REQUEST FOR QUALIFICATIONS (RFQ) FOR AUTOMOTIVE REPAIR/SERVICE VENDORS

Thank you for your interest in the Department of General Services, Office of Fleet and Asset Management's Automotive Repair/Service Program. The attached Request for Qualifications, RFQ DGS-OFA-VQ-1 (RFQ), solicits vendors interested in providing automotive repair/services for State vehicles.

The Office of Fleet and Asset Management (OFAM) issues Nonexclusive Agreements to automotive repair/service vendors agreeing to the terms and conditions of this RFQ.

OFAM maintains an internet-based list of automotive repair/service vendors who are authorized to provide service for all State agencies and the California State University System. This list is available at http://www.webapps.dgs.ca.gov/ofa/approved_auto_rpr_fac/ . Additionally, current vendors who wish to continue providing services to the State of California must also participate in this RFQ.

If you have any questions or need additional information, please call Terneicsa Fernandes, Statewide Mobile Equipment Coordinator, at (916) 928-2517.

Renee Carroll, Assistant Chief, Asset Management
Office of Fleet and Asset Management

Attachment

STATE OF CALIFORNIA
DEPARTMENT OF GENERAL SERVICES
OFFICE OF FLEET AND ASSET MANAGEMENT

REQUEST FOR QUALIFICATIONS (RFQ)

Request No: **RFQ DGS-OFA-VQ-1**

Contact:

Terneicsa Fernandes, Statewide Mobile Equipment Coordinator
Department of General Services
Office of Fleet and Asset Management
1700 National Drive
Sacramento, CA 95834
Telephone: (916) 928-2517

Request Return:

Department of General Services
Office of Fleet and Asset Management
1700 National Drive
Sacramento, CA 95834

Request Return Information: *Request for Qualifications* (RFQ) responses submitted are subject to the stipulated Terms and Conditions and in accordance with the specifications set forth and/or attached, will be accepted continuously at the Office of Fleet and Asset Management, 1700 National Drive, Sacramento, CA 95834. **All RFQ responses must include: completed Response Check List; Attachment A; a completed Vendor Application Form (OFA 50); Attachment B, and all other required attachments.**

DESCRIPTION OF SERVICES

This RFQ is a solicitation by the State of California for automotive repair/service vendors interested in providing services for State vehicles. It is the State's intention to issue Nonexclusive Agreements to qualified automotive repair/service vendors agreeing to the terms and conditions of this Request for Qualifications. This solicitation is not a competitive procurement, and the State makes no guarantee of business to any recipient of a Nonexclusive Agreement.

Once approved, the period of this Agreement is continuous, pending an annual renewal. The renewal must include the following information: proof of an updated BAR License from the Bureau of Automotive Repair; evidence of insurance maintained on an ongoing basis, and proof of an updated Business License or any other required business registration (where applicable). The OFAM reserves the right to cancel this Agreement at any time.

From this solicitation, an authorized automotive repair/service vendor listing will be developed, published and distributed annually to all State agencies and the California State University system.

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SECTION I

GOALS

The State's primary goal in issuing this RFQ is to extend the automotive repair/service dollars it spends by increasing the efficiency and economy of its automotive expenditures. The State intends to provide State agencies with a choice of qualified Vendors statewide, encourage the use of available technology provided by vendors, and assist State employees with the most efficient and economical automotive repair/services by granting Nonexclusive Agreements to automotive repair/service vendors. Approved automotive repair/service vendors desiring to do business with the State of California will be provided a Nonexclusive Agreement from the Department of General Services (DGS), OFAM as a result of this RFQ.

BACKGROUND

The State of California's annual expenditure for automotive repair/services is estimated to be $5 to $10 million. The State owns and operates approximately 35,000 – 40,000 pieces of mobile equipment ranging from passenger sedans to heavy duty construction equipment.

The OFAM provides administrative assistance to State agencies for automotive repair/services. Our focus is to provide the best value for our customers repair/service dollars.

SECTION II

TERMS AND CONDITIONS

Responses to this RFQ are subject to the Terms and Conditions herein.

1.0 **RESPONSE CHECK LIST AND VENDOR APPLICATION FORM.** Vendor must return a completed Response Check List, Attachment A, a completed Vendor Application Form, OFA 50, Attachment B, and all required attachments. The Vendor Application Form shall be signed in ink by an individual who is authorized to bind the Vendor contractually, and must indicate the title or position that the individual holds in the company. An unsigned form will be rejected. Vendor should not rely on verbal statements that alter any specification or any term or condition of this RFQ. Responses must be submitted without conditions.

2.0 **SPECIFICATIONS.** Specifications are provided to identify the service required and to establish an acceptable quality level. State agencies selecting automotive repair/service vendors will be the sole judge in determining comparable levels of service and quality in all offers.

3.0 **INFORMATION REQUIRED.** Vendor shall furnish all the information required and is expected to examine all specifications, all instructions and the terms and conditions prior to submittal of offer.

4.0 **PRODUCTS/SERVICES PROVIDED.** Vendor shall furnish all services in strict accordance with the specifications set forth for each item in this RFQ. The use of reconditioned, rebuilt or aftermarket automotive parts is strongly urged by the State. At the discretion of an OFAM Automotive Inspector, the use of new Original Equipment Manufactured (OEM) parts may be authorized. In addition, the use of re-refined motor oil and/or synthetic lubricants is highly desirable.

5.0 **PAYMENT FOR SERVICES RENDERED.** Vendor shall submit invoices to the owning agency for all services rendered. No other method of billing is permissible. See § III, 9.0 of this RFQ for further information about invoicing procedures.

6.0 **COMPLIANCE WITH LAWS, RULES AND REGULATIONS.** Vendor shall comply with any and all federal, State or local laws and official rules and regulations, now in effect or hereafter promulgated, which apply to automotive repair/service operations specified herein.

7.0 **DISPUTE RESOLUTION.** In the event a dispute arises with respect to the interpretation or performance of or the relationship created by all or any part of this Agreement, the parties shall attempt in good faith to resolve the dispute. If such efforts prove unsuccessful, each party agrees to consider the use of mediation, mini-trial, arbitration or other alternative dispute resolution techniques prior to resorting to litigation. If mediation, mini-trial, arbitration or other alternative dispute resolution techniques are utilized by the parties, each party agrees that no award or decision resulting therefrom shall include punitive damages.

