BID FORM

PROJECT IDENTIFICATION: PLANT 30 WELLHEAD TREATMENT

THIS BID IS SUBMITTED TO: MONTE VISTA WATER DISTRICT
(HEREINAFTER CALLED OWNER)

Name of Bidder J.F. Shea Construction, Inc.

Type of Entity: Corporation X, Partnership , Limited Liability Company , Other

DIR Registration Number 100001536

Street Address 667 Brea Canyon Road, Suite 30

in the City of Walnut County of Los Angeles

State of CA Zip Code 91789

Phone No. (909) 595-4397 Fax No. (909) 444-4268 E-mail estimating-water@jfshea.com

The undersigned declares that he or she has carefully examined the Site and the Contract Documents and hereby proposes and agrees to furnish all labor, materials, equipment, tools, transportation and services necessary to do all work required to construct the Project and all appurtenances therefore, in strict conformance with the Contract Documents, including the Plans and Specifications prepared by the Engineer, for the price(s) shown on the following pages. The total price for each Bid Schedule stated in this Bid for all Bid Items is based on the estimated quantities indicated in the Plans and Specifications, and shall include all items necessary to complete the Work.

The Owner reserves the right to reject any and all Bids, to waive any irregularities or to award the Contract to other than the lowest Bidder.

All prices are to include sales tax and delivery of Contractor-furnished materials to the Site.
<table>
<thead>
<tr>
<th>NO.</th>
<th>ITEM DESCRIPTION</th>
<th>UNIT OF MEASURE</th>
<th>EST. QTY</th>
<th>UNIT PRICE</th>
<th>ITEM COST</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>Mobilization Demobilization and Clean-up</td>
<td>LS</td>
<td>1</td>
<td>600,000</td>
<td>600,000</td>
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<tr>
<td>2</td>
<td>Granular Activated Carbon (GAC) System</td>
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<td>1</td>
<td>3,500,000</td>
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<td>3</td>
<td>Ion Exchange (IX) System</td>
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<td>4</td>
<td>Brine Makers</td>
<td>LS</td>
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<td>5</td>
<td>Chlorine Storage and Dosing</td>
<td>LS</td>
<td>1</td>
<td>200,000</td>
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<td>6</td>
<td>Chemical Storage Building</td>
<td>LS</td>
<td>1</td>
<td>780,000</td>
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<td>7</td>
<td>Water Recovery Storage Tank</td>
<td>LS</td>
<td>1</td>
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<td>8</td>
<td>Site Civil, Yard Piping, and Off-Site Pipelines</td>
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<td>1</td>
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<td>9</td>
<td>Electrical</td>
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<td>10</td>
<td>DCS Integration</td>
<td>LS</td>
<td>1</td>
<td>220,000</td>
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<td>11</td>
<td>Demolition</td>
<td>LS</td>
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<td>12</td>
<td>Site Shoring</td>
<td>LS</td>
<td>1</td>
<td>39,000</td>
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<tr>
<td>13</td>
<td>Start-up and performance Testing</td>
<td>LS</td>
<td>1</td>
<td>31,000</td>
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<tr>
<td>14</td>
<td>Operation and Maintenance Manuals</td>
<td>LS</td>
<td>1</td>
<td>5,000</td>
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<tr>
<td>15</td>
<td>All Other Work</td>
<td>LS</td>
<td>1</td>
<td>200,000</td>
<td>200,000</td>
</tr>
</tbody>
</table>

TOTAL BID AMOUNT $13,432,000

It is understood that the foregoing quantities are estimated only and are solely for the purpose of facilitating the comparison of bids, and that the Contractor's compensation will be computed upon the basis of the actual quantities in the completed Work.
IT IS UNDERSTOOD AND AGREED THAT:

1. The Bidder has carefully examined all the Contract Documents that will form a part of the Contract; namely, the Notice Inviting Bids, Information for Bidders, Bid, Summary of Bid Schedules, Bid Bond, Information Required of Bidders, Agreement, Faithful Performance Bond, Labor and Material Bond, Certificates of Insurance, General Provisions, Special Provisions, Plans and Specifications, and any Addenda issued prior to submittal of the Bid.

2. The Bidder has satisfied itself as to the nature and location of the Work and fully informed itself as to all conditions and matters which can in any way affect the Work or the cost thereof.

3. The Bidder fully understands the scope of Work and has checked carefully all words and figures inserted in this Bid and further understands that Owner will in no way be responsible for any errors or omissions in the preparation of this Bid.

4. The Bidder has given the Owner's Representative written notice of all conflicts, errors or discrepancies that the Bidder has discovered in the Contract Documents, and the written resolution thereof is acceptable to the Bidder.

5. The Bidder agrees and acknowledges that it is aware of the provisions of Section 3700 of the Labor Code, which 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 section, and that the Bidder will comply with such provisions of that Code section before commencing the performance of this Contract if it is awarded to the Bidder.

6. The Bidder will execute the Agreement and furnish the required bonds, together with the certificates of insurance required, within fifteen (15) working days after the award of the Contract.

7. The Bidder will not begin the Work unless and until all requirements in regard to bonds and insurance have been satisfied, and the Bidder will complete said Work within the period of time specified in the Notice Inviting Bids.

