

# BID PROPOSAL

## BID BOND

KNOW ALL MEN BY THESE PRESENTS, that I/We Don M. Lazorko Construction, Inc.  
as Principal, hereinafter called Contractor, and Great American Insurance Company

a corporation duly organized under the laws of the State of Nevada, as Surety, hereinafter called the Surety, are held and firmly bound unto Carson City, Nevada a consolidated municipality of the State of Nevada, hereinafter called City, for the sum of \$ 5% of Amount Bid----- Dollars

(state sum in words) Five Percent of Amount Bid-----

for the payment whereof Contractor and Surety bind themselves, their heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has submitted a bid, identified as **BID # 1112-154** and titled **"Carson City Public Works Tenant Improvements for Building C"**.

NOW, THEREFORE if the City shall accept the bid of the Principal and the Principal shall enter into a contract with the City in Accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Bid Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and material furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the City the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the City may in good faith contract with another party to perform work covered by said bid or an appropriate liquidated amount as specified in the Invitation for Bids then this obligation shall be null and void, otherwise to remain in full force and effect.

(Seal)

Executed on this 10 day of February 2012

Signature of Principal: [Signature]

Title: President

Firm: Don M. Lazorko Construction, Inc.

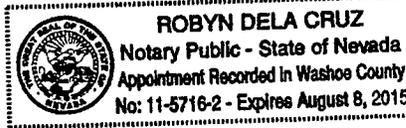
Address: P.O. Box 728; 595 Dog Valley Road

City/State/Zip Code: Verdi, NV 89439

Written Name of Principal: DON LAZORKO

ATTEST NAME

Signature of Notary: [Signature]



Subscribed and sworn before me this 13<sup>th</sup> day of February 2012

(printed name of notary) Robyn Dela Cruz Notary Public for the State of Nevada

Claims Under this Bond May be Addressed to: Nevada Resident Agent Information Complete for out of state bonding companies

Name of Surety Great American Insurance Company

Address 3017 Douglas Boulevard, Suite 300

City Roseville

State/Zip Code California 95661

Name Larry Conner

Title Underwriter

Phone (916) 788-7261

Surety's Acknowledgement

By: Bobby Beeny Bobbie Beeny, Attorney-in-Fact

Name of Local Agent InterWest Insurance Services, Inc.

Address 1357 East Lassen Avenue

City Chico

State/Zip Code California 95973

Agent's Name John Hopkins

Agent's Title Vice President- Surety

Agents Phone (800) 873-3725

**NOTICE:** No substitution or revision to this bond form will be accepted. Sureties must be authorized to do business in and have an agent for services of process in the State of Nevada. Certified copy of Power of Attorney must be attached.

**GREAT AMERICAN INSURANCE COMPANY®**

**Administrative Office: 301 E 4TH STREET • CINCINNATI, OHIO 45202 • 513-369-5000 • FAX 513-723-2740**

The number of persons authorized by  
this power of attorney is not more than **FIVE**

No. 014456

**POWER OF ATTORNEY**

**KNOW ALL MEN BY THESE PRESENTS:** That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below, each individually if more than one is named, its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below.

Name	Address	Limit of Power
JOHN HOPKINS	ALL OF	ALL
NANCY LUTTENBACHER	CHICO,	\$75,000,000.00
BOBBIE BEENY	CALIFORNIA	
ELIZABETH COLLODI		
SUSAN LEE		

This Power of Attorney revokes all previous powers issued in behalf of the attorney(s)-in-fact named above.

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 7<sup>th</sup> day of, JULY, 2011.