8.0 **EVALUATION AND AUTHORIZATION.** Agreements will be made to Vendors in accordance with the criteria described in this RFQ.

9.0 **NOTICE OF AGREEMENT.** Vendors deemed authorized will be mailed a Nonexclusive Agreement.

10.0 **VENDOR ELIGIBILITY.** Vendor eligibility expires on an annual basis. In order to retain eligibility, vendor shall complete and submit OFAM Vendor Extension Form. See Attachment H of this RFQ.

11.0 **VENDOR RELOCATION.** In the event a vendor relocates, the vendor **MUST** notify the OFAM, in writing, and submit a new RFQ.

12.0 **TRANSFER OF OWNERSHIP.** In the event an approved vendor sells or transfers ownership of the business to another party, the vendor must notify the OFAM, in writing, and the non-exclusive agreement between the approved vendor and the OFAM is terminated. The new owner may request an RFQ from the OFAM if they wish to become an approved vendor.

13.0 **TERMINATION.** The State reserves the right to terminate this Agreement if the automotive repair/service vendor fails to meet the requirements during the Agreement period.

14.0 **NEWS RELEASES.** News releases pertaining to Agreements resulting from this RFQ shall not be made without prior written approval by the Chief of the OFAM.

15.0 **NONEXCLUSIVE AGREEMENT.** The State shall have the right to go outside of this Agreement to obtain similar services from another source or, when necessary, add new vendors to meet program requirements of the State.

16.0 **MULTIPLE AWARDS.** In order to ensure adequate service levels and coverage of State agency requirements, a State agency may select and use multiple automotive repair/service vendors.

17.0 **EXISTING CONTRACTS.** Some client agencies (departments, offices and CSU campuses) may have existing contracts with various vendors. Subject to the terms of the contract, at their discretion, the State agency or campus may continue under the terms of the existing contract or seek services pursuant to this RFQ.

18.0 **USE BY OTHER STATE GOVERNMENT BRANCHES.** Other branches of State and local governments may request services from authorized automotive repair/service vendors under the terms and conditions of this Agreement.

19.0 **USE OF STATE EMPLOYEES' NAMES.** Vendor agrees not to use the names and addresses of State of California employees for any purpose not directly related to, and necessary for providing automotive repair/services for State agencies.

20.0 **NATIONAL LABOR RELATIONS.** Vendor, by signing the Vendor Application Form, OFA 50, Attachment B, swears under penalty of perjury that no more than one final unappealable finding of contempt of court by a federal court has been issued against the Vendor within the immediately preceding two-year period because of the Vendors failure to comply with an order of a federal court which orders the Vendor to comply with an order of the National Labor Relations Board.

21.0 **VENDOR DATA RECORD.** Vendor shall prepare, sign and return a Vendor Data Record, STD. 204, provided as Attachment C.

22.0 **DRUG-FREE WORKPLACE CERTIFICATION.** Vendor shall prepare, sign and return a Drug-Free Workplace Certification, STD. 21, provided as Attachment D.

23.0 **NONDISCRIMINATION CLAUSE.** Nondiscrimination clause (OCP-1), STD. 17A, Attachment E, is attached and made part of the terms and conditions of this RFQ.

24.0 **PREVENTATIVE MAINTENANCE SCHEDULE/SAFETY INSPECTION WORK SHEET.** Preventative Maintenance Schedule/Safety Inspection Work Sheet, OFA 35, Attachment F, is attached and made part of the terms and conditions of this RFQ. Vendor must provide a required 6 month, 6,000 mile minimum warranty on all parts, labor and repairs.

25.0 **STATEMENT OF COMPLIANCE.** Vendors signature affixed hereon and dated shall constitute a certification under penalty of perjury under the laws of the State of California that the Vendor has, unless exempted, complied with the nondiscrimination program requirements of Government Code Section 12990 (a-f) and Title 2, California Code of Regulations, Section 8103.

26.0 **AUTHORIZATION TO DO BUSINESS.** Vendor must be authorized to do business in California. Vendor shall provide a copy of a current business license issued in California. Business Licenses **MUST** be kept current. Vendor shall provide updated copies to OFAM as they are renewed.

27.0 **AUDIT.** Vendor agrees that the DGS or its delegates will have the right to review, obtain and copy all records pertaining to services rendered. Vendor agrees to provide the State of California or its delegates with any relevant information requested and shall permit the State of California or its delegates access to its premises, upon reasonable notice, during normal business hours for the purpose of interviewing employees and inspecting and copying such books, records, accounts and other material that may be relevant to any matter relating to Vendors performance of its obligations under this Agreement. Vendor further agrees to maintain such records for a period of three (3) years after final payment for services. Under the terms and conditions of this Agreement and in accordance with Government Code Section 10532, Vendor is subject to the examination and audit by the Auditor General for a period of three (3) years after final payment for services rendered.

28.0 **AMENDMENT.** This Agreement may be amended in writing by either party at any time by mutual consent.

29.0 **BUREAU OF AUTOMOTIVE REPAIR LICENSE.** Vendor shall provide a copy of a current Bureau of Automotive Repair (BAR) License issued in California (if applicable). BAR Licenses **MUST** be kept current. Vendor shall provide updated copies to OFAM as they are renewed.

A BAR License is required for any business that performs for compensation, repairs to, maintenance of or diagnosis of malfunctions of any of the following automotive or motorcycle components:

AIR CONDITIONER
BODY AND FRAME
BRAKES
CLUTCH
DRIVE TRAIN ASSEMBLY
ELECTRICAL SYSTEM
ENGINE
OTHER AUTOMOTIVE/MOTORCYCLE COMPONENTS*
(*not specifically excluded)
TRANSMISSION
STEERING GEAR
EXHAUST SYSTEM
FUEL SYSTEM
HEATER SYSTEM
GLASS COMPONENTS
SUSPENSION

A BAR License is *not* required for the following:

- A business that services only vehicles over 6,000 GVW.
- A business that performs only minor maintenance services to motor vehicles, i.e., window tinting, upholstery, etc.
- A business that provides only towing/auto transport services.
- Machine shops that meet all of the following criteria:

  1. Primary business is the wholesale supply of new or rebuilt automotive parts, and
  2. Solely engages in the remanufacturing of individual automotive parts without compensation for warranty adjustments, and
  3. Does not engage in repairing or diagnosing malfunctions of motor vehicles or motorcycles.