8. The Bidder hereby certifies that this Bid is genuine and not sham or collusive, nor made in the interest of or on behalf of any person not herein named; that the Bidder has not directly or indirectly induced or solicited any other bidder to put in a sham bid or any other person, firm or corporation to refrain from bidding; and that the Bidder has not in any manner sought by collusion to secure for itself any advantage over any other bidder.

9. If requested by the Owner, the Bidder shall furnish a notarized financial statement, references, and other information sufficiently comprehensive to permit an appraisal of its current financial condition.

10. The Bidder will accept an award and enter into an Agreement for all Work scheduled herein on which it submits a Bid. The awards for such Work are to be entirely at the discretion of
Owner after evaluation of the submitted Bids. Attached hereto is a (certified check) (cashier's check) (Bidder's bond), the amount being not less than ten percent (10%) of the total bid price payable to or in favor of Owner, which the Bidder agrees shall be retained as liquidated damages by the Owner if the Bidder fails or refuses to execute the Agreement and furnish the required bonds and certificates of insurance within the time specified by the Contract Documents.

* Strike out items not applicable.

11. This Bid may be withdrawn by the Bidder before the time fixed in the public notice for the opening of the bids. Following the time fixed in the public notice for the opening of the bids, this Bid may not be withdrawn for a period of ninety (90) days. Any request to withdraw this Bid as provided for herein must be made in writing to the Owner.

12. The following documents are attached to and made an integral part of this Bid:

(a) Bid Form
(b) Bid security (Bidder's bond, cashier's check, or certified check)
(c) Power of Attorney (for Bidder's bond only)
(d) General Contractor Questionnaire (if included in the specifications)
(e) Non-Collusion Declaration
(f) If the Bidder is a Corporation, a certified copy of the corporate resolution of the Board of Directors of the Corporation authorizing the Bid signatory to execute the Bid and the Contract contained within this document on behalf of the Corporation

13. In accordance with the provisions of Business and Professions Code Section 7028.15, Bidder declares that the representations made by Bidder herein are made under penalty of perjury under the laws of the State of California.
NOW, THEREFORE, in compliance with the Contract Documents and all the provisions hereinbefore stipulated, the undersigned, with full cognizance thereof, proposes to perform the entire Work for the prices set forth in the hereinbefore set forth Schedule(s) upon which award of Contract is made.

(SIGN AND COMPLETE APPLICABLE SECTION)

Individual Name:
Signed by: N/A Date:

Business Address:

Partnership Name:
Signed by: N/A, Partner Date:

Business Address:

Other Partners:

Corporation Name: J.F. Shea Construction, Inc.

(a Corporation**

Signed By: Steven W. Cox, Executive Vice-President, Dated: April 15, 2020
Signed By: Roy A. Valadez, Secretary, Dated: April 15, 2020

** (A corporation receiving the award shall furnish evidence of its corporate existence and evidence that the officer signing the Agreement and bonds is duly authorized to do so.)

Note: Please see attached Certificate of Corporate Secretary

[Seal and Attest]

Business Address:

667 Brea Canyon Road, Suite 30

Walnut, CA 91789
CALIFORNIA ACKNOWLEDGMENT

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

State of California
County of Los Angeles

On April 15, 2020 before me, Lori K. Olivas, Notary Public, personally appeared Steven W. Cox and Roy A. Valadez

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

<table>
<thead>
<tr>
<th>Description of Attached Document</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title or Type of Document: Bid Form</td>
</tr>
<tr>
<td>Document Date: April 15, 2020</td>
</tr>
<tr>
<td>Number of Pages: 14</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Capacity(ies) Claimed by Signer(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signer's Name: Steven W. Cox</td>
</tr>
<tr>
<td>Signer's Name: Roy A. Valadez</td>
</tr>
<tr>
<td>Corporate Officer – Title(s): Exec. V.P.</td>
</tr>
<tr>
<td>Corporate Officer – Title(s): Asst. Sec.</td>
</tr>
<tr>
<td>Partner – Limited General</td>
</tr>
<tr>
<td>Partner – Limited General</td>
</tr>
<tr>
<td>Individual Attorney in Fact</td>
</tr>
<tr>
<td>Individual Attorney in Fact</td>
</tr>
<tr>
<td>Trustee Guardian or Conservator</td>
</tr>
<tr>
<td>Trustee Guardian or Conservator</td>
</tr>
<tr>
<td>Other:</td>
</tr>
<tr>
<td>Other:</td>
</tr>
<tr>
<td>Signer is Representing: J.F. Shea Construction, Inc.</td>
</tr>
<tr>
<td>Signer is Representing: J.F. Shea Construction, Inc.</td>
</tr>
</tbody>
</table>

©2018 National Notary Association
Joint Venturer Name:

Signed by: N/A, Joint Venturer Date: ____________

Other Parties to Joint Venture:

If an Individual:
(signed) N/A
Doing business as:

If a Partnership:
Signed By N/A, partner

If a Corporation:
(a Corporation)
By: N/A Date: ____________
Title: __________________________ [Seal and Attest]

ADDENDA ACKNOWLEDGEMENT

Receipt is hereby acknowledged of Addenda number(s): 1, 2. All Addenda have been considered by the Bidder in the preparation of this Bid.
NONCOLLUSION DECLARATION TO BE EXECUTED BY
BIDDER AND SUBMITTED WITH BID

PROJECT: PLANT 30 WELLHEAD TREATMENT

The undersigned declares:

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

Any person executing this declaration on behalf of a bidder that is a corporation, partnership, joint venture, limited liability company, limited liability partnership, or any other entity, hereby represents that he or she has full power to execute, and does execute, this declaration on behalf of the bidder. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on April 15, 2020 [date], at Walnut [city], CA [state].