Attest



*Atty L. C. B.*

GREAT AMERICAN INSURANCE COMPANY

*David C. Kitchen*

STATE OF OHIO, COUNTY OF HAMILTON - ss:

DAVID C. KITCHIN (513-412-4602)

On this 7<sup>th</sup> day of JULY, 2011, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



**KAREN L. GROSHEIM  
NOTARY PUBLIC, STATE OF OHIO  
MY COMMISSION EXPIRES 02-20-16**

*Karen L. Grosheim*

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

*RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.*

*RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.*

**CERTIFICATION**

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this 10 day of February, 2012



*Atty L. C. B.*

# CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Butte

On 2/10/2012 before me, Elizabeth Collodi, Notary Public  
(Here insert name and title of the officer)

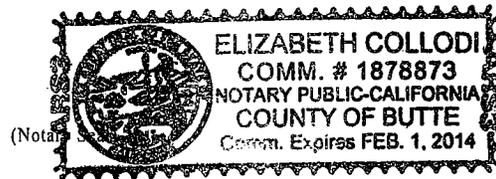
personally appeared Bobbie Beeny

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.

Elizabeth Collodi  
Signature of Notary Public



## ADDITIONAL OPTIONAL INFORMATION

### DESCRIPTION OF THE ATTACHED DOCUMENT

Bid Bond

(Title or description of attached document)

Don M. Lazorko Construction, Inc.

(Title or description of attached document continued)

Number of Pages 1 Document Date 2/10/2012

Great American Insurance Company

(Additional information)

### CAPACITY CLAIMED BY THE SIGNER

- Individual (s)  
 Corporate Officer

(Title)

- Partner(s)  
 Attorney-in-Fact  
 Trustee(s)  
 Other \_\_\_\_\_

### INSTRUCTIONS FOR COMPLETING THIS FORM

*Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required*

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is/are-) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
  - \*.- Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - \*.- Indicate title or type of attached document, number of pages and date.
  - \*.- Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

# BID PROPOSAL

**BID # 1112-154**

**BID TITLE: Carson City Public Works Tenant Improvements for Building C**

**NOTICE:** No substitution or revision to this Bid Proposal form will be accepted. Carson City will reject any Bid that is received that has changes or alterations to this document. Although the Prevailing Wages are provided in this bid document, the bidder is responsible to verify with the Labor Commissioner if any addendums have been issued. The successful bidder will be required to provide the current Prevailing Wages used in preparation of their bid within 24 hours of bid submission.

**PRICES** will be valid for sixty (60) calendar days after the bid opening which is indicated in the Notice to Contractors.

**A COPY OF CONTRACTOR'S "CERTIFICATE"** of eligibility issued by the State of Nevada Contractors' Board as proof of Bidder's compliance with the provisions of N.R.S. 338.147 must be submitted with his/her bid for the preference to be considered. This Statute does not apply to projects expected to cost less than \$250,000.

**COMPLETION** of this project is expected **PURSUANT TO THE BID DOCUMENTS.**

**BIDDER** acknowledges receipt of 1 Addendums.

**SUMMARY**

	Description	Scheduled Value	Unit	Unit Price	Total Price
	<b>Base Bid Items - Schedule A</b>				
BP.1	Mobilization, Demobilization and Clean-up	1	LS	10,000-	10,000-
BP.2	Public Works Tenant Improvement	1	LS	206,804	206,804
BP.3	<b>SUBTOTAL SCHEDULE A</b>				
	<b>ADD ALTERNATES - Schedule B</b>				
BP. 4	Installation of vinyl tile	1	LS	5413-	5413-
BP.5	<b>SUBTOTAL SCHEDULE B</b>				
BP.6	<b>Total Base Bid Price(SCHEDULE A+ SCHEDULE B)</b>			<b>\$ 222,217.<sup>00</sup></b>	

BP.7 Total Base (SCHEDULE A + SCHEDULE B) Bid Price Written in Words:

Two hundred twenty two thousand  
Two hundred seventeen.