Information concerning the CA Bureau of Automotive Repair and licensing procedures may be found at: http://www.bar.ca.gov/index.aspx.

30.0 **CLAIMS AND LOSSES.** Vendor agrees to indemnify, defend and save harmless the State, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, material men, laborers and any other person, firm or corporation furnishing or supplying work services, materials or supplies in connection with the performance of services to the State, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by Vendor in the performance of services to the State.

31.0 **CONFIDENTIALITY.** Vendor shall keep information related to all contracts and subcontracts in strict confidence. Other than reports submitted to the State and client agencies, Vendor shall not publish, reproduce or otherwise divulge such information in whole or in part, in any manner or form, or authorize or permit others to do so, taking such reasonable measures as are necessary to restrict access to the information while in Vendors possession to those employees on Vendors staff who must have the information on a "need-to-know" basis, and Vendor agrees to immediately notify, in writing, the client agency in the event Vendor determines or has reason to suspect a breach of these requirements.

32.0 **SUPERVISION.** Vendor agrees to have a supervisor or a responsible managing employee available during hours of service operation for customer contact and quality control purposes.

33.0 **SECURITY.** Vendor agrees to provide safe off street parking and locked storage for State vehicles.

34.0 **INSURANCE.** Vendor must have or obtain the following types of general business insurance and return the insurance certification with your response to this RFQ:

- ***Garagekeepers Legal Liability Insurance:*** Vendor shall maintain garagekeepers legal liability insurance covering physical damage sustained to State vehicles while in the possession of Vendor. Coverage shall be written for sufficient limits to cover any and all vehicles in custody of the Vendor at a given time.

- ***Garage Liability Insurance:*** Vendor shall maintain garage liability insurance with limits of not less than $1,000,000 per occurrence for bodily injury and property damage liability combined. The policy shall include coverage for
  Liabilities arising out of premises, operations, independent contractors, products, completed operations, personal and advertising injury, and liability assumed under an insured contract. Coverage limits shall apply separately to each location at which the Vendor operates.

  Please Note: The following additional insurance language MUST be included with the Garage Liability and Garagekeepers Legal Liability insurance certification sheet or your company will not become an approved vendor with the State of California and your response to this RFQ will be returned to you:

  "The State of California, its officers, agents, employees and servants are additional insureds, but only insofar as the operations under this Agreement are concerned."

- ***Standard Workers Compensation and Employers Liability Insurance:*** Vendor shall maintain statutory workers compensation and employers liability coverage for all its employees who will be engaged in the performance of this Agreement, including special coverage extensions where applicable. Employers liability limits of $1,000,000 shall be required.

  1. Insurance companies must be acceptable to the OFAM. If self-insured, review of financial information may be required.

  2. Insurance coverage must be in force for complete term of this Agreement. If insurance expires during term of this Agreement, a new certificate must be received by the OFAM within 10 (ten) days of the expiration date. The new insurance must meet the terms and conditions of this Agreement.

3. Vendor is responsible for any deductible or self-insured retention contained within the insurance program.

4. In the event Vendor fails to keep in effect at all times the specified insurance coverage, the OFAM may, in addition to any other remedies it may have, terminate this Agreement upon the occurrence of such event, subject to the provisions of this Agreement.

5. Any insurance required to be carried shall be primary, and not excess, to any other insurance carried by the State.

6. Certificates of Insurance must be provided as evidence of insurance for each of the coverages listed above. Each certificate shall provide that the State of California receives thirty (30) days advance notice of cancellation. The required certificates must be on file with the OFAM prior to the automotive repair/service vendor providing services to the State. (Submit required certificates with Response Check List, Attachment A.) **Questions concerning insurance coverage should be directed toward insurance brokers or carriers.**

All insurance certificates **MUST** be kept current. Vendor shall provide updated copies to OFAM as they are renewed.

35.0 **ESTABLISHED AUTOMOTIVE REPAIR/SERVICE VENDORS.** Vendors seeking to be authorized to do business with the State must have been in business as an automotive repair/service vendor for a minimum of one year prior to date the Vendor Application Form, OFA 50, Attachment B, is completed and signed.

36.0 **FALSE CERTIFICATION.** Failure to comply with the above requirements may result in termination of this Agreement to provide services, and Vendor may be ineligible for future Nonexclusive Agreements if the State determines that either of the following has occurred:

1. Vendor has made false certification, or
2. Vendor violates the certification by failing to carry out the requirements as noted above

37.0 **RFQ RESPONSE.** The RFQ response may be sent by mail, courier service or submitted in person. Send the RFQ response to:

Department of General Services
Office of Fleet and Asset Management
Terneicsa Fernandes, Statewide Mobile Equipment Coordinator
1700 National Drive
Sacramento, CA 95834

38.0 **This RFQ is not to be altered or changed. Keep a copy of this RFQ and response for your file.** Upon approval, Vendor will receive a Nonexclusive Agreement.

SECTION III

POLICIES AND PROCEDURES

By responding to this RFQ and receiving a Nonexclusive Agreement, automotive repair/service vendors desiring to do business with the State agree to comply fully with the following policies and procedures.

REPAIR AUTHORIZATION.

1.0 State Inspectors of Automotive Equipment use an authorization numbering system for all automotive and equipment repairs exceeding $500. Invoices without proper prior authorization numbers will not be approved for payment.

2.0 Authorization numbers will only be used for tracking and processing invoices.

3.0 All estimates for repairs exceeding $500 **MUST** be sent to the Inspector for authorization prior to any service being completed.

4.0 The $500 repair limit may be adjusted periodically by the OFAM.

5.0 Inspectors **DO NOT** approve invoices for the Department of Forestry, California Highway Patrol, Department of Transportation and State Universities. Please see Attachment I for a complete list of the State Agencies subject to OFAM repair approval.