Name: Roy A. Valadez
Title: Assistant Secretary

Signature: [Signature]
(Must be Notarized – Attach Original Acknowledgment)

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MVWD Construction Bid – 1/15
CALIFORNIA ACKNOWLEDGMENT

State of California
County of Los Angeles

On April 15, 2020 before me, Lori K. Olivas, Notary Public, personally appeared Roy A. Valadez 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

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: Noncollusion Declaration

Document Date: April 15, 2020 Number of Pages: 1

Signer(s) Other Than Named Above: None

Capacity(ies) Claimed by Signer(s)
Signer's Name: Roy A. Valadez
☑ Corporate Officer – Title(s): Asst. Sec.
☐ Partner – ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator
☐ Other: ____________________________

Signer is Representing: J.F. Shea Construction, Inc.

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

Signer is Representing: ____________________________

©2018 National Notary Association
BID BOND

PROJECT: PLANT 30 WELLHEAD TREATMENT

KNOW ALL PERSONS BY THESE PRESENTS

That J.F. SHEA CONSTRUCTION, INC., as Principal, and Travelers Casualty and Surety Company of America as Surety, are held and firmly bound unto the Monte Vista Water District, hereinafter called "Owner," in the sum of Ten percent of the amount bid DOLLARS ($10% ), (not less than ten percent (10%) of the total amount of the Bid) for payment of which sum well and truly to be made we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

WHEREAS, said Principal has submitted a Bid to said Owner to perform all work required under the bidding schedule of the Owner's Contract Documents, entitled: "CONSTRUCTION OF Plant 30 Wellhead Treatment Project. Project No. EN2018-05."

NOW THEREFORE, if said Principal is awarded a Contract by said Owner and within the time and in the manner required under the heading "Information for Bidders," bound with said Contract Documents, enters into a written contract on the form of "Agreement," bound with said Contract Documents, and furnishes the required bonds to guarantee faithful performance and payment of labor and material, and furnishes certificates as evidence of required insurance coverage, then this obligation shall be null and void; otherwise it shall remain in full force and effect. In the event suit is brought upon this bond by said Owner and judgment is recovered, said Surety shall pay all costs incurred by said Owner in such suit, including a reasonable attorney's fee to be fixed by the Court.

SIGNED AND SEALED, this 20th day of March, 2020

(Name) J.F. SHEA CONSTRUCTION, INC.
Principal
Name: Roy A. Valadez
Title: Assistant Secretary
Signature: 
(Must be Notarized – Attach Original Acknowledgment)

(Name) Travelers Casualty and Surety Company of America
Surety

(Name) Edward C. Spector
Title: Attorney-In-Fact
Address: 655 N. Central Ave., Suite 1100
Glendale, CA 91203
Signature: 
(Must be Notarized – Attach Original Acknowledgment)

MVWD Construction Bid – 1/15
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Los Angeles

On April 15, 2020 before me, Lori K. Olivas, Notary Public

personally appeared Roy A. Valadez

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

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

WITNESS my hand and official seal.

Signature

Signature of Notary Public

Place Notary Seal and/or Stamp Above

---

### Description of Attached Document

- **Title or Type of Document:** Bid Bond
- **Document Date:** March 20, 2020
- **Number of Pages:** 1
- **Signer(s) Other Than Named Above:** None

### Capacity(ies) Claimed by Signer(s)

- **Signer's Name:** Roy A. Valadez
- **Signer is Representing:** J.F. Shea Construction, Inc.
- **Signer's Name:**
- **Signer is Representing:**

©2018 National Notary Association
CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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

State of California

County of Los Angeles

On MAR 20 2020 before me, Meghan Hanes, Notary Public, personally appeared Edward C. Spector who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

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

WITNESS my hand and official seal.

Signature

Signature of Notary Public
POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company are corporations duly organized under the laws of the State of Connecticut (herein collectively called the "Companies"), and that the Companies do hereby make, constitute and appoint Edward C. Spector, of Los Angeles, California, their true and lawful Attorney-in-Fact to sign, execute, seal and acknowledge any and all bonds, recognizances, conditional undertakings and other writings obligatory in the nature thereof on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

IN WITNESS WHEREOF, the Companies have caused this instrument to be signed, and their corporate seals to be hereto affixed, this 3rd day of February, 2017.

State of Connecticut

City of Hartford ss.

By: Robert L. Raney, Senior Vice President

On this the 3rd day of February, 2017, before me personally appeared Robert L. Raney, who acknowledged himself to be the Senior Vice President of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, and that he, as such, being authorized so to do, executed the foregoing instrument for the purposes therein contained by signing on behalf of the corporations by himself as a duly authorized officer.

