NOT USED)	
46	Water and Wastewater Equipment (NOT USED)	
Divisions Total		\$7,498,791.48
Overhead and Profit		\$472,423.86
Insurance		\$118,480.91

June 2026

Cost of Payment and Performance Bonds	\$65,780.00
TOTAL BASE BID AMOUNT	\$8,155,476.25

UNIT PRICE SCHEDULE (For Allowance/Adjustment Quantity Variations)

Item No.	Description	Est. Qty	Unit	Unit Price (\$)	Item Total (\$)
1	Concrete surface preparation and application of MVE system, for concrete slabs to receive floor coverings listed in Specification Section 090561.	2000	SF		\$29,300.00
2	Provide localized Hydrophilic Polyurethane Ground Injection at the isolated cracks and cold joints with evidence of points intrusion (Per Drawing A2.00, keynote 03.03).	100	LF		\$6,000.00
Total Unit Price Schedule Amount					\$35,300.00

TOTAL COMBINED BID PRICE (Base Lump Sum + Total Unit Price Items): **\$8,190,776.25**
(This amount must match the amount entered on the Bid Form)

TOTAL COMBINED BID PRICE: **Eight Million One Hundred Ninety Thousand Seven Hundred Seventy-Six Dollars and Twenty-Five Cents**
 (State in Words)

Firm Name (as indicated on the Bid Form): Perera Construction & Design, Inc.

By: 
 Signature: Keith Pokrywa

Title CEO & President
 Date: August 18, 2026

5. The undersigned acknowledges that the Apparent Low Bidder will be determined as provided in Documents 00 11 13 (Notice to Bidders) and Document 00 21 13 (Instruction to Bidders).
6. Subcontractors for work are listed on Document 00 43 30 (Subcontractors List), submitted herewith.
7. The undersigned Bidder understands that Owner reserves the right to reject this Bid.
8. If written notice of the acceptance of this Bid, hereinafter referred to as Notice of Award, is mailed or delivered to the undersigned Bidder within the time described in Paragraph 2 of this Document 00 41 13 or at any other time thereafter before it is withdrawn, the undersigned Bidder will execute and deliver the documents required by Document 00 21 13 (Instructions to Bidders) within the times specified therein.
9. Notice of Award or request for additional information may be addressed to the undersigned Bidder at the address set forth below.
10. The undersigned Bidder herewith encloses a legible photocopy of (i) a cashier's check or (ii) a certified check), in the amount of ten percent (10%) of the Total Bid Price and made payable to

the BUENA PARK LIBRARY DISTRICT (certified without qualification and drawn on a solvent bank of the State of California or a National Bank doing business in the State of California), or (iii) a photocopy of a completed form of the Bid Bond (Document 00 43 13), Bidder must deposit the original of the bid bond, cashier's check, or certified check in the mail on the same day as the bid opening.

11. The undersigned Bidder agrees to commence Work under the Contract Documents on the date established in Document 00 72 00 (General Conditions) and to complete all Work within the time specified in Document 00 52 00 (Agreement).
12. The undersigned Bidder agrees that, in accordance with Document 00 72 00 (General Conditions), liquidated damages for failure to complete all Work in the Contract within the time specified in Document 00 52 00 (Agreement) shall be as set forth in Document 00 52 00.
13. The names of all persons interested in the foregoing Bid as principals are:

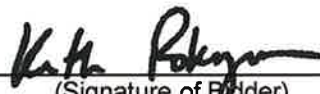
IMPORTANT NOTICE: If Bidder or other interested person is a corporation, give the legal name of corporation, state where incorporated, and names of president and secretary thereof; if a partnership, give name of the firm and names of all individual co-partners composing the firm; if Bidder or other interested person is an individual, give first and last names in full.

NAME OF BIDDER: Perera Construction & Design, Inc.

licensed in accordance with an act for the registration of Contractors, and with license number: 585965 - B - General Building Expiration: 1/31/2028

<u>California</u>	<u>Keith Pokrywa</u>
(Place of Incorporation, if Applicable)	(Principal)
	<u>(Principal)</u>
	<u>(Principal)</u>

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


(Signature of Bidder)

NOTE: If Bidder is a corporation, set forth the legal name of the corporation together with the signature of the officer or officers authorized to sign contracts on behalf of the corporation. If Bidder is a partnership, set forth the name of the firm together with the signature of the partner or partners authorized to sign contracts on behalf of the partnership.