6.0 When contacting an Inspector for authorization, please have the following information:

1. Owning agency,
2. Vehicles Mobile Equipment number (This is an 8-digit #, beginning with either a “800” sequence for DGS owned vehicles or a “900” sequence for agency owned vehicles.)
3. E# (license number),
4. Mileage of vehicle,
5. Complete description of repairs needed and cost estimate,
6. Drivers name and telephone number, and
7. Make, model and year of equipment.

7.0 If a driver is unable to provide the name and telephone number of the local Inspector, visit our web site at www.dgs.ca.gov/ofam/Home.aspx and go to the Directory of Automotive Inspectors.

8.0 **DO NOT USE AN INSPECTOR’S AUTHORIZATION NUMBER AS A PURCHASE ORDER NUMBER.** Vendors must also obtain approval from the owning agency’s Business Services Office to pay for the repair.

INVOICE INFORMATION.

9.0 The following information is needed on all invoices:

1. Repair Authorization Number.
2. License number. All State vehicles have an assigned “E” number. Additionally, some vehicles also have undercover license plates. Obtain the license number from the driver of the vehicle or the Automobile Maintenance Booklet, STD. 271, in the vehicle.
3. Vehicle make, year, model engine (number of cylinders), **COMPLETE VIN** and mileage or hours.
4. Vehicles Mobile Equipment number.

5. Labor rate--itemized per task, itemized list of all parts used and parts discount.
6. Owning agency, address and telephone number.
7. Driver's name and work telephone number.
8. Specific repairs done by shop and any sublet repairs.

10.0 Invoices are to be submitted in the following manner:

1. For DGS owned vehicles (vehicles with an "800" equipment #), invoices are forwarded directly to OFAM HQ via one of the following methods:

   Fax: 916-928-2571 or 916-928-2573

   Email: DGSFleetinvoices@dgs.ca.gov

   Mail: Department of General Services
   Office of Fleet & Asset Management
   Attention: Fleet Invoicing Unit
   1700 National Dr.
   Sacramento, CA 95834

2. For non-DGS owned vehicles (vehicles with a "900" equipment #), invoices are forwarded directly to the owning agency for payment.
3. Invoices may be submitted via U.S. Mail or electronically (fax or email).

CUSTOMER SERVICE.

11.0 State agencies have varying priorities in selecting automotive repair/service vendors; therefore, the selection criteria may vary.

A. Qualified, courteous and efficient staff.
B. Competent service reception personnel who are trained to advise customers regarding repair and service.
C. Facility externally attractive and internally clean.
D. Telephone services.
E. Backroom accounting and reporting capabilities.
F. On-going training programs to keep employees up to date on new technology.

RFQ DGS-OFA-VQ-1

SECTION IV

SMALL BUSINESS CERTIFICATION PROGRAM

To ensure that a fair proportion of California state contracting is placed with certified small business enterprises, the OFAM promotes the use of certified small business vendors who provide repairs/services for State vehicles. If certified, vendors will be listed on the OFAM's website at http://www.webapps.dgs.ca.gov/ofa/approved_auto_rpr_fac/ as a certified small business. In addition, invoices submitted by certified small businesses are given higher priority for payment.

To request a small business application, or for questions regarding the small business application, contact a small business certification analyst at (916) 375-4940.
A copy of the small business application can be viewed and/or printed at http://www.documents.dgs.ca.gov/pd/smallbus/std812.pdf. Once the application is completed, please return it to:

Department of General Services, Procurement Division
Office of Small Business & DVBE Certification
P. O. Box 989052
West Sacramento, CA 95798-9052

When small business certification is received, please send a copy of the certification letter to:

Terneicsa Fernandes, Statewide Mobile Equipment Coordinator
Department of General Services
Office of Fleet and Asset Management
1700 National Drive
Sacramento, CA 95834

OFFICE OF FLEET AND ASSET MANAGEMENT

RESPONSE CHECK LIST

Business Name:_____

[ ] Check here and attach Vendor Application Form, OFA 50, Attachment B.

[ ] Check here and attach completed and signed Vendor Data Record, STD. 204, Attachment C.

[ ] Check here and attach completed and signed Drug-Free Workplace Certification, STD. 21, Attachment D.

[ ] Check here and attach copy of current Business License.

[ ] Check here and attach copy of current Bureau of Automotive Repair License.

[ ] Check here and attach Certificates of Insurance as required on pages 6 and 7 of this RFQ. This certificate should include:

A. **Garagekeepers Legal Liability Insurance**
B. **Garage Liability Insurance**

[ ] Check here and attach Certificate of **Standard Workers Compensation and Employers Liability Insurance** as required on page 7 of this RFQ, unless this coverage is noted on the certificate shown above.

Return the response check list and attachments to:

Terneicsa Fernandes, Statewide Mobile Equipment Coordinator
Department of General Services
Office of Fleet and Asset Management
1700 National Drive
Sacramento, CA 95834

ATTACHMENT B

OFFICE OF FLEET AND ASSET MANAGEMENT

VENDOR APPLICATION FORM

This Vendor Application Form is designed to ensure that all vendors provide the requested information in order to be authorized to provide automotive repair/services for state agencies.

1. Business Name:_____

   DBA, if applicable:_____

   Address:_____

   City:_____County:_____State:_____Zip Code:_____

   Telephone:_____FAX:_____

   Email Address: _____

   Amount of time company has been in business providing automotive repair/services:_____years_____months

2. Types of vehicles serviced: Light duty [ ] Heavy duty [ ] Specialty [ ]

3. Name of flat rate manual _____

4. Hourly public flat rate _____

5. Hourly fleet flat rate _____

6. Parts, fleet discount _____%

7. Pick up/delivery at no charge Yes [ ] No [ ]

Check type of repair/service provided. Check where technicians are ASE certified.

Repair/Service		ASE Certified		Repair/Service		ASE Certified	
[ ]	A	[ ]	Engine performance/driveability	[ ]	J	[ ]	Manual drive train and axles
[ ]	B	[ ]	Minor engine repair	[ ]	K	[ ]	Smog check
[ ]	C	[ ]	Brakes	[ ]	L	[ ]	Auto body repair/paint
[ ]	D	[ ]	Electrical/electronic systems	[ ]	M	[ ]	Glass
[ ]	E	[ ]	Major engine repair (gasoline)	[ ]	N	[ ]	Mobile services
[ ]	F	[ ]	Major engine repair (diesel)	[ ]	O	[ ]	Tires
[ ]	G	[ ]	Heating/cooling and air conditioning	[ ]	P	[ ]	Towing
[ ]	H	[ ]	Suspension and steering	[ ]	Q	[ ]	Upholstery
[ ]	I	[ ]	Automatic transmission/transaxle	[ ]	R	[ ]	Specialty (window tinting, alarms, etc.)

