

STEEL INSPECTORS OF TEXAS, INC

Date: September 23, 2016

George Parker – Director of Facilities, Maintenance and Operations
Davis Joint Unified School District
526 B Street
Davis, CA 95616

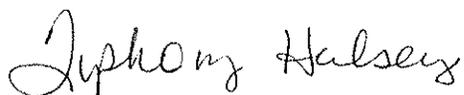
**RE: COST PROPOSAL FOR THE IN-PLANT WELDING INSPECTION ON THE DAVIS
SENIOR HIGH SCHOOL VISITORS BLEACHERS**

Mr. Wendell Cook of Sturdisteel, Waco, Texas, stated that the shop welding on the bleachers should take ten days(10 days). We propose to do these shop inspections not to exceed \$7,000.00. This cost includes travel time, mileage (200 miles round trip), inspection and report time. Cost could be less but will not exceed this amount.

\$700.00 per day. (\$50.00 per hour, no additional charge for OT, mileage, etc).

If you have any questions please do not hesitate to call my office 817-246-8096.

Thanks



Tiphony Hulsey

SPECIAL INSPECTOR QUALIFICATION AND APPROVAL

This form must be completed by a Special Inspector who contracts individually and directly with the School Board. It shall be signed and dated by the Special Inspector, School District/Owner, Design Professional in General Responsible Charge, and Structural Engineer (when applicable) prior to submission to DSA. Completed, signed form shall be submitted in advance to the DSA by the Design Professional in General Responsible Charge to ensure DSA approval of special inspector prior to start of work requiring special inspection, per CCR, Part 1, Section 4-335(c) 1B.

Special Inspectors employed by the Laboratory of Record (LOR) do not file this form.

1. PROJECT INFORMATION (To be completed by Design Professional.)			
School District/Owner: Davis Joint Unified School District		DSA File #: 57 -H3	
Project/School Name: Davis Senior High School Bleachers		DSA App. #: 02 - 114706	
Project Class:	Estimated Start Date of construction work requiring special inspection:		
Special Inspection Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding	Fabrication: <input type="checkbox"/> On-site <input checked="" type="checkbox"/> Off-site		
Type of Inspection: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	DSA 5-SI Submittal Date:		
2. SPECIAL INSPECTOR INFORMATION			
Name: Larry G Akers		Date of Birth: 11-13-1956	
Address: 7600 Wagon Street	City: Fort Worth	State: TX	ZIP: 76108
Phone #s: (817) 246-8096	Email Address: info@steelinspectorsoftexas.com		
Special Inspection Certification (issuing authority, cert. number): AWS CWI #01030171		Expiration Date: 3-1-2019	
3. SPECIAL INSPECTOR EXPERIENCE RECORD (To be completed by the Special Inspector.)			
List at least three previous projects that best qualify you to perform special inspection services for the project described above. For previous projects under DSA jurisdiction, provide the DSA application number.			
A. Project Name: Oak Grove Elementary School Shade		DSA App. #: (If applicable.) 02-113357	
Location: Porterville, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: Burton School District		Dates worked on this project From: 04-09-14 To: 04-18-14	
Contact Name: Wendy Jones		Contact Phone #: (559) 781-8020	
Contact Email Address: wjones@burtonschools.org			
B. Project Name: Reedly Aquatics Complex Shade Structure		DSA App. #: (If applicable.) 02-112969	
Location: Fresno, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: BSK Associates		Dates worked on this project From: 07-17-14 To: 07-23-14	
Contact Name: William Kates		Contact Phone #: (559) 497-2868	
Contact Email Address: wrkates@bskinc.com			
C. Project Name: East Bakersfield High School Bleachers		DSA App. #: (If applicable.) 03-114839	
Location: Bakersfield, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: Soils Engineering, Inc.		Dates worked on this project From: 05-13-14 To: 05-27-14	
Contact Name: Tony Frangie		Contact Phone #: (661) 831-5100	
Contact Email Address: tony@soilsengineering.com			

SPECIAL INSPECTOR QUALIFICATION AND APPROVAL

DSA File #: 57 - H3

DSA App. #: 02 - 114706

4. SPECIAL INSPECTOR'S AFFIDAVIT

I hereby certify under penalty of perjury that all information on this form is true, and I agree and understand that any misstatement of material fact contained in this form will be sufficient cause for withdrawal of my DSA approval for this project.