In Witness Whereof, I hereunto set my hand and official seal.

My Commission expires the 30th day of June, 2021

[Signature]

Marie C. Tetreault, Notary Public

This Power of Attorney is granted under and by the authority of the following resolutions adopted by the Boards of Directors of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, which resolutions are now in full force and effect, reading as follows:

RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President, any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary may appoint Attorneys-in-Fact and Agents to act for and on behalf of the Company and may give such appointee such authority as his or her certificate of authority may prescribe to sign with the Company's name and seal with the Company's seal bonds, recognizances, contracts of indemnity, and other writings obligatory in the nature of a bond, recognizance, or conditional undertaking, and any of said officers or the Board of Directors at any time may remove any such appointee and revoke the power given him or her; and it is

FURTHER RESOLVED, that the Chairman, the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President may delegate all or any part of the foregoing authority to one or more officers or employees of this Company, provided that such delegation is in writing and a copy thereof is filed in the office of the Secretary; and it is

FURTHER RESOLVED, that any bond, recognizance, contract of indemnity, or writing obligatory in the nature of a bond, recognizance, or conditional undertaking shall be valid and binding upon the Company when (a) signed by the President, any Vice Chairman, any Executive Vice President, any Senior Vice President or any Vice President, any Second Vice President, the Treasurer, any Assistant Treasurer, the Corporate Secretary or any Assistant Secretary and duly attested and sealed with the Company's seal by a Secretary or Assistant Secretary; or (b) duly executed (under seal, if required) by one or more Attorneys-in-Fact and Agents pursuant to the power prescribed in his or her certificate or their certificates of authority or by one or more Company officers pursuant to a written delegation of authority; and it is

FURTHER RESOLVED, that the signature of each of the following officers: President, any Executive Vice President, any Senior Vice President, any Vice President, any Assistant Vice President, any Secretary, any Assistant Secretary, and the seal of the Company may be affixed by facsimile to any Power of Attorney or to any certificate relating thereto appointing Resident Vice Presidents, Resident Assistant Secretaries or Attorneys-in-Fact for purposes only of executing and attesting bonds and undertakings and other writings obligatory in the nature thereof, and any such Power of Attorney or certificate bearing such facsimile signature or facsimile seal shall be valid and binding upon the Company and any such power so executed and certified by such facsimile signature and facsimile seal shall be valid and binding on the Company in the future with respect to any bond or understanding to which it is attached.

I, Kevin E. Hughes, the undersigned, Assistant Secretary of Travelers Casualty and Surety Company of America, Travelers Casualty and Surety Company, and St. Paul Fire and Marine Insurance Company, do hereby certify that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which remains in full force and effect.

Dated this day of MAR 20 2020

[Signature]

Kevin E. Hughes, Assistant Secretary

To verify the authenticity of this Power of Attorney, please call us at 1-800-421-3880.

Please refer to the above-named Attorney-in-Fact and the details of the bond to which the power is attached.
INFORMATION REQUIRED OF BIDDERS

General Information

The Bidder shall furnish the following information. Failure to comply with this requirement will render the Bid informal and may cause its rejection. Additional sheets may be attached if necessary.

(1) Firm name and address: J.F. Shea Construction, Inc.  
667 Brea Canyon Road, Suite 30  
Walnut, CA 91789

(2) Telephone: (909) 595-4397

(3) Type of firm:  
Individual  
Partnership  
Corporation X

(4) Contractor's License: Primary Class A Lic. No. 769989 License  
Expiration Date: 10/31/2021

(5) Names and titles of all officers of the firm:  
Please see attached Certificate of Corporate Secretary

(6) Number of years as a contractor in construction work of this type: 139 years

(7) Three projects of this type and complexity recently constructed by Bidder:

<table>
<thead>
<tr>
<th>Contract Amount</th>
<th>Type of Project</th>
<th>Date Completed</th>
<th>Owner's Name &amp; Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>$34,212,632</td>
<td>Filter Rehab</td>
<td>Dec-2017</td>
<td>MWD, 700 N. Alameda, L.A., CA 90012</td>
</tr>
<tr>
<td>$199,246,306</td>
<td>Plant 2 Headworks</td>
<td>Jan-2013</td>
<td>OCSD, 10841 Ellis Ave., Fountain Valley, CA 92708</td>
</tr>
<tr>
<td>$7,528,613</td>
<td>RP-1 Mixed Liquor Return Pumps</td>
<td>June-2018</td>
<td>IEUA, 6075 Kimball Avenue, Bldg. &quot;A&quot;, Chino, CA 91708</td>
</tr>
</tbody>
</table>

(8) Person who inspected site of the proposed work for your firm:  
Name and Title: Mike Durning, Estimator  
Date of Inspection: March 11, 2020

(9) NOTE: If requested by the Owner, the Bidder shall furnish a notarized financial statement, references, and other information, sufficiently comprehensive to permit an appraisal of the Bidder's current financial condition.

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MVWD Construction Bid – 1/15
INFORMATION REQUIRED OF BIDDERS

Equipment/Material Source Information

The Bidder shall indicate opposite each item of equipment or material listed below, the name of the manufacturer or supplier of the equipment or material proposed to be furnished under the Bid. Failure to comply with this requirement will render the Bid informal and may cause its rejection. Awarding of the Contract under this Bid will not imply approval by the Owner of the manufacturers or suppliers listed by the Bidder. After the opening of Bids, no changes or substitutions will be allowed without written approval of the Owner.