Attach copies of current ASE certificates.

_____ _____

Printed Name Signature of Authorized Representative

Title:_____ Date_____

By signing this form, I/we agree that we have met all requirements contained in RFQ DGS-OFA-VQ-1, and agree that when services are rendered to state agencies those services will be rendered pursuant to the requirements of RFQ DGS-OFA-VQ-1.

OFA 50 (Revised 04/02)

OFFICE OF FLEET AND ASSET MANAGEMENT

VENDOR APPLICATION FORM

Check here if your facility has the following equipment:

GENERAL EQUIPMENT

1. [ ] Hoist/lift/rack; Lubrication equipment; Parts washer; Safety stands; Service manuals or electronic access to information; Torque wrenches (in./lb. ft./lb.); Welding equipment; Vernier caliper or 0-4" micrometer

ENGINE PERFORMANCE / DRIVEABILITY (GAS)

2. [ ] Compression tester; Vacuum pump; Engine analyzer with display capability or equivalent; Timing light; Exhaust gas analyzer; Dwell meter; Tachometer; Fuel injection pressure tester; Injector pulse tester; Computer code scanner; Cylinder leak tester.

ENGINE PERFORMANCE / DRIVEABILITY (DIESEL)

3. [ ] Diesel tachometer; Diesel compression gauge; Nozzle tester; Pump timing tools

EXTERNAL ENGINE REPAIR / PARTS REPLACEMENT
(Includes cylinder heads)

4. [ ] Hand held tools.

BRAKES

5. [ ] Brake drum gauge; Brake disc micrometer; Dial indicator; Pressure bleeder.

ELECTRICAL

6. [ ] Digital volt/ohmmeter; Battery load tester; Battery charger; Starting/charging system tester.

TIRES, STEERING AND SUSPENSION

7. [ ] Alignment rack/tables*; Wheel balancer*; Coil spring compressor; Tire changer*; Tools for disassembly and assembly of steering joints.

HEATING / COOLING AND AIR CONDITIONING

8. [ ] Radiator and cap pressure tester; Air conditioning manifold gauge set; Freon recovery/recycling equipment; Antifreeze recycling equipment; Cooling system thermometer; Air conditioning thermometer.

AUTOMATIC TRANSMISSION

9. [ ] 300 PSI pressure gauge; 30 inch hg. vacuum gauge; Transmission jack; Bushing cutter; Bushing and seal driver set; Seal puller; various snap ring pliers; Hydraulic press.

MANUAL TRANSMISSION AND REAR AXLE

10. [ ] Axle puller; Hydraulic press*; Clutch aligning tools.

MAJOR ENGINE REPAIR (GAS OR DIESEL)
Engine replacement:

11. [ ] Engine repair stand; Engine crane/hoist; Puller set.

Engine rebuilding:

12. [ ] Valve refacer and seat cutter*; Cylinder hone; Cylinder bore gauge; 0-4" micrometer.

Check here if your facility uses the following products:

13. [ ] Recycled oil

14. [ ] Recycled antifreeze

*Not required if service is sublet.

STATE OF CALIFORNIA-DEPARTMENT OF FINANCE

PAYEE DATA RECORD

(Required when receiving payment from the State of California in lieu of IRS W-9)

STD. 204 (Rev. 6-2003)

ATTACHMENT C

1

INSTRUCTIONS: Complete all information on this form. Sign, date, and return to the State agency (department/office) address shown at the bottom of this page. Prompt return of this **fully completed** form will prevent delays when processing payments. Information provided in this form will be used by State agencies to prepare Information Returns (1099). See reverse side for more information and Privacy Statement.

NOTE: Governmental entities, federal, State, and local (including school districts), are not required to submit this form.

2

PAYEE'S LEGAL BUSINESS NAME (Type or Print)	
SOLE PROPRIETOR – ENTER NAME AS SHOWN ON SSN (Last, First, M.I.)	**E-MAIL ADDRESS**
MAILING ADDRESS	**BUSINESS ADDRESS**
CITY, STATE, ZIP CODE	**CITY, STATE, ZIP CODE**

3

PAYEE ENTITY TYPE

CHECK ONE BOX ONLY

ENTER FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN): ___ - _____

☐ **PARTNERSHIP**

☐ **ESTATE OR TRUST**

CORPORATION:

- ☐ **MEDICAL** (e.g., dentistry, psychotherapy, chiropractic, etc.)
- ☐ **LEGAL** (e.g., attorney services)
- ☐ **EXEMPT** (nonprofit)
- ☐ **ALL OTHERS**

☐ **INDIVIDUAL OR SOLE PROPRIETOR ENTER SOCIAL SECURITY NUMBER:** ___ - __ - ____

(SSN required by authority of California Revenue and Tax Code Section 18646)

NOTE: Payment will not be processed without an accompanying taxpayer I.D. number.

4

PAYEE RESIDENCY STATUS

☐ California resident - Qualified to do business in California or maintains a permanent place of business in California.

☐ California nonresident (see reverse side) - Payments to nonresidents for services may be subject to State income tax withholding.

- ☐ No services performed in California.
- ☐ Copy of Franchise Tax Board waiver of State withholding attached.

5

I hereby certify under penalty of perjury that the information provided on this document is true and correct. Should my residency status change, I will promptly notify the State agency below.