Business Address: 2890 Inland Empire Blvd., Suite 102
Ontario, CA 91764

Contractor's Representative(s): Keith Pokrywa - CEO & President
(Name/Title)

Officers Authorized to Sign Contracts

(Name/Title)

(Name/Title)

Keith Pokrywa - CEO & President

(Name/Title)

(Name/Title)

(Name/Title)

Telephone Number(s):

949-355-1684

(Area Code)

(Number)

(Area Code)

(Number)

Fax Number(s):

909-484-3439

(Area Code)

(Number)

(Area Code)

(Number)

Date of Bid:

August 19, 2026

END OF DOCUMENT

DOCUMENT 00 43 30

DESIGNATED SUBCONTRACTORS LIST

The Subcontractors List must include the names of all subcontractors for those subcontractors who will perform any portion of Work, including labor, rendering of service, or specially fabricating and installing a portion of the Work or improvement according to detailed drawings contained in the plans and specifications, in excess of one half of one percent (0.5%) of the total Bid amount.

Bidder acknowledges and agrees that, if Bidder fails to list as to any portion of Work, or if Bidder lists more than one subcontractor to perform the same portion of Work, Bidder must perform that portion itself or be subjected to penalty under applicable law. In case more than one subcontractor is named for the same kind of Work, state the portion of the kind of Work that each subcontractor will perform.

Name of Subcontractor and Location of Place of Business	Description of Work	Subcontractor's License No.	DIR Registration Number*	% of Total Bid
AMERICAN INTEGRATED RESOURCES ORANGE, CA	DEMOLITION/ ABATEMENT	947563	1000000131	6.49
KAR CONSTRUCTION ONTARIO, CA	Building CONCRETE	595709	1000000930	4.46
MS APEX FIRE PROTECTION CHENDALE, CA	FIRE SPRINKLER	954286	1000006088	
W SOUND CONTROL CO. VALENCIA, CA	ACT	148569	1000003247	
N PROSPECTRA CONTRACT FLOORING-PRO INSTALLATIONS CERRITOS, CA	FLOORING	740392	1000002810	
W EDRNESTON LAW SURVEYING RIVERSIDE, CA	PLUMBING			
INFINITY DRYWALL CORONA, CA	DRYWALL	886097	1000005114	4.44

(Bidder to attach additional sheets if necessary)

* Pursuant to Division 2, Part 7, Chapter 1 (commencing with section 1720) of the California Labor Code.

END OF DOCUMENT

DOCUMENT 00 43 30

DESIGNATED SUBCONTRACTORS LIST

The Subcontractors List must include the names of all subcontractors for those subcontractors who will perform any portion of Work, including labor, rendering of service, or specially fabricating and installing a portion of the Work or improvement according to detailed drawings contained in the plans and specifications, in excess of one half of one percent (0.5%) of the total Bid amount.

Bidder acknowledges and agrees that, if Bidder fails to list as to any portion of Work, or if Bidder lists more than one subcontractor to perform the same portion of Work, Bidder must perform that portion itself or be subjected to penalty under applicable law. In case more than one subcontractor is named for the same kind of Work, state the portion of the kind of Work that each subcontractor will perform.

Name of Subcontractor and Location of Place of Business	Description of Work	Subcontractor's License No.	DIR Registration Number*	% of Total Bid
K&Z CABINET CO. ONTARIO, CA	CASEWORK	319196	1000404685	5.55
DONALD HORN CO. FONTANA, CA	FLOORING	178283	1000006421	3.70
WHITEHEAD CONST. RIVERSIDE, CA	DOORS	879992	1000008069	3.54
CORNERSTONE MECH. WHITTIER, CA	PLUMBING	1037674	1000980572	3.46
CHARLEY TUTTLES CUSTOM WELDING BOWSALL, CA	METALS / STEEL	859207	1000001963	2.55
RAINBOW GLAZING FULLERTON, CA	GLASS + GLAZING	863691	1000004744	2.45
INTERSECT TECH. ESCONDIDO, CA	COMMUNICATIONS	849343	1000001685	

(Bidder to attach additional sheets if necessary)

* Pursuant to Division 2, Part 7, Chapter 1 (commencing with section 1720) of the California Labor Code.