<table>
<thead>
<tr>
<th>Section No.</th>
<th>Equipment/Material</th>
<th>Manufacturer/Supplier</th>
</tr>
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<tbody>
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<td></td>
</tr>
</tbody>
</table>
INFORMATION REQUIRED OF BIDDERS

List of Subcontractors

The Bidder is required to furnish the following information (in accordance with the provisions of Sections 4100 to 4114, inclusive, of the Public Contract Code of the State of California and any amendments thereto) for each Subcontractor performing more than 0.5% of the Total Base Bid. Do not list alternative subcontractors for the same work.

<table>
<thead>
<tr>
<th>Name Under Which Subcontractor is Licensed</th>
<th>License Number</th>
<th>Address and Phone Number of Office, Mill or Shop</th>
<th>Specific Description Subcontract</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hardy &amp; Harper</td>
<td>215952</td>
<td>Lake Forest / 714 444 1851</td>
<td>Paving</td>
</tr>
<tr>
<td>Leed Electric</td>
<td>379096</td>
<td>Santa Fe Springs / 562 270 9500</td>
<td>Electrical &amp; Instrumentation</td>
</tr>
<tr>
<td>SPIESS Construction</td>
<td>333989</td>
<td>Santa Maria / 805 937 5859</td>
<td>Water Recovery Storage Tank</td>
</tr>
<tr>
<td>Allied Steel</td>
<td>164718</td>
<td>Riverside / 951 241 7000</td>
<td>Metals</td>
</tr>
<tr>
<td>Simpson Sandblasting</td>
<td>878060</td>
<td>Fontana / 909 829 000</td>
<td>Painting</td>
</tr>
<tr>
<td>Anderson Air Conditioning</td>
<td>894408</td>
<td>Fullerton / 714 888 6800</td>
<td>HVAC</td>
</tr>
<tr>
<td>Structure Cast</td>
<td>774870</td>
<td>Bakersfield / 661 833 4490</td>
<td>Precast Building</td>
</tr>
<tr>
<td>CMC Rebar</td>
<td>778010</td>
<td>San Bernardino / 909 713 1130</td>
<td>Rebar</td>
</tr>
<tr>
<td>Name Under Which Subcontractor is Licensed</td>
<td>License Number</td>
<td>Address and Phone Number of Office, Mill or Shop</td>
<td>Specific Description Subcontract</td>
</tr>
<tr>
<td>-------------------------------------------</td>
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<tr>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>
INFORMATION REQUIRED OF BIDDERS

List of References

The following information should contain persons or entities familiar with the Bidder's Work: The Bidder shall list at least three (3) projects completed by the Bidder and the Bidder's superintendent in the past five (5) years for Construction of Water Treatment Facilities located within the United States, either greenfield or expansion to an existing facility, with a treatment capacity of at least 2,000 gpm.

1. Name of Agency: Poseidon Resources
   Agency Address and Telephone: Butier Engineering (Construction Manager)
   17782 E. 17th Street, Suite 107, Tustin, CA 92780, (714) 832-7222
   Contact Person: Jason Kraus, Estimating Manager
   Type of Construction Project: The Carlsbad Desalination Project - Desal Plant and Conveyance Pipeline
   Contract Amount: $ 592,400,889

2. Name of Agency: County Sanitation District No. 2 of Los Angeles County
   Agency Address and Telephone: 1955 Workman Mill Road, Whittier, CA 90601, (562) 699-7411
   Contact Person: Kurt Bishop, Operations Engineer
   Type of Construction Project: LBWRP Stage Two Return Activated Sludge Piping Replacement - Plant Rehab
   Contract Amount: $ 2,615,234

3. Name of Agency: County Sanitation District No. 2 of Los Angeles County
   Agency Address and Telephone: 1955 Workman Mill Road, Whittier, CA 90601, (562) 699-7411
   Contact Person: Don Drorbaugh, (562) 908-4288, ext. 2176
   Type of Construction Project: LBWRP Concrete and Protective Lining Repair - Phase II - Plant Rehab
   Contract Amount: $ 11,478,707

GENERAL CONTRACTOR QUESTIONNAIRE

P-13

MVWD Construction Bid – 1/15
The following information shall be answered by the Bidder.

1. Years in business trading under current name:
   __________________________________________________________________________
   24 years
   __________________________________________________________________________

2. How many safety incidents have you had in the last five years, a safety incident can be describe as one resulting in injury or death:
   __________________________________________________________________________
   Please see attached OSHA 300A Logs
   __________________________________________________________________________

3. Have you worked with Monte Vista Water District previously:
   __________________________________________________________________________
   No
   __________________________________________________________________________

4. List three other Water Districts, Cities or Departments that you have done work with in the last five years within Southern California:
   __________________________________________________________________________
   Metropolitan Water District of Southern California, San Diego County Water Authority, City of Los Angeles
   __________________________________________________________________________

5. What is your primary construction focus (eg. Pipelines, water treatment plants, buildings etc):
   __________________________________________________________________________
   Pipelines, Water and Wastewater Treatment Plants
   __________________________________________________________________________

MVWD Construction Bid – 1/15
CERTIFICATE OF CORPORATE SECRETARY
OF
J.F. SHEA CONSTRUCTION, INC.