AUTHORIZED PAYEE REPRESENTATIVE'S NAME (Type or Print)		**TITLE**
SIGNATURE	**DATE**	**TELEPHONE** ( )

6

Please return completed form to:

Department/Office: DGS OFAM

Unit/Section: Attn: Terneicsa Fernandes

Mailing Address: 1700 National Drive

City/State/Zip: Sacramento, CA 95834

Telephone: (916) 928-2517 **Fax:** (916) 928-9895

E-mail Address: Terneicsa.Fernandes@dgs.ca.gov

STATE OF CALIFORNIA-DEPARTMENT OF FINANCE

PAYEE DATA RECORD

STD. 204 (Rev. 6-2003) (REVERSE)

1	**Requirement to Complete Payee Data Record, STD. 204** A completed Payee Data Record, STD. 204, is required for payments to all non-governmental entities and will be kept on file at each State agency. Since each State agency with which you do business must have a separate STD. 204 on file, it is possible for a payee to receive this form from various State agencies. Payees who do not wish to complete the STD. 204 may elect to not do business with the State. If the payee does not complete the STD. 204 and the required payee data is not otherwise provided, payment may be reduced for federal backup withholding and nonresident State income tax withholding. Amounts reported on Information Returns (1099) are in accordance with the Internal Revenue Code and the California Revenue and Taxation Code.
2	Enter the payee's legal business name. Sole proprietorships must also include the owner's full name. An individual must list his/her full name. The mailing address should be the address at which the payee chooses to receive correspondence. Do not enter payment address or lock box information here.
3	Check the box that corresponds to the payee business type. Check only one box. Corporations must check the box that identifies the type of corporation. The State of California requires that all parties entering into business transactions that may lead to payment(s) from the State provide their Taxpayer Identification Number (TIN). The TIN is required by the California Revenue and Taxation Code Section 18646 to facilitate tax compliance enforcement activities and the preparation of Form 1099 and other information returns as required by the Internal Revenue Code Section 6109(a). The TIN for individuals and sole proprietorships is the Social Security Number (SSN). Only partnerships, estates, trusts, and corporations will enter their Federal Employer Identification Number (FEIN).
4	**Are you a California resident or nonresident?** A corporation will be defined as a "resident" if it has a permanent place of business in California or is qualified through the Secretary of State to do business in California. A partnership is considered a resident partnership if it has a permanent place of business in California. An estate is a resident if the decedent was a California resident at time of death. A trust is a resident if at least one trustee is a California resident. For individuals and sole proprietors, the term "resident" includes every individual who is in California for other than a temporary or transitory purpose and any individual domiciled in California who is absent for a temporary or transitory purpose. Generally, an individual who comes to California for a purpose that will extend over a long or indefinite period will be considered a resident. However, an individual who comes to perform a particular contract of short duration will be considered a nonresident. Payments to all nonresidents may be subject to withholding. Nonresident payees performing services in California or receiving rent, lease, or royalty payments from property (real or personal) located in California will have 7% of their total payments withheld for State income taxes. However, no withholding is required if total payments to the payee are $1,500 or less for the calendar year. For information on Nonresident Withholding, contact the Franchise Tax Board at the numbers listed below: Withholding Services and Compliance Section: 1-888-792-4900 E-mail address: wscs.gen@ftb.ca.gov For hearing impaired with TDD, call: 1-800-822-6268 Website: www.ftb.ca.gov
5	Provide the name, title, signature, and telephone number of the individual completing this form. Provide the date the form was completed.
6	This section must be completed by the State agency requesting the STD. 204.
	Privacy Statement Section 7(b) of the Privacy Act of 1974 (Public Law 93-579) requires that any federal, State, or local governmental agency, which requests an individual to disclose their social security account number, shall inform that individual whether that disclosure is mandatory or voluntary, by which statutory or other authority such number is solicited, and what uses will be made of it. It is mandatory to furnish the information requested. Federal law requires that payment for which the requested information is not provided is subject to federal backup withholding and State law imposes noncompliance penalties of up to $20,000. You have the right to access records containing your personal information, such as your SSN. To exercise that right, please contact the business services unit or the accounts payable unit of the State agency(ies) with which you transact that business. All questions should be referred to the requesting State agency listed on the bottom front of this form.

STATE OF CALIFORNIA

DRUG-FREE WORKPLACE CERTIFICATION

STD. 21 (REV. 12-93)

ATTACHMENT D

CERTIFICATION

I, the official named below, hereby swear that I am duly authorized legally to bind the contractor or grant recipient to the certification described below. I am fully aware that this certification, executed on the date below, is made under penalty of perjury under the laws of the State of California.

CONTRACTOR/BIDDER FIRM NAME	FEDERAL ID NUMBER
BY *(Authorized Signature)*	DATE EXECUTED
PRINTED NAME AND TITLE OF PERSON SIGNING	TELEPHONE NUMBER *(Include Area Code)* ( )
TITLE	
CONTRACTOR/BIDDER FIRM'S MAILING ADDRESS	

The contractor or grant recipient named above hereby certifies compliance with Government Code Section 8355 in matters relating to providing a drug-free workplace. The above named contractor or grant recipient will:

1. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations, as required by Government Code Section 8355(a).

2. Establish a Drug-Free Awareness Program as required by Government Code Section 8355(b), to inform employees about all of the following:

   (a) The dangers of drug abuse in the workplace,

   (b) The person's or organization's policy of maintaining a drug-free workplace,

   (c) Any available counseling, rehabilitation and employee assistance programs, and

   (d) Penalties that may be imposed upon employees for drug abuse violations.

3. Provide as required by Government Code Section 8355(c), that every employee who works on the proposed contract or grant:

   (a) Will receive a copy of the company's drug-free workplace policy statement, and

   (b) Will agree to abide by the terms of the company's statement as a condition of employment on the contract or grant.

4. At the election of the contractor or grantee, from and after the "Date Executed" and until _____ (DATE) (NOT TO EXCEED 36 MONTHS), the state will regard this certificate as valid for all contracts or grants entered into between the contractor or grantee and this state agency without requiring the contractor or grantee to provide a new and individual certificate for each contract or grant. If the contractor or grantee elects to fill in the blank date, then the terms and conditions of this certificate shall have the same force, meaning, effect and enforceability as if a certificate were separately, specifically, and individually provided for each contract or grant between the contractor or grantee and this state agency.

