

Bidder Name: \_\_\_\_\_

### Required Attachment Checklist

A complete bid or bid package will consist of the items identified below.

Complete this checklist to confirm the items in your bid. Using the "Bidder Certification" column, place a check mark or "X" next to each item that you are submitting to CDSS. CDSS staff will use the shaded "CDSS Verification" column to confirm receipt of all required documents. For your bid to be responsive, all required attachments must be submitted. This checklist must be returned with your bid package.

| Attachment Name/Description                                                                                                                                                                                                                                                                             | Bidder Certification                                         | CDSS Verification                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| 1. Submitted Attachment 1, Required Attachment Checklist                                                                                                                                                                                                                                                | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 2. Submitted Attachment 2, Minimum Qualifications Certification                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 3. Submitted Attachment 3, Bid/Bidder Certification Sheet signed by an individual authorized to bind the Bidder contractually.<br>a. If Small Business or Disabled Veteran Business Enterprise certified, submitted a copy of Department of General Services certification <input type="checkbox"/> Yes | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 4. Submitted Attachment 4, Rate Sheet                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 5. Submitted Attachment 5, Bidder References                                                                                                                                                                                                                                                            | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 6. Submitted Attachment 6, Subcontractor References, if applicable                                                                                                                                                                                                                                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> N/A | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> N/A |
| 7. Submitted Attachment 7, Bidder Declaration, GSPD-05-105                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 8. Submitted Attachment 8, Disabled Veteran Business Enterprise Declarations, STD 843                                                                                                                                                                                                                   | <input type="checkbox"/> Yes<br><input type="checkbox"/> N/A | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> N/A |
| 9. Submitted Attachment 9, DVBE Subcontractor Agreement, if applicable                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> N/A | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> N/A |

| Attachment Name/Description                                                                                                                                                                                                                                                                              | Bidder Certification                                         | CDSS Verification                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| 10. Submitted Attachment 10, Commercially Useful Function Evaluation Form, if applicable                                                                                                                                                                                                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> N/A | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> N/A |
| 11. Submitted Attachment 11, Contractor Certification Clause, CCC 04/2017                                                                                                                                                                                                                                | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 12. Submitted Attachment 12, Darfur Contracting Act Certification DGS PD 1                                                                                                                                                                                                                               | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 13. Submitted Attachment 13, Payee Data Record, STD 204                                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 14. Submitted Attachment 14, Federal Debarment Certification, DGS PD 2, if applicable                                                                                                                                                                                                                    | <input type="checkbox"/> Yes<br><input type="checkbox"/> N/A | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> N/A |
| 15. Is the Bidder's corporation in good standing and qualified to conduct business in California as verified by the <a href="#">Secretary of State</a> ?                                                                                                                                                 | <input type="checkbox"/> Yes<br><input type="checkbox"/> No  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 16. As applicable, submitted a copy of the appropriate business license for the city or county which Bidder shall be performing business. All businesses based in unincorporated areas are required to submit signed proof of "exempted" business license status from the city or county, if applicable. | <input type="checkbox"/> Yes<br><input type="checkbox"/> N/A | <input type="checkbox"/> Yes<br><input type="checkbox"/> No<br><input type="checkbox"/> N/A |
| 17. Submitted a copy of a valid California Department of Motor Vehicles-Issued Motor Carrier Permit.                                                                                                                                                                                                     | <input type="checkbox"/> Yes<br><input type="checkbox"/> No  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 18. Submitted a picture of covered truck(s) or large van(s) showing the license plate and a description of the cargo capacity, which includes the maximum weight limit and the length, height and width of the storage are.                                                                              | <input type="checkbox"/> Yes<br><input type="checkbox"/> No  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |
| 19. Submitted a copy of the current registration of the vehicle to be used in the performance of the resulting Agreement. If the vehicle is leased, a copy of the lease agreement must be included.                                                                                                      | <input type="checkbox"/> Yes<br><input type="checkbox"/> No  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No                                 |

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**CDSS Use Only**

Comments/Notes:

\_\_\_\_\_  
Signature of CDSS Contracts Analyst

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of CDSS Contracts Manager

\_\_\_\_\_  
Date