If appointed, I will accept the responsibilities of special inspector and will perform the duties as prescribed by Education Code Sections 17280-17316 (for public schools) or 81130-81147 (for community colleges), or Health and Safety Code Sections 16000-16023 (for essential services buildings).

Signature: Larry Akers Print Name: Larry G Akers Date: 9-23-14
Title: Special Inspector

5. SCHOOL DISTRICT/OWNER'S AFFIDAVIT

The special inspector named on this form is being employed individually and directly by the School District/Owner, conditioned upon acceptance by the architect or structural engineer in general responsible charge, and approval by the Division of the State Architect (DSA). This individual is to provide competent, adequate special inspection (as described in Sections 3 and 4 above) during construction of this project. I understand that the special inspector will act under the direction of the project architect or structural engineer in general responsible charge. The special inspector shall be directly responsible to the School District/Owner.

Signature: _____ Print Name: _____ Date: _____
Title: _____

6. AFFIDAVIT OF DESIGN PROFESSIONAL IN GENERAL RESPONSIBLE CHARGE

I find the Special Inspector named on this form to be suitably qualified and satisfactory to perform special inspection on this project. Per CCR Part 1, Section 4-335(f) 1B, I have personally verified this individual possesses the training, education, experience, and certification necessary to perform the special inspection indicated above. I will monitor the Special Inspector's activities to assure his/her work is performed in accordance with the requirements of the DSA approved construction documents, and applicable codes and standards. I will verify that the Special Inspector properly documents his/her activities and that reports are distributed as required.

My assessment is based on: Interview: (Date of interview.) _____ OR Prior Professional Relationship.

Signature: _____ Print Name: _____ Date: _____

7. AFFIDAVIT OF STRUCTURAL ENGINEER
(Complete when structural work is delegated to Structural Engineer on line 25a of form DSA 1.)

I find the Special Inspector named on this form to be suitably qualified and satisfactory to perform inspection on this project. Per CCR Part 1, Section 4-335(f) 1B, I have personally verified this individual possesses the training, education, experience, and certification necessary to perform the special inspection indicated above. I will monitor the Special Inspector's activities to assure his/her work is performed in accordance with the requirements of the DSA approved construction documents, and applicable codes and standards. I will also verify that the Special Inspector properly documents all his/her activities and that reports are distributed as required by code.

My assessment is based on: Interview: (Date of interview.) _____ OR Prior Professional Relationship.

Signature: _____ Print Name: _____ Date: _____

APPROVAL BY DIVISION OF THE STATE ARCHITECT	Signature of DSA Field Engineer:	
	Print Name:	Date:

Submit this form electronically to the DSA Regional Office with construction oversight authority for the project:

<input type="checkbox"/> DSA OAKLAND Oakfielddocs@dgs.ca.gov	<input type="checkbox"/> DSA SACRAMENTO Sacfielddocs@dgs.ca.gov	<input type="checkbox"/> DSA LOS ANGELES LAfielddocs@dgs.ca.gov	<input type="checkbox"/> DSA SAN DIEGO SDfielddocs@dgs.ca.gov
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SPECIAL INSPECTOR QUALIFICATION AND APPROVAL

This form must be completed by a Special Inspector who contracts individually and directly with the School Board. It shall be signed and dated by the Special Inspector, School District/Owner, Design Professional in General Responsible Charge, and Structural Engineer (when applicable) prior to submission to DSA. Completed, signed form shall be submitted in advance to the DSA by the Design Professional in General Responsible Charge to ensure DSA approval of special inspector prior to start of work requiring special inspection, per CCR, Part 1, Section 4-335(c) 1B.

Special Inspectors employed by the Laboratory of Record (LOR) do not file this form.

