

URBAN COUNTY PROGRAM  
COUNTY OF HIDALGO

MAR 21 2014

Price Quotations

*me*

VENDOR #1 OCL Enterprises, LLC  
 Name: Osiel Garcia Person Contacted: Osiel Garcia Phone: 956-501-6170

Item#	Quantity	Description	Amount
1	2003	Installation of 2" diam. PVC Electrical Conduit (Gray pipe & fittings) as shown in the plans & specifications...	23,114. <sup>92</sup>

VENDOR #2  
 Name: Ramsa Construction Person Contacted: Roberto Morales Phone: 956-802-7775

Item#	Quantity	Description	Amount
1	2003	Installation of 2" diam. PVC electrical Conduit (Gray pipe & fittings) as shown in Plans & Specifications...	23,635 <sup>40</sup>

VENDOR #3  
 Name: El-Con Const Person Contacted: Juan Zamora Phone: 956-529-5038

Item#	Quantity	Description	Amount
1	2003	Installation of 2" diam PVC electrical conduit (Gray pipe & fitting) as shown in plans & specifications...	25,037. <sup>50</sup>

Recommendation: recommending lowest bidder (Osiel Garcia)  
OCL Enterprises, LLC.

Requested by: *[Signature]*  
 Date: 03-20-14

Approved by: *[Signature]*  
 Date: 4/8/14

## REQUEST FOR QUOTATION

FROM:  
**CITY OF LA JOYA**  
**101 N. LEO AVENUE**  
**LA JOYA TX. 78560.**  
**PH. # (956) 581-7002**

DATE:

PROJECT:  
**CITY OF LA JOYA MILITARY ROAD PARK. (ELECTRICAL CONDUIT)**

VENDOR: *OCL Enterprises, LLC*  
*7009 Avenida Del Paseo*  
*Mission, TX 78572*

ITEM.	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	TOTAL
1.-	Installation of 2" diam. PVC Electrical Conduit (Gray Pipe & Fittings) As shown in the Plans and in the Specifications.	Lf.	2,003	11.54	23,114.62
				TOTAL = \$ 23,114.62	

*Osriel Garcia*

**\* TO REVIEW THE PLANS AND THE SPECIFICATIONS, PLEASE CALL  
 CITY OF LA JOYA AT (956) 581-7002, ATT'N. MIKE ALANIZ, CITY MANAGER.**

# RAMSA CONSTRUCTION

10115 N. CONWAY AVENUE  
MISSION, TEXAS 78572  
PH. # (956) 802-7775

## PROPOSAL

DATE: *March 18, 2014*

PROPOSAL No.091

BILL TO: City of La Joya

ATTN: *Mike Alaniz*  
City Manager

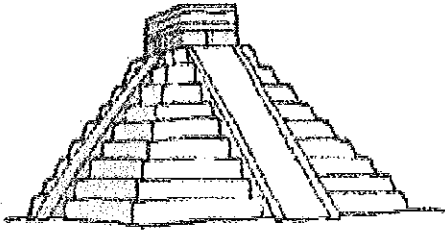
ADDRESS: *P.O. BOX "H"*  
LA JOYA, TEXAS 78560

PROJECT: *MILITARY RD. PARK*  
*CONTRACT SERVICES*  
*FOR: ELECTRICAL CONDUIT*

ITEM	DESCRIPTION	UNIT	QUANTITY	UNIT PRICE	AMOUNT
1.-	INSTALLATION OF 2"DIAM. PVC ELECTRICAL CONDUIT (GRAY PIPE & FITTINGS) AS SHOWN IN THE PLANS AND IN THE SPECIFICATIONS.	Lf.	2003	\$ 11.80	\$ 23,635.40