# BID PROPOSAL

## BP.8 BIDDER INFORMATION:

Company Name:	DON M. LAZORKO CONSTRUCTION, INC.
Federal ID No.:	77-0630454
Mailing Address:	P.O. Box 728
City, State, Zip Code:	VERDI, NV 89439
Complete Telephone Number:	775 345-7320
Complete Fax Number:	775 345-7318
Fax Number including area code:	775-345-7318
E-mail:	donlazorko@netzero.net

Contact Person / Title:	DON LAZORKO, PRESIDENT
Mailing Address:	P.O. Box 728
City, State, Zip Code:	VERDI, NV 89439
Complete Telephone Number:	775 345-7320
Complete Fax Number:	775 345-7318
E-mail Address:	donlazorko@netzero.net

## BP.9 LICENSING INFORMATION:

Nevada State Contractor's License Number:	58995, 58996
License Classification(s):	B-2, A
Limitation(s) of License:	3,000,000 -
Date Issued:	1/19/2005
Date of Expiration:	1/31/2014
Name of Licensee:	DON LAZORKO
Carson City Business License Number:	
Date Issued:	
Date of Expiration:	
Name of Licensee:	

# BID PROPOSAL

## BP.10 DISCLOSURE OF PRINCIPALS:

### Individual and/or Partnership:

Owner 1) Name:	
Address:	
City, State, Zip Code:	
Telephone Number:	
Owner 2) Name:	
Address:	
City, State, Zip Code:	
Telephone Number:	
Other 1) Title:	
Name	
Other 2) Title:	
Name:	

### Corporation:

State in which Company is Incorporated:	NV
Date Incorporated:	3/24/2004
Name of Corporation:	DON M. LAZORKO CONSTRUCTION, INC.
Mailing Address	P.O. Box 728
City, State, Zip Code:	VERDI, NV 89439
Telephone Number:	775-345-7320
President's Name:	DON LAZORKO
Vice-President's Name:	
Other 1) Name & Title:	DON LAZORKO SECRETARY, TREASURER, DIRECTOR

# BID PROPOSAL

## BP.11 MANAGEMENT AND SUPERVISORY PERSONNEL:

Persons and Positions	Years With Firm
Name 1) DON LAZORLO	30

Title 1) PRESIDENT, SUPERINTENDENT

Name 2) DE AVILLA	3
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Title 2) PROJECT MANAGER/SUPERINTENDENT

Name 3)	
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Title 3)

Name 4)	
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Title 4)

Name 5)	
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Title 5)

Name 6)	
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Title 6)

(If additional space is needed, attach a separate page)

# BID PROPOSAL

**BP.12 REFERENCES:**

**Instructions:**

List at least three (3) contracts of a similar nature performed by your firm in the last three (3) years. If **NONE**, use your Company's letterhead (and submit with your bid proposal) to list what your qualifications are for this contract. Carson City reserves the right to contact and verify, with any and all references listed, the quality of and the degree of satisfaction for such performance.

**Clients:** (if additional space is needed attach a separate page)

Company Name 1): <i>WASHOE COUNTY SCHOOL DISTRICT</i>
Contract Person: <i>TAMI ZIMMERMAN</i>
Mailing Address: <i>333 HOLCOMB AVE 3<sup>rd</sup> FLOOR</i>
City, State, Zip Code: <i>RENO, NV 89502</i>
Complete Telephone Number: <i>775-789-3842</i>
E-Mail Address: <i>TZIMMERMAN@WASHOESCHOOLS.NET</i>
Project Title: <i>ADMINISTRATION BLDG LOBBY REVISION &amp; SECURITY IMPROVEMENTS</i>
Amount of Contract: <i>\$198,619-</i>
Scope of Work: <i>REMODEL EXISTING LOBBY OFFICES. PROVIDE &amp; INSTALL SECURITY LOCKING SYSTEM ON EXISTING DOORS THROUGHOUT ADMIN BLDG, MID BLDG OFFICES &amp; WAREHOUSE.</i>
Company Name 2): <i>SHASTA COUNTY</i>
Contract Person: <i>TOM FULLER</i>
Mailing Address: <i>1958 PLACER ST.</i>
City, State, Zip Code: <i>REDDING, CA 96001</i>
Complete Telephone Number: <i>530 225-5123</i>
E-Mail Address: <i>TFuller@CO.SHASTA.CA.US</i>
Project Title: <i>ADA UPGRADE AT BURNLEY &amp; FALL RIVER MILLS VETERANS HALL</i>
Amount of Contract: <i>\$312,000-</i>
Scope of Work: <i>REMODEL &amp; ADDITION FOR BURNLEY &amp; FALL RIVER MILLS VETERANS HALL.</i>