1. PROJECT INFORMATION (To be completed by Design Professional.)			
School District/Owner: Davis Joint Unified School District		DSA File #: 57 -H3	
Project/School Name: Davis Senior High School Bleachers		DSA App. #: 02 - 114706	
Project Class:	Estimated Start Date of construction work requiring special inspection:		
Special Inspection Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding	Fabrication: <input type="checkbox"/> On-site <input checked="" type="checkbox"/> Off-site		
Type of Inspection: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	DSA 5-SI Submittal Date:		
2. SPECIAL INSPECTOR INFORMATION			
Name: Lindon Carr Jr.		Date of Birth: 1-13-1955	
Address: 7600 Wagon Street	City: Fort Worth	State: TX	ZIP: 76108
Phone #s: (817) 246-8096	Email Address: info@steelinspectorsoftexas.com		
Special Inspection Certification (issuing authority, cert. number): AWS CWI #15061011		Expiration Date: 6-1-18	
3. SPECIAL INSPECTOR EXPERIENCE RECORD (To be completed by the Special Inspector.)			
List at least three previous projects that best qualify you to perform special inspection services for the project described above. For previous projects under DSA jurisdiction, provide the DSA application number.			
A. Project Name: Clovis West High School Phase Two		DSA App. #: (If applicable.) 02-113205	
Location: Fesno, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: BSK Associates		Dates worked on this project From: 07-26-14 To: 07-30-14	
Contact Name: William Kates		Contact Phone #: (559) 497-2868	
Contact Email Address: wrkates@bskinc.com			
B. Project Name: May Ranch Elementary School Shade Structure		DSA App. #: (If applicable.) 04-114030	
Location: Paris, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: Southland Inspection, Inc.		Dates worked on this project From: 02-27-15 To: 03-04-15	
Contact Name: Andrew Larson		Contact Phone #: (951) 234-9623	
Contact Email Address: southlandinsp@verizon.net			
C. Project Name: East Bakersfield High School Bleachers		DSA App. #: (If applicable.) 03-114839	
Location: Bakersfield, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: Soils Engineering, Inc.		Dates worked on this project From: 05-13-14 To: 05-27-14	
Contact Name: Tony Frangie		Contact Phone #: (661) 831-5100	
Contact Email Address: tony@soilsengineering.com			

SPECIAL INSPECTOR QUALIFICATION AND APPROVAL

DSA File #: 57 - H3

DSA App. #: 02 - 114706

4. SPECIAL INSPECTOR'S AFFIDAVIT

I hereby certify under penalty of perjury that all information on this form is true, and I agree and understand that any misstatement of material fact contained in this form will be sufficient cause for withdrawal of my DSA approval for this project.

If appointed, I will accept the responsibilities of special inspector and will perform the duties as prescribed by Education Code Sections 17280-17316 (for public schools) or 81130-81147 (for community colleges), or Health and Safety Code Sections 16000-16023 (for essential services buildings).

Signature: Lindon Carr Print Name: Lindon Carr Jr. Date: 9-23-16
Title: Special Inspector

5. SCHOOL DISTRICT/OWNER'S AFFIDAVIT

The special inspector named on this form is being employed individually and directly by the School District/Owner, conditioned upon acceptance by the architect or structural engineer in general responsible charge, and approval by the Division of the State Architect (DSA). This individual is to provide competent, adequate special inspection (as described in Sections 3 and 4 above) during construction of this project. I understand that the special inspector will act under the direction of the project architect or structural engineer in general responsible charge. The special inspector shall be directly responsible to the School District/Owner.

Signature: _____ Print Name: _____ Date: _____
Title: _____

6. AFFIDAVIT OF DESIGN PROFESSIONAL IN GENERAL RESPONSIBLE CHARGE

I find the Special Inspector named on this form to be suitably qualified and satisfactory to perform special inspection on this project. Per CCR Part 1, Section 4-335(f) 1B, I have personally verified this individual possesses the training, education, experience, and certification necessary to perform the special inspection indicated above. I will monitor the Special Inspector's activities to assure his/her work is performed in accordance with the requirements of the DSA approved construction documents, and applicable codes and standards. I will verify that the Special Inspector properly documents his/her activities and that reports are distributed as required.