February 27, 2019

I, James G. Shontere, Secretary of J.F. Shea Construction, Inc., a corporation created and existing under the laws of the State of California, do hereby certify and acknowledge the following action taken by the Board of Directors of this Corporation without a meeting as permitted by the Bylaws of the Corporation and applicable California law:

RESOLVED, that any one of the following named officers of this Corporation and such other person or persons, who are designated by Peter O. Shea, President; John F. Shea, Executive Vice President; Peter O. Shea, Jr., Executive Vice President, or John C. Morrisey, Executive Vice President acting alone is hereby authorized and empowered for and on behalf of the Corporation to execute any pre-qualifications, bids, contracts, bid bonds, or any other agreements or documents necessary to carry out the business operation of the Corporation, including business operations for the Redding division of the Corporation.

Peter O. Shea, President
John C. Morrisey, Executive Vice President
John F. Shea, Executive Vice President
Peter O. Shea, Jr., Executive Vice President
James G. Shontere, Secretary

FURTHER RESOLVED, that any one of the following named officers and/or employees of this Corporation are hereby authorized and empowered to execute any pre-qualifications, bids, contracts, bid bonds, or any other agreements or documents necessary to carry out the business operation of the Corporation.

Ronald L. Lakey, Vice President
Ross A. Kay, Vice President
Andrew Parnes, Vice President
Andrew T. Roundtree, Vice President
Robert R. Odell, Vice President and Treasurer
Roger Standley, Controller and Assistant Secretary
James W. Shea, Authorized Agent

FURTHER RESOLVED, that any two of the above or below named officers of this Corporation are hereby authorized and empowered for and on behalf of the Corporation, to execute settlement agreements and all other documents connected to litigation cases involving the Corporation.

Steven W. Cox, Executive Vice President
Edward J. Kernaghan, Vice President
Jeff Salai, Executive Vice President
Sharon Wible, Assistant Secretary
Allison Martin, Assistant Secretary

FURTHER RESOLVED, that any one of the following named officers and/or employees of this Corporation are hereby authorized and empowered to execute any pre-qualifications, bids, contracts, bid bonds, or any other agreements or documents necessary to carry out the business operation for the Water division of the Corporation.
FURTHER RESOLVED, that any one of the following named officers and/or employees of this Corporation are hereby authorized and empowered to execute any pre-qualifications, bids, contracts, bid bonds, or any other agreements or documents necessary to carry out the business operation for the Tunneling division of the Corporation.

Jeff Salai, Executive Vice President
James M. Marquardt, Senior Vice President
Carl Christensen, Vice President
Danny Martz, Vice President
Dennis Poulton, Vice President and Assistant Secretary
David Olson, Vice President and Assistant Secretary
Christian Heinz, Authorized Agent
Shemek Oginski, Authorized Agent
Jim Rosteck, Authorized Agent

FURTHER RESOLVED, that Timothy H. Salai as a Vice President of the Corporation, is hereby authorized and empowered to execute any pre-qualifications, bids, contracts, bid bonds, or any other agreements or documents necessary to carry out the business operation for the Pennsylvania division of the Corporation.

FURTHER RESOLVED, that any one of the following named officers and/or employees of this Corporation are hereby authorized and empowered to execute any pre-qualifications, bids, contracts, bid bonds, or any other agreements or documents necessary to carry out the business operation for the Redding division of the Corporation.

Edward J. Kernaghan, Vice President
Juan Bernardino, Authorized Agent
Stacy Dutra, Authorized Agent
Logan Hanson, Authorized Agent
Kirk Johnson, Authorized Agent
Brock Kernaghan, Authorized Agent

FINALLY RESOLVED, that any prior signature resolutions of the Corporation are hereby superseded and replaced by this resolution as of the effective date of this resolution.

IN WITNESS WHEREOF, I have hereunto set my hand and corporate seal this 27th day of February 2019.

James G. Shontere, Secretary
## Summary of Work-Related Injuries and Illnesses

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

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

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.36, in OSHA's recordkeeping rules, for further details on the access provisions for these forms.

### Number of Cases

<table>
<thead>
<tr>
<th>Case Type</th>
<th>Total Number of Cases</th>
<th>Total Number of Cases with Job Transfer or Restriction</th>
<th>Total Number of Other Recordable Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>6</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

### Number of Days

<table>
<thead>
<tr>
<th>Day Type</th>
<th>Total Number of Days Away From Work</th>
<th>Total Number of Days of Job Transfer or Restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>150</td>
<td>84</td>
</tr>
</tbody>
</table>

### Injury and Illness Types

<table>
<thead>
<tr>
<th>Injury Type</th>
<th>Total Number of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>4</td>
</tr>
<tr>
<td>(0) Injuries</td>
<td>4</td>
</tr>
<tr>
<td>(0) Skin disorders</td>
<td>0</td>
</tr>
<tr>
<td>(0) Respiratory conditions</td>
<td>0</td>
</tr>
</tbody>
</table>