STATE OF CALIFORNIA

NONDISCRIMINATION CLAUSE (OCP-1)

STD. 17A (REV. 9-2000)

1. During the performance of this contract, contractor and its subcontractors shall not unlawfully discriminate, harass or allow harassment, against any employee or applicant for employment because of sex, sexual orientation, race, color, religious creed, marital status, denial of family and medical care leave, ancestry, national origin, medical condition (cancer/genetic characteristics), age (40 and above), disability (mental and physical) including HIV and AIDS, denial of pregnancy disability leave or reasonable accommodation. Contractor and subcontractors shall ensure that the evaluation and treatment of their employees and applicants for employment are free from such discrimination and harassment. Contractor and subcontractors shall comply with the provisions of the Fair Employment and Housing Act (Gov. Code, §12900 et seq.) and the applicable regulations promulgated thereunder (Cal. Code Regs, tit. 2, §7285.0 et seq.). The applicable regulations of the Fair Employment and Housing Commission implementing Government Code, §12990 (a)–(f), are incorporated into this contract by reference and made a part hereof as if set forth in full (Cal. Code Regs, tit. 2, §7285.0 et seq.). Contractor and its subcontractors shall give written notice of their obligations under this clause to labor organizations with which they have a collective bargaining or other agreement.

2. This Contractor shall include the non-discrimination and compliance provisions of this clause in all subcontracts to perform work under contract

PREVENTATIVE MAINTENANCE SCHEDULE/
SAFETY INSPECTION WORK SHEET
OFA 35 (Revised 1/08)

Department of General Services
Office of Fleet and Asset Management
www.ofa.dgs.ca.gov

The intent of this work sheet is to outline the standard preventative maintenance schedule recommended by the Office of Fleet and Asset Management (OFAM) and assist vendors and State garage staff when servicing State vehicles.

NOTE: Services due shall be confirmed by reviewing the Maintenance Booklet, STD 271, found in the glove compartment. **Prior approval from an OFAM Inspector of Automotive Equipment is required for services/repairs exceeding $350 performed by a non-approved vendor ($500 for OFAM approved vendors).**

Service shall be performed as follows:

6,000 miles or 6 months normal use, or 4,000 miles severe use.*

- Change engine oil and filter
- Service battery
- Lube chassis
- Lube hinges and latches

- Check the following:

__ Lights & instrument panel
__ Heater & air conditioner
__ Seat belts
__ Windshield wipers & washers
__ Master cylinder
__ Differential
__ Cooling system & antifreeze + __-__
__ Belts & fan clutch
__ Fuel systems
__ Fluid leaks & levels
__ Transmission
__ Tires: PSI: Front __ Rear__**
__ Suspension
__ Frame members
__ U-joints & CV joints
__ Exhaust system
__ Brakes**
__ Emission system
__ Steering components; check for excessive play with wheels on the floor.

- Perform the following at manufacturer's recommended intervals* (If needed):

__ Replace air & fuel filters
__ Replace spark plugs
__ Service transmission

- Road test vehicle for overall performance and handling after services and repairs have been completed.

INVOICES:
The following information shall be included on the invoice:

- Repair Authorization Number.
- License number. All State vehicles have an assigned "E" number. Additionally, some vehicles also have undercover license plates. Obtain the license number from the driver of the vehicle or the Automobile Maintenance Booklet, STD. 271, in the vehicle.
- Vehicle make, year, model engine (number of cylinders), **COMPLETE VIN** and mileage or hours.
- Vehicles Mobile Equipment number.
- Labor rate--itemized per task, itemized list of all parts used and parts discount.
- Owning agency, address and telephone number.
- Driver's name and work telephone number.
- Specific repairs done by shop and any sublet repairs.

* Reference manufacturer's manual for definition of normal and severe use.
** Contact an Inspector of Automotive Equipment if not expected to last until next service.

ACORD™ **CERTIFICATE OF LIABILITY INSURANCE**	OP ID NA SUPER-4	DATE (MM/DD/YYYY) 04/01/2006

PRODUCER **INSURANCE SAMPLE**	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

INSURED **REQUIRED INFORMATION IS HIGHLIGHTED BELOW**	INSURERS AFFORDING COVERAGE	NAIC #
	INSURER A:	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY				EACH OCCURRENCE	$
						DAMAGE TO RENTED PREMISES	$
						MED EXP	$
						PERSONAL & ADV INJURY	$
						GENERAL AGGREGATE	$
						PRODUCTS – COMP/OP AGG	$
		AUTOMOBILE LIABILITY *-ANY AUTO* *-ALL OWNED AUTOS* *-SCHEDULED AUTOS*	Please see reverse for details of coverage required			COMBINED SINGLE LIMIT	$1,000,000
						BODILY INJURY (Per person)	$
						BODILY INJURY (Per accident)	$
						PROPERTY DAMAGE (Per accident	$
		GARAGE LIABILITY *-ANY AUTO* *-OTHER THAN AUTO*				AUTO ONLY – EA ACCIDENT	$1,000,000
						OTHER THAN AUTO ONLY	
						AGGREGATE	1,000,000
		WORKERS COMPENSATION AND EMPLOYERS **LIABILITY** ANY PROPRIETOR/PARTNER/ EXECUTIVE OFFICER/MEMBER EXCLUDED? IF yes, describe under SPECIAL PROVISION below				WC STATUTORY LIMITS	
						E.L EACH ACCIDENT	$1,000,000
						E.L DISEASE 0 EA EMPLOYEE	$1,000,000
						E.L DISEASE – POLICY LIMIT	$1,000,000
		OTHER **GARAGE KEEPERS LEGAL LIABILITY**					$30,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

"The State of California, its officers, agents, employees, and servants are added as additional insureds, but only insofar as the operations under this Agreement are concerned"

CERTIFICATE HOLDER	**CANCELLATION**
State of California **Department of General Services** **Office of Fleet and Asset Management** **1700 National Drive** **Sacramento, CA 95834**	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR THE MAIL 30 DAY WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES AUTHORIZED REPRESENTATIVE

Liability Insurance Certificate Instructions:

On your liability insurance certificate, we need evidence of at least 1 million garage or general liability, and also evidence of **garagekeeper's legal liability** coverage for sufficient limits to cover any and all vehicles in custody of the Vendor at a given time.