My assessment is based on: Interview: (Date of interview.) _____ OR Prior Professional Relationship.

Signature: _____ Print Name: _____ Date: _____

7. AFFIDAVIT OF STRUCTURAL ENGINEER

(Complete when structural work is delegated to Structural Engineer on line 25a of form DSA 1.)

I find the Special Inspector named on this form to be suitably qualified and satisfactory to perform inspection on this project. Per CCR Part 1, Section 4-335(f) 1B, I have personally verified this individual possesses the training, education, experience, and certification necessary to perform the special inspection indicated above. I will monitor the Special Inspector's activities to assure his/her work is performed in accordance with the requirements of the DSA approved construction documents, and applicable codes and standards. I will also verify that the Special Inspector properly documents all his/her activities and that reports are distributed as required by code.

My assessment is based on: Interview: (Date of interview.) _____ OR Prior Professional Relationship.

Signature: _____ Print Name: _____ Date: _____

**APPROVAL BY
DIVISION OF
THE STATE
ARCHITECT**

Signature of
DSA Field Engineer:

Print Name:

Date:

Submit this form electronically to the DSA Regional Office with construction oversight authority for the project:

DSA OAKLAND

Oakfielddocs@dgs.ca.gov

DSA SACRAMENTO

Sacfielddocs@dgs.ca.gov

DSA LOS ANGELES

LAfielddocs@dgs.ca.gov

DSA SAN DIEGO

SDfielddocs@dgs.ca.gov

SPECIAL INSPECTOR QUALIFICATION AND APPROVAL

This form must be completed by a Special Inspector who contracts individually and directly with the School Board. It shall be signed and dated by the Special Inspector, School District/Owner, Design Professional in General Responsible Charge, and Structural Engineer (when applicable) prior to submission to DSA. Completed, signed form shall be submitted in advance to the DSA by the Design Professional in General Responsible Charge to ensure DSA approval of special inspector prior to start of work requiring special inspection, per CCR, Part 1, Section 4-335(c) 1B.

Special Inspectors employed by the Laboratory of Record (LOR) do not file this form.

1. PROJECT INFORMATION (To be completed by Design Professional.)			
School District/Owner: Davis Joint Unified School District		DSA File #: 57 - H3	
Project/School Name: Davis Senior High School Bleachers		DSA App. #: 02 - 114706	
Project Class:	Estimated Start Date of construction work requiring special inspection:		
Special Inspection Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding	Fabrication: <input type="checkbox"/> On-site <input checked="" type="checkbox"/> Off-site		
Type of Inspection: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	DSA 5-SI Submittal Date:		
2. SPECIAL INSPECTOR INFORMATION			
Name: Tiphony Hulsey		Date of Birth: 10-04-1979	
Address: 7600 Wagon Street	City: Fort Worth	State: TX	ZIP: 76108
Phone #: (817) 246-8096	Email Address: tiphony@steelinspectorsoftexas.com		
Special Inspection Certification (issuing authority, cert. number): AWS CWI #10020191		Expiration Date: 2-1-2019	
3. SPECIAL INSPECTOR EXPERIENCE RECORD (To be completed by the Special Inspector.)			
List at least three previous projects that best qualify you to perform special inspection services for the project described above. For previous projects under DSA jurisdiction, provide the DSA application number.			
A. Project Name: John Morse Therapeutic Center Shade		DSA App. #: (If applicable.) 02-112921	
Location: Sacramento, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: Wallace-Kuhl & Associates		Dates worked on this project From: 10-23-13 To: 10-28-13	
Contact Name: Mandy Oliveira		Contact Phone #: (916) 372-1434	
Contact Email Address: moliveira@wallace-kuhl.com			
B. Project Name: San Ramon Valley High School Bleachers		DSA App. #: (If applicable.) 01-112865	
Location: Danville, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: San Ramon Valley USD		Dates worked on this project From: 08-21-13 To: 09-04-13	
Contact Name: Rick Kendrick		Contact Phone #: (925) 552-5500	
Contact Email Address: rkendrick@srvusd.net			
C. Project Name: Franklin High School Shade Structure		DSA App. #: (If applicable.) 02-111216	
Location: Stockton, CA		Inspection type: <input type="checkbox"/> Periodic <input checked="" type="checkbox"/> Continuous	
Discipline: <input type="checkbox"/> Masonry <input type="checkbox"/> Shotcrete <input checked="" type="checkbox"/> Other: Welding Inspection			
Employer: Wallace-Kuhl & Associates		Dates worked on this project From: 07-31-13 To: 08-28-13	
Contact Name: Karlton Windhorst		Contact Phone #: (209) 234-7722	
Contact Email Address: kwindhorst@wallace-kuhl.com			