**Establishment Information**

- **Year**: 2015
- **Establishment Name**: J.F. Shea Construction
- **Address**: 667 Brea Canyon Rd. #30
- **City**: Walnut
- **State**: CA
- **Zip**: 91789

**Industry Description**: Heavy Civil Construction, Water

**Standard Industrial Classification (SIC)**: 23711

**North American Industrial Classification (NAICS)**: 23711

**Employment Information**

- **Annual Average Number of Employees**: 120
- **Total Hours Worked by All Employees Last Year**: 23,738

**Sign Here**

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

**Company Representative Signature**

**Date**: 2/1/16

**Save Input**
OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

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

Using the Log, count the individual entries 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 1904.36, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

<table>
<thead>
<tr>
<th>Total number of deaths</th>
<th>Total number of cases with days away from work</th>
<th>Total number of cases with job transfer or restriction</th>
<th>Total number of other recordable cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>3</td>
<td>2</td>
<td>0</td>
</tr>
</tbody>
</table>

### Number of Days

<table>
<thead>
<tr>
<th>Total number of days away from work</th>
<th>Total number of days of job transfer or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>710</td>
<td>180</td>
</tr>
</tbody>
</table>

### Injury and Illness Types

<table>
<thead>
<tr>
<th>Total number of</th>
<th>(1) Injuries</th>
<th>(2) Skin disorders</th>
<th>(3) Respiratory conditions</th>
<th>(4) Poisonics</th>
<th>(5) Hearing loss</th>
<th>(6) All other illnesses</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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</tr>
</tbody>
</table>

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 50 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 this estimation or any aspect of this data collection, contact US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Ave. NW, Washington, DC 20210. Do not send the completed form to this address.

---

Establishment Information

- Year: 2016
- Location: 667 Brea Canyon Rd. #30
- City: Walnut
- State: CA
- Zip: 90720

- Industry description: Heavy Civil Construction, Water
- Standard Industrial Classification (SIC): 23711
- North American Industrial Classification (NAICS): 334212

Employment Information

- Annual average number of employees: 150
- Total hours worked by all employees last year: 317000

Sign here

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

Company executive: [Signature]

Phone: 323-395-4997

Date: 2/1/17

Save Input
OSHA's Form 300A (Rev. 01/2004)

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/ritable" PDF documents, you can type into the input form fields and then save your inputs using the free Adobe PDF Reader.

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 total 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 1904.38, in OSHA's recordkeeping rules, for further details on the access provisions for these forms.

<table>
<thead>
<tr>
<th>Number of Cases</th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of deaths</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of cases</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>with days away from work</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>with transfer or restriction</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Total number of other recordable cases</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Days</th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of days</td>
<td>180</td>
<td></td>
</tr>
<tr>
<td>away from work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of days</td>
<td>200</td>
<td></td>
</tr>
<tr>
<td>of job transfer or</td>
<td></td>
<td></td>
</tr>
<tr>
<td>restriction</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

Past 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 15 minutes per response, including time to review the instructions, search for 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 this estimate or any other aspects of this data collection, contact US Department of Labor, OSHA Office of Statistical Analysis, Room N3644, 200 Constitution Avenue NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Year establishment name: J.F. Shea Construction

Street: 667 Brea Canyon Rd #30

City: Walnut

State: CA

Zip: 90720

Industry description (e.g., Manufacturing of motor trucks and trailers)

Heavy Civil Construction, Water

Standard Industrial Classification (SIC), if known (e.g., 3751)

North American Industrial Classification (NAICS), if known (e.g., 23711)

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

Annual average number of employees: 140

Total hours worked by all employees last year: 292061

Sign here

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

Company executive

Phone: 909-385-4347

Date: 1/11/18

Save Input
OSHA's Form 300A (Rev. 01/2004)
Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete.

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 1904.39 in OSHA's Recordkeeping rule for further details on the access provisions for these forms.

<table>
<thead>
<tr>
<th>Number of Cases</th>
<th>Number of Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of deaths</td>
<td>Total number of cases with days away from work</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

| Total number of days away from work | Total number of days of job transfer or restriction |
| 0 | 0 |

<table>
<thead>
<tr>
<th>Total number of</th>
<th>Injury</th>
<th>Skin Disorder</th>
<th>Respiratory</th>
<th>All Other Injuries</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td>(1)</td>
<td>(2)</td>
<td>(3)</td>
<td>(6)</td>
</tr>
</tbody>
</table>

| (B) | 2 | 0 | 0 | 0 |

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 20 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. You are not required to respond to this collection of information unless it displays a currently valid OSHA approval number. If you have any comments regarding the burden of this estimation, including how to enhance the quality, utility, and clarity of the collection and how it can be minimized, please write to OSHA, Office of Statistics, Room N-3544, 200 Constitution Ave. NW, Washington, DC 20210. Do not send the completed form to this office.