## BID PROPOSAL

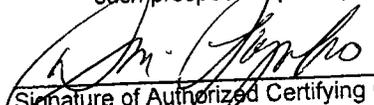
Company Name 3):	CITY OF FOLSOM
Contract Person:	RYAN CHANCE
Mailing Address:	50 NATOMA ST.
City, State, Zip Code:	FOLSOM, CA 95630
Complete Telephone Number:	916 355-8346
E-Mail Address:	RCHANCE@FOLSOM.CA.US
Project Title:	FACADE IMPROVEMENTS FOR SUTTER ST.
Amount of Contract	\$ 310,000 -
Scope of Work:	PROVIDE & INSTALL NEW STOREFRONT FACADE'S ON EXISTING BUILDINGS ALONG SUTTER ST.
Company Name 4):	TOWN OF TRUCKEE
Contract Person:	JANET RAVEY
Mailing Address:	10183 TRUCKEE AIRPORT RD.
City, State, Zip Code:	TRUCKEE, CA 96161
Complete Telephone Number:	530-582-2911
E-Mail Address:	JRAVEY@TOWNOFTRUCKEE.COM
Project Title:	REGIONAL PARK TRANSIT SHELTER
Amount of Contract:	\$ 97,000 -
Scope of Work:	PROVIDE & INSTALL A NEW TIMBER FRAME BUS STOP SHELTER.

# BID PROPOSAL

BP. 13

## CERTIFICATION REGARDING DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS PRIMARY COVERED TRANSACTIONS

1. The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
  - a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal, State or Local department or agency.
  - b) Have not within a three-year period preceding this bid been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
  - c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - d) Have not within a three-year period preceding this bid had one or more public transactions (Federal, State or Local) terminated for cause or default.
2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this bid.

  
 \_\_\_\_\_  
 Signature of Authorized Certifying Official  
**Don LAZORKO**  
 \_\_\_\_\_  
 Printed Name

President  
 \_\_\_\_\_  
 Title  
 2/13/18  
 \_\_\_\_\_  
 Date

I am unable to certify to the above statement. My explanation is attached.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**BIDDER'S SAFETY INFORMATION**

**Bidder's Safety Factors:**

Year	"E-Mod" Factor <sup>1</sup>	OSHA Incident Rate <sup>2</sup>
2007	0	0
2006	0	0

<sup>1</sup> E-Mod (Experience Modification) Factors are issued by the Employer's Insurance Company of Nevada.

<sup>2</sup> OSHA Incident Rate is the number of OSHA Recordable Accidents per 100 employees and is calculated as the number of accidents divided by 208,000.

# BID PROPOSAL

## SUBCONTRACTORS

BP.14 INSTRUCTIONS: for Subcontractors and General Contractors who self-perform in amounts exceeding five (5) percent of bid amount. This information must be submitted with your bid proposal. The bidder shall enter NONE under Name of Subcontractor if not utilizing subcontractors exceeding this amount and per revised NRS 338.141 (as amended by SB268), the prime contractor shall list itself on the subcontractor's list if it will be providing any of the work on the project. (This form must be complete in all respects. If additional space is needed, attach a separate page).

Name of Subcontractor <i>DON M. LAZORKO</i>	Address <i>VERDI, NV</i>	
Phone <i>345-7320</i>	Nevada Contractor License # <i>58995</i>	Limit of License <i>3,000,000</i>
Description of work <i>DEMO. / WOOD FRAMING CARPENTRY /</i>		
Name of Subcontractor <i>APPLIED MECH.</i>	Address <i>SPARKS, NV</i>	
Phone <i>331-4455</i>	Nevada Contractor License # <i>50326</i>	Limit of License <i>5,000,000 -</i>
Description of work <i>HVAC</i>		
Name of Subcontractor <i>WEST NV. ELEC.</i>	Address <i>SPARKS - NV</i>	
Phone <i>624-1350</i>	Nevada Contractor License # <i>58157</i>	Limit of License <i>600,000 -</i>
Description of work <i>ELECTRICAL / FIRE ALARM</i>		
Name of Subcontractor <i>L.A. THOMAS</i>	Address <i>MINDEN, NV</i>	
Phone <i>267-1426</i>	Nevada Contractor License # <i>39759</i>	Limit of License <i>2,000,000 -</i>
Description of work <i>DRYWALL / ACOUSTICAL CEILING</i>		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