SPECIAL INSPECTOR QUALIFICATION AND APPROVAL

DSA File #: 57- H3	DSA App. #: 02 - 114706
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4. SPECIAL INSPECTOR'S AFFIDAVIT

I hereby certify under penalty of perjury that all information on this form is true, and I agree and understand that any misstatement of material fact contained in this form will be sufficient cause for withdrawal of my DSA approval for this project.

If appointed, I will accept the responsibilities of special inspector and will perform the duties as prescribed by Education Code Sections 17280-17316 (for public schools) or 81130-81147 (for community colleges), or Health and Safety Code Sections 16000-16023 (for essential services buildings).

Signature: *Tiphony Hulse* Print Name: Tiphony Hulse Date: 9-23-14
 Title: Special Inspector

5. SCHOOL DISTRICT/OWNER'S AFFIDAVIT

The special inspector named on this form is being employed individually and directly by the School District/Owner, conditioned upon acceptance by the architect or structural engineer in general responsible charge, and approval by the Division of the State Architect (DSA). This individual is to provide competent, adequate special inspection (as described in Sections 3 and 4 above) during construction of this project. I understand that the special inspector will act under the direction of the project architect or structural engineer in general responsible charge. The special inspector shall be directly responsible to the School District/Owner.

Signature: _____ Print Name: _____ Date: _____
 Title: _____

6. AFFIDAVIT OF DESIGN PROFESSIONAL IN GENERAL RESPONSIBLE CHARGE

I find the Special Inspector named on this form to be suitably qualified and satisfactory to perform special inspection on this project. Per CCR Part 1, Section 4-335(f) 1B, I have personally verified this individual possesses the training, education, experience, and certification necessary to perform the special inspection indicated above. I will monitor the Special Inspector's activities to assure his/her work is performed in accordance with the requirements of the DSA approved construction documents, and applicable codes and standards. I will verify that the Special Inspector properly documents his/her activities and that reports are distributed as required.

My assessment is based on: Interview: (Date of interview.) _____ OR Prior Professional Relationship.

Signature: _____ Print Name: _____ Date: _____

7. AFFIDAVIT OF STRUCTURAL ENGINEER
(Complete when structural work is delegated to Structural Engineer on line 25a of form DSA 1.)

I find the Special Inspector named on this form to be suitably qualified and satisfactory to perform inspection on this project. Per CCR Part 1, Section 4-335(f) 1B, I have personally verified this individual possesses the training, education, experience, and certification necessary to perform the special inspection indicated above. I will monitor the Special Inspector's activities to assure his/her work is performed in accordance with the requirements of the DSA approved construction documents, and applicable codes and standards. I will also verify that the Special Inspector properly documents all his/her activities and that reports are distributed as required by code.

My assessment is based on: Interview: (Date of interview.) _____ OR Prior Professional Relationship.

Signature: _____ Print Name: _____ Date: _____

APPROVAL BY DIVISION OF THE STATE ARCHITECT	Signature of DSA Field Engineer:	
	Print Name:	Date:

Submit this form electronically to the DSA Regional Office with construction oversight authority for the project:

<input type="checkbox"/> DSA OAKLAND Oakfielddocs@dgs.ca.gov	<input type="checkbox"/> DSA SACRAMENTO Sacfielddocs@dgs.ca.gov	<input type="checkbox"/> DSA LOS ANGELES LAfielddocs@dgs.ca.gov	<input type="checkbox"/> DSA SAN DIEGO SDfielddocs@dgs.ca.gov
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