END OF DOCUMENT

DOCUMENT 00 43 30

DESIGNATED SUBCONTRACTORS LIST

The Subcontractors List must include the names of all subcontractors for those subcontractors who will perform any portion of Work, including labor, rendering of service, or specially fabricating and installing a portion of the Work or improvement according to detailed drawings contained in the plans and specifications, in excess of one half of one percent (0.5%) of the total Bid amount.

Bidder acknowledges and agrees that, if Bidder fails to list as to any portion of Work, or if Bidder lists more than one subcontractor to perform the same portion of Work, Bidder must perform that portion itself or be subjected to penalty under applicable law. In case more than one subcontractor is named for the same kind of Work, state the portion of the kind of Work that each subcontractor will perform.

Name of Subcontractor and Location of Place of Business	Description of Work	Subcontractor's License No.	DIR Registration Number*	% of Total Bid
STONE ROOFING AZUSA, CA	ROOFING	159149	1000001595	2.42
TK ELEVATOR CERRITOS, CA	ELEVATORS	651371	1000002104	2.16
ELIJAH ACOUSTICS IRVINE, CA	AC	1082089	1000830324	2.08
TRIFECTA MECH. IRVINDALE, CA	HVAC	1082037	2000002984	1.84
S.J. GRIGOLLA LA VERNE, CA	SITE CONCRETE	462356	1000025544	1.81
LETNER ROOFING ORANGE, CA	WATERPROOFING	689961	1000002763	1.47
TECHNO COATINGS ANAHEIM, CA	EPXY FLOORING	296517	1000005841	1.38

(Bidder to attach additional sheets if necessary)

* Pursuant to Division 2, Part 7, Chapter 1 (commencing with section 1720) of the California Labor Code.

END OF DOCUMENT

DOCUMENT 00 43 30

DESIGNATED SUBCONTRACTORS LIST

The Subcontractors List must include the names of all subcontractors for those subcontractors who will perform any portion of Work, including labor, rendering of service, or specially fabricating and installing a portion of the Work or improvement according to detailed drawings contained in the plans and specifications, in excess of one half of one percent (0.5%) of the total Bid amount.

Bidder acknowledges and agrees that, if Bidder fails to list as to any portion of Work, or if Bidder lists more than one subcontractor to perform the same portion of Work, Bidder must perform that portion itself or be subjected to penalty under applicable law. In case more than one subcontractor is named for the same kind of Work, state the portion of the kind of Work that each subcontractor will perform.

Name of Subcontractor and Location of Place of Business	Description of Work	Subcontractor's License No.	DIR Registration Number*	% of Total Bid
SC COATINGS CO. MULHETA, CA	PAINTING	791299	1000018680 10-12	1.10
ORTIZ TRACTOR SERVICE BUENA PARK, CA	EARTHWORK	429887	1000015280	1.02
LOBBY TRAFFIC SYSTEMS IRVING, CA	FENCES & GATES	578412	1000010804	0.85
A GOOD SIGN SANTA ANA, CA	SIGNAGE	956088	1000771743	0.82
ADVANCED FRAMING CORONA, CA	ROUGH CARPENTRY	944621	1001094694	0.63
TRI SIGNAL INTEGRATION SANTA CLARITA, CA	FIRE ALARM	758792	1000006998	0.58

(Bidder to attach additional sheets if necessary)

* Pursuant to Division 2, Part 7, Chapter 1 (commencing with section 1720) of the California Labor Code.

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Name of Subcontractor and Location of Place of Business	Description of Work	Subcontractor's License No.	DIR Registration Number*	% of Total Bid
VISALIA CERAMIC TILE VISALIA, CA	TILE	481599	100000896	0.56
KRETSCHMARR SMITH RIVERSIDE, CA	MASONRY	467211	10000207	0.44
McI Smith Stanton, CA	Electrical / Communications	394741	1000001784	16.34
	Security m			

(Bidder to attach additional sheets if necessary)

* Pursuant to Division 2, Part 7, Chapter 1 (commencing with section 1720) of the California Labor Code.

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