We also need you to add an additional insured statement with these exact words:

> **"The State of California, its officers, agents, employees and servants are additional insureds, but only insofar as the operations under this Agreement are concerned."**

Please Note: The above additional insurance language MUST be included with the Garage Liability insurance certification sheet or your company will not become an approved vendor with the State of California

And finally, we need to be listed as certificate holders. Here is the name and address:

State of California
Department of General Services
Office of Fleet and Asset Management
1700 National Drive
Sacramento, CA 95834

For your Worker's Compensation Insurance, if it is a separate certificate, we need to be added as certificate holders. No additional wording is required for the Worker's Compensation Certificate.

If you have questions please call Terneicsa Fernandes at (916) 928-2517
Fax certificates to (916) 928-9895.

OFFICE OF FLEET ADMINISTRATION
VENDOR EXTENSION FORM

ATTACHMENT H

1. **BUSINESS NAME:**_____

DBA (if applicable):_____

Address:_____

City:_____ State:_____ Zip Code:_____

Telephone:_____ Fax:_____

2. **BUSINESS LICENSE** (if applicable)

Business License Number:_____

Is Business License current?.....[ ] yes [ ] no

Business License Expiration Date:_____

3. **BUREAU OF AUTOMOTIVE REPAIR LICENSE** (if applicable)

BAR License Registration Number:_____

BAR License Expiration Date:_____

Has any person with the above registration number been convicted of a violation of the Automotive Repair Act or Health and Safety Code?.....[ ] yes [ ] no

If yes, please explain:_____

Has any person with the above registration number had an auto repair registration or license denied, suspended, revoked or placed on probation?.....[ ] yes [ ] no

If yes, please explain:_____

4. **INSURANCE COVERAGES**

Is **Garage Liability Insurance** current?.....[ ] yes [ ] no
Expiration Date:_____

Is **Garagekeepers Legal Liability Insurance** current?.....[ ] yes [ ] no
Expiration Date:_____

Is **Standard Workers Compensation and Employers Liability Insurance** current?...[ ] yes [ ] no
Expiration Date:_____

_____ Printed Name

_____ Signature of Authorized Representative

_____ Title

_____ Date

By signing this form, I/we agree that we will continue to meet all requirements contained in RFQ DGS-OFA-VQ-1, and agree that when services are rendered to state agencies those services will be rendered pursuant to the requirements of RFQ DGS-OFA-VQ-1 for a period of one year effective from the above date.

State Agencies subject to OFAM repair approval

Administrative Law, Office of
African-American Museum, California
Aging, Department of
Agricultural Labor Relations Board
Air Resources Board, California
Alcohol and Drug Programs, Department of
Alcoholic Beverage Control, Department of
Arts Council, California
Assembly Rules Committee
Boating and Waterways, Department of
Bureau of State Audits
Business Transportation and Housing Agency
California Housing and Community Development, Department of
California State University Campuses*
California Technology Agency
California Volunteers
Child Support Services, Department of
Coastal Commission, California
Community Colleges Board of Governors, California
Community Services and Development, Department of
Conservancy - Baldwin Hills
Conservancy - California Coastal
Conservancy - California Tahoe
Conservancy - Coachella Mountains
Conservancy - Sacramento-San Joaquin Delta
Conservancy - San Diego River
Conservancy - San Gabriel & Lower LA Rivers & Mountains
Conservancy - San Joaquin River
Conservancy - Santa Monica Mountains
Conservancy - Sierra Nevada
Conservation Corps, California
Conservation, Department of
Consumer Affairs, Department of
Controller, State
Corporations, Department of
Corrections and Rehabilitation, California Department of
Court of Appeal, California
Delta Stewardship Council
Developmental Disabilities, State Council on
Developmental Services, Department of
Education, California Department of
Emergency Management Agency, California
Emergency Medical Services Authority
Employment Development Department
Employment Training Panel

Energy Commission, California
Environmental Health Hazard Assessment, Office of
Environmental Protection Agency, California
Equalization, State Board of
Exposition and State Fair, California
Exposition Park Management, Office of
Fair Employment and Housing Commission
Fair Employment and Housing, Department of
Fair Political Practices Commission
Finance, Department of
Financial Institutions, Department of
First 5 California
Fish and Game Commission
Fish and Game, Department of
Food and Agriculture, Department of
Forestry and Fire Protection, CA Department of *
Franchise Tax Board
Gambling Control Commission, California
General Services, Department of
Governor's Office
Governor's Office of Economic Development
Governor's Office of Planning and Research
Health and Human Services Agency
Health Care Services, Department of
Highway Patrol, California*
Horse Racing Board, California
Housing Finance Agency, California
Industrial Relations, Department of
Inspector General, Office of the
Insurance, Department of
Judicial Council of California
Justice, Department of
Labor and Workforce Development Agency
Lands Commission, State
Legislative Budget Committee
Legislative Counsel Bureau
Library, California State
Lieutenant Governor, Office of the
Little Hoover Commission
Lottery Commission, California State Managed Health Care, Department of
Managed Risk Medical Insurance Board
Mental Health, Department of
Military Museum, California
Military, Department of
Motor Vehicles, Department of
Natural Resources Agency
Parks and Recreation, Department of
Peace Officer Standards and Training, Commission on
Personnel Administration, Department of
Personnel Board, State
Pesticide Regulation, Department of

Pilot Commissioners, Board of
Prison Industry Authority, California
Public Employees' Retirement System, California
Public Employment Relations Board
Public Health, Department of
Public Utilities Commission, California
Real Estate Appraisers, Office of
Real Estate, Department of
Rehabilitation, Department of
Resources, Recycling, and Recovery, Department of
Science Center, California
Seismic Safety Commission
Senate Rules Committee
SF Bay Conservation and Development Commission
Social Services, Department of
State and Consumer Services Agency
State, Secretary of
Statewide Health Planning and Development, Office of
Student Aid Commission, California
Systems Integration, Office of
Teachers' Credentialing Commission
Teachers' Retirement System, California State
Toxic Substances Control, Department of
Traffic Safety, Office of
Transportation, Department of *
Treasurer, State
Unemployment Insurance Appeals Board
University of California *
Veterans Affairs, Department of
Victim Compensation and Government Claims Board
Water Resources Control Board, State
Water Resources, Department of
Workforce Investment Board, California

*Note - OFAM Inspectors **<u>do not</u>** approve invoices for these State agencies*