Establishment Information

- Your establishment name: J.F. Shea Construction
- Street: 287 Rea Canyon Rd #50
- City: San Diego
- State: CA
- Zip: 92138
- Industry description (e.g., Manufacturer of motor trucks): Heavy Civil Construction, Water
- Standard Industrial Classification (SIC), if known (e.g., SIC 3715)
- North American Industrial Classification (NAICS), if known (e.g., 399212)

Employment Information

- Annual average number of employees: 200
- Total hours worked by all employees last year: 370,810

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.
- Signature: Y.P.
- Date: 

Company name: Y.P.
Phone: 303-595-4527

Please check the box if you would like to receive further information from OSHA Office of Statistics, Room N-3544, 200 Constitution Ave. NW, Washington, DC 20210, regarding this collection.
# OSHA's Form 300A (Rev. 04/2004)
## Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete.

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." Employers, 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 1904.39, in OSHA’s Recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

<table>
<thead>
<tr>
<th>Total number of cases with days away from work</th>
<th>Total number of other recordable cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

### Number of Days

<table>
<thead>
<tr>
<th>Total number of days away from work</th>
<th>Total number of days of job transfer or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>113</td>
<td>202</td>
</tr>
</tbody>
</table>

### Injury and Illness Types

<table>
<thead>
<tr>
<th>Total number of...</th>
<th>(6)</th>
<th>(1)</th>
<th>(2)</th>
<th>(3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injury</td>
<td>0</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Poisoning</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Hearing Loss</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>All Other Illnesses</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

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 60 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. We are required to inform you that this burden estimate may have been changed as a result of a submission under the Paperwork Reduction Act. If you have any comments on these estimates or any aspects of this data collection, contact: U.S. Department of Labor, OSHA Office of Statistics, Room N2614, 200 Constitution Ave., NW, Washington, DC 20210. Do not send the completed forms to this office.

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Year 2019

U.S. Department of Labor

Occupational Safety and Health Administration

Form approved OMB No. 1210-0192

**Establishment Information**

<table>
<thead>
<tr>
<th>Year establishment name</th>
<th>J.P. Stier Construction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>677 San Carlos Rd Suite B</td>
</tr>
<tr>
<td>Cty</td>
<td>Walnut</td>
</tr>
<tr>
<td>State</td>
<td>California</td>
</tr>
<tr>
<td>Zip</td>
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</tr>
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**Occupational Industry (e.g., Manufacture of motor truck trailers)**

| Heavy Duty Construction, Water Systems |

**Standard Industrial Classification (SIC), if known (e.g., SC 3715)**

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<th>OR North American Industrial Classification (NAICS), if known (e.g., 334111)</th>
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**Employment Information**

<table>
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<tr>
<th>Annual average number of employees</th>
<th>160</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total hours worked by all employees last year</td>
<td>332029</td>
</tr>
</tbody>
</table>

**Sign here**

Knewingly 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.

**Title**

**Company Name**

**Social Security Number**

**Date**

1-29-20
MONTE VISTA WATER DISTRICT
NOTICE TO PLANHOLDERS

ADDENDUM NO. 1

Owner: Monte Vista Water District
10575 Central Avenue
Montclair, California 91763

Project: Plant 30 Wellhead Treatment

To: All Planholders

From: Hazen and Sawyer

Bid Date: April 15, 2020 at 1:30 PM

Notice is hereby given to prospective bidders that the Plans and Specifications for Plant 30 Wellhead Treatment Project dated January 31, 2020, have been modified as hereinafter set forth. This Addendum No. 1 shall form a part of the Contract Documents and the modifications indicated herein shall take precedence over the original Contract Documents, as applicable. All other provisions shall remain the same.

Bidder shall acknowledge receipt of this Addendum No. 1 in the space below. This page AD 1-1 shall be attached to the Bid.

By: Hazen and Sawyer

Date: 4/1/2020

ACKNOWLEDGEMENT TO BE ATTACHED TO SEALED BID.

I have received Addendum No. 1 (pages AD 1-1 through AD 1-13 and Pre-Bid Meeting Sign-In sheet.

Contractor: J.F. Shea Construction, Inc.

Signature: Roy A. Valadez

Printed Name: Roy A. Valadez

Title: Assistant Secretary

Date: April 15, 2020
MONTE VISTA WATER DISTRICT
NOTICE TO PLANHOLDERS

ADDENDUM NO. 2

Owner: Monte Vista Water District
10575 Central Avenue
Montclair, California 91763

Project: Plant 30 Wellhead Treatment

To: All Planholders

From: Hazen and Sawyer

Bid Date: April 15, 2020 at 1:30 PM

Notice is hereby given to prospective bidders that the Plans and Specifications for Plant 30 Wellhead Treatment Project dated January 31, 2020, have been modified as hereinafter set forth. This Addendum No. 2 shall form a part of the Contract Documents and the modifications indicated herein shall take precedence over the original Contract Documents, as applicable. All other provisions shall remain the same.

Bidder shall acknowledge receipt of this Addendum No. 1 in the space below. This page AD 2-1 shall be attached to the Bid.

By: [Signature]
Hazen and Sawyer

Date: 4/9/2020

ACKNOWLEDGEMENT TO BE ATTACHED TO SEALED BID.

I have received Addendum No. 2 (pages AD 2-1 through AD 2-21, New Section 17050, GAC System 3D Model, and Electrical Riser Diagram Schematic).

Contractor: J.F. Shea Construction, Inc.

Signature: [Signature]
Printed Name: Roy A. Valadez
Title: Assistant Secretary

Date: April 15, 2020