  
Roberto Morales

**TOTAL = \$23,635.40**



**EL - CON**  
**Construction & Development**  
*Underground Services, Water, Sewer, Storm Drain*

**PROPOSAL**

*Date: March 19, 2014*

*Proposal No.: 0411*

<p><i>Submitted To: <u>City of La Joya</u></i>  <i>Attention: <u>Mike Alaniz</u></i>  <i>                  <u>City Manager</u></i></p>	<p><i>Project: <u>City of La Joya Military Rd.</u></i>  <i>          <u>Recreational Park.</u></i>  <i>          <u>Irrigation System</u></i></p>
<p><i>Address: <u>101 North Leo Avenue</u></i>  <i>          <u>La Joya, Tx. 78560</u></i></p>	

*We hereby submit specifications and estimates for:*

ITEM.	DESCRIPTION	UNIT	QTY	U.P.	AMOUNT
1.-	<b>ELECTRICAL CONDUIT</b>  <i>Installation of: 2" diam. PVC Electrical Conduit (Gray Pipe &amp; Fittings) As shown in the plans and in the Specifications.</i>	Lf.	2,003	\$12.50	\$25,037.50
<b>TOTAL =</b>					<b>\$25,037.50</b>
<p><i>If you have any questions please make contact with Juan Zamora at (956) 529-5038</i></p>					
<p><i>Thank you for your business</i></p>					

*Juan Zamora*

P. O. BOX 52891 McALLEN, TX. 78505 Ph.# (956) 529-5038

## Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

**Name (as shown on your income tax return)**  
**OCL Enterprises, LLC**

Business name/disregarded entity name, if different from above

Check appropriate box for federal tax classification:  
 Individual/sole proprietor     C Corporation     S Corporation     Partnership     Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ \_\_\_\_\_

Other (see instructions) ▶ \_\_\_\_\_

Exempt payee

Address (number, street, and apt. or suite no.)  
**7009 Avenida Del Paseo**

City, state, and ZIP code  
**Mission, TX 78572**

Requester's name and address (optional)

List account number(s) here (optional)

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								

Employer identification number								
4	6	-	2	0	6	1	6	7

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

**Sign Here**    Signature of U.S. person ▶    Date ▶ 4/10/14

**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/09/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  <b>Connect Insurance</b> 407 W FM 495 San Juan, TX 78589	CONTACT NAME: <b>Oscar Martinez</b>
	PHONE (A/C, No, Ext): <b>956-782-8191</b> FAX (A/C, No): <b>956-783-9413</b>
	E-MAIL ADDRESS: <b>jeremy.pool@connectmyinsurance.com</b>
	INSURER(S) AFFORDING COVERAGE
INSURED  <b>OSCIEL GARCIA</b> DBA: OCL ENTERPRISES LLC 7009 AVENIDA DEL PASEO Palmview, TX 78572	INSURER A: <b>HALMMARK COUNTY MUTUAL</b>
	INSURER B: <b>TEXAS MUTUAL</b>
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: 00065340-26682 REVISION NUMBER: 13

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$ \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			1210766	10/14/2013	10/14/2014	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ uninsured/underi \$ <b>100000</b>
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						OCCUR CLAIMS-MADE EACH OCCURRENCE \$ AGGREGATE \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	003225151	10/14/2013	10/14/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ <b>1,000,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>1,000,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>1,000,000</b>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER  <b>HIDALGO COUNTY</b>	CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE <i>Oscar Martinez</i> (OMA)
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*City of La Joya*

*"Jewel of the Valley"*

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April 10, 2014

Hidalgo County Urban County Program  
Attn: Guadalupe Garcia, Coordinator  
427 E. Duranta, Suite#107  
Alamo, Texas 78516.

**RE: Lowest Bid Approval**

Dear Ms. Garcia:

Let this letter serve as approval to accept OCL Enterprise as the lowest bid for the electrical conduit for the Military Park Project.

If you should have any questions or require additional information please do not hesitate to contact me at 956-581-7002.

Respectfully,

Mike Alaniz, City Administrator

MA/jrs