

**BIDDER INFORMATION AND FORMS**

**Please use and attach additional signed sheets when needed to answer fully or to clarify a response.**

**A. BIDDER'S INFORMATION**

Firm name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Mobile Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_  
(Name of individual completing statement)

**B. CURRENT ORGANIZATION AND STRUCTURE OF THE BUSINESS**

1. For Firms that Are Corporations:

- a. Date incorporated: \_\_\_\_\_
- b. Under the laws of what state: \_\_\_\_\_
- c. Provide all the following information for each person who is either (a) an officer of the corporation (president, vice president, secretary, treasurer), or (b) the owner of at least 10% of the corporation's stock.

Name	Position	Years with Co.	% Ownership

2. For Firms that Are Partnerships:

- a. Date of formation: \_\_\_\_\_
- b. Under the laws of what state: \_\_\_\_\_
- c. Provide all the following information for each partner who owns ten percent (10%) or more of the firm.

Name	Position	Years with Co.	% Ownership

3. For Firms that Are Sole Proprietorships:

- a. Date of commencement of business: \_\_\_\_\_

4. For Firms that Intend to Bid as a Joint Venture:

- a. Date of commencement of joint venture: \_\_\_\_\_
- b. Provide all of the following information for each firm that is a member of the joint venture that expects to bid on one or more projects.

Name of Firm	% of Ownership of Joint Venture

**C. HISTORY OF THE BUSINESS AND ORGANIZATIONAL PERFORMANCE**

- 1. How long have you been engaged in the student transportation business under your present business name? \_\_\_\_\_
- 2. Have you contracted to provide student transportation for local education agencies in the State of California?  
 Yes       No

If "yes," how many years? \_\_\_\_\_

- 3. Do you have experience with obtaining funding for California school districts' transportation programs?  
 Yes       No

If "yes," please describe specific funding sources that you facilitated and successfully obtained including any funding solutions or approaches which may be unique or exclusive to your business.

- 4. Please provide a statement of the respondent's financial capacity and capability to perform to the terms of the Contract.
- 5. Please describe your areas of expertise and factors that make your business uniquely qualified to perform the services outlined in the Contract.
- 6. Please provide the name and title of the company executives. Include an organizational chart.
- 7. Provide the name, title, tenure with your firm, related experience, and brief description of responsibilities for management personnel. Include an organizational chart.
- 8. Provide the name, title, tenure with your firm, related experience, and brief description of responsibilities for any other personnel who would be directly involved with the daily operations of this Agreement.

**DRIVERS**

- 9. Describe the procedures used in your SPAB driver selection process, including recruitment, checking references, and driver testing.
- 10. Describe your SPAB driver training program.
- 11. Describe your safety program for SPAB drivers, including number of annual safety meetings, name/title/experience of person(s) responsible, school bus accident rate for preventable and non-preventable accidents per thousand miles of operations.

12. Have any of your drivers been involved in accidents involving injuries or death in the last 10 years?

Yes       No

If "yes," please explain.

13. Please include a list of all SPAB certified drivers currently in employment, with SPAB certification information and expiration dates. Drivers must be current in required training hours.

14. Are your drivers enrolled in a qualified drug and alcohol testing pool and participating in a random testing program?

Yes       No

### **VEHICLE INFORMATION**

15. Describe the types of vehicles that will be provided, including the make of chassis, make of body, model, type, year of manufacture, license number, and vehicle identification number.

16. Describe your program and schedule for preventative maintenance and repair of SPABs, including location of maintenance facilities, name/title/experience of personnel responsible for management of the facilities, method of evaluating road failures or vehicle breakdowns and procedures to reduce repetitive failures, and name/title/experience of personnel who will service and repair the SPABs.

17. Provide the most recent inspection date of each SPAB in your fleet.

18. Please include a list of all SPAB certified buses in fleet, identified by bus number, capacity, license number, VIN, and most recent CHP inspection date.

19. Attach copies of California High Patrol Safety Compliance reports for each terminal that you operate in California.

20. Attach Vehicle Inspection Approval Certificates for each SPAB.

21. Have any of your buses been involved in accidents involving injuries or death in the last 10 years?

Yes       No

If "yes," please explain.

**LICENSES**

22. Please provide the following information:
- a. Name of license holder exactly as on file: \_\_\_\_\_  
\_\_\_\_\_
  - b. License classification(s): \_\_\_\_\_
  - c. License #: \_\_\_\_\_
  - d. Expiration Date: \_\_\_\_\_
23. Has any license held by your firm been suspended or revoked within the last 10 years?
- Yes       No
- If "yes," please explain.

**DISPUTES**

24. At any time in the last 10 years, has your firm, or any owners, officers or partners, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any contract with a public entity?
- Yes       No
- If "yes," please explain, including the name of the person who was associated with that company, the year of the event, owner, owner's address and basis for the action.
25. At any time in the last 10 years has a public agency declared the bidder in default under a contract or terminated for cause the bidder's contract?
- Yes       No
- If "yes," please describe each responsive event, including the relevant dates, name of the public agency, and the grounds for default and/or termination for cause.
26. At any time in the last 10 years has a public agency assessed liquidated damages against the bidder on a contract?
- Yes       No
- If "yes," please describe each responsive event, including the relevant dates, name of the public agency, and the grounds for and amounts of the liquidated damages.

27. At any time in the last 10 years has bidder initiated a Government Code claim, litigation, or arbitration against a public agency?

Yes       No

If "yes," please describe each responsive event, including the relevant dates, the name of the public agency, claims and amounts involved, and the outcome or resolution. Include both pending and completed claims.

28. At any time in the last 10 years has any public agency initiated litigation or arbitration against bidder?

Yes       No

If "yes," please describe each responsive event, including the relevant dates, the name of the public agency, claims and amounts involved, and the outcome or resolution. Include both pending and completed claims.

### **CRIMINAL MATTERS AND RELATED CIVIL SUITS**

29. Has your firm or any of its owners, partners or officers ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity?

Yes       No

If "yes," please explain, identifying who was involved, name of the public agency, date of the investigation and grounds for the filing.

### **D. ACCIDENT HISTORY**

Will you authorize your insurance carriers to furnish in writing your accident loss ratio and workers' compensation loss ratio for the past three (3) years?

Yes       No

If "yes," please provide the name, address, coverage, and contact person (name, address and telephone number) of your insurance carrier(s).

### **E. ALCOHOL & DRUG POLICY**

Please provide a copy of your company's policy regarding the use by employees of alcohol and illegal drugs. This policy should ensure that drivers are enrolled in a qualified drug and alcohol testing program with random testing.

**F. PROJECT REFERENCES**

Please include at least five (5) of your company’s most recent contracts with California K-12 public schools using the form attached as Exhibit A. Two (2) such references should have contracts for guaranteed services that you have provided in past three (3) years. Please also include a description specifying the scope of work, start/completion date, services, and type of bus provided, project size, and funding sources.

**G. FINANCIAL INFORMATION**

Bidder must submit a reviewed or audited financial statement with accompanying notes and supplemental information for the past two (2) full fiscal years. A letter verifying availability of a line of credit may also be attached; however, it will be considered supplemental information only, and is not a substitute for the required audited or certified financial statement.

**CERTIFICATION**

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

Date: \_\_\_\_\_

Proper Name of Bidder: \_\_\_\_\_

Signature by an officer of the Bidder: \_\_\_\_\_

By: \_\_\_\_\_  
(Print Name)

Title: \_\_\_\_\_