Don M. LAZORKO CONST. INC

PROJECT - BUILDING C  
**BID PROPOSAL**

**SUBCONTRACTORS**

BP.15 **INSTRUCTIONS:** for Subcontractors exceeding one (1) percent of bid amount or \$50,000 whichever is greater. This information must be submitted by the three lowest bidders within two (2) hours after the completion of the opening of the bids. The bidder may elect to submit this information with the bid proposal and, in that case, the bidder will be considered as having submitted this information within the above two hours.

Name of Subcontractor <i>GREAT BASIN PAINT</i>	Address <i>SPARIS, NV</i>	
Phone <i>626-1035</i>	Nevada Contractor License # <i>44463</i>	Limit of License <i>200,000 -</i>
Description of work <i>PAINTING</i>		
Name of Subcontractor <i>CONTRACT FLOORING</i>	Address <i>SPARIS, NV</i>	
Phone <i>359-7880</i>	Nevada Contractor License # <i>59925</i>	Limit of License <i>1,800,000 -</i>
Description of work <i>FLOORING -</i>		
Name of Subcontractor <i>DON M. LAZORKO</i>	Address <i>VERDI, NV</i>	
Phone <i>345-7320</i>	Nevada Contractor License # <i>58995</i>	Limit of License <i>3,000,000 -</i>
Description of work <i>DEMO. / WOOD FRAMING CARPENTRY</i>		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		
Name of Subcontractor	Address	
Phone	Nevada Contractor License #	Limit of License
Description of work		

# BID PROPOSAL

## BP.19 ACKNOWLEDGMENT AND EXECUTION:

STATE OF NV )  
COUNTY OF WASHOE ) SS

I DON LAZORKO (Name of party signing this Bid Proposal), do depose and say: That I am the Bidder or authorized agent of the Bidder; and that I have read and agree to abide by this Bid which includes, but is not limited to the following documents: Notice to Contractors, Table of Contents, Project Coordination, Instructions to Bidders, Bid Bond, Proposal Summary, Contract Award Instructions and Information, Sample Contract, Sample Performance Bond, Sample Labor and Material Payment Bond, General Conditions, Special Conditions, Standard Specifications, Prevailing Wage Rates, Technical Specifications, Geotechnical Report (if any), Contract Drawings, Permits (if any), and any addenda issued and understands the terms, conditions, and requirements thereof; that if his/her bid is accepted that he/she agrees to furnish and deliver all materials except those specified to be furnished by the City (Owner) and to do and perform all work for the "Carson City Public Works Tenant Improvements for Building C", contract number 1112-154, together with incidental items necessary to complete the work to be constructed in accordance with the Contract Documents, Contract Drawings, and Specifications annexed hereto.

BIDDER: DON M. LAZORKO CONSTRUCTION, INC.

PRINTED NAME OF BIDDER: DON LAZORKO

TITLE: PRESIDENT

FIRM: DON M. LAZORKO CONSTRUCTION, INC.

Address: P.O. BOX 728

City, State, Zip: VERDI, NV 89439

Telephone: 775 345-7320

Fax: 775 345-7318

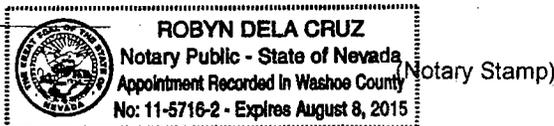
E-mail Address: donlazorko@netzero.net

[Signature]  
(Signature of Bidder)

DATED: 2/13/12

Signed and sworn (or affirmed) before me on this 13<sup>th</sup> day of February, 2012, by

[Signature]  
(Signature of Notary)



END OF BID PROPOSAL