

PURCHASE ORDER REQUEST - REQUIRED DOCUMENTS MATRIX

Vendor: _____ (SB 854 Compliant)

Project: _____

\$ _____

	TYPE C: TYPE A & B						
	TYPE A: Materials / Services		TYPE B: Labor / Installation				
	1A) <\$4,999	2A) \$5,000 - \$44,999	1B) <\$500	2B) \$500 - \$999	3B) \$1,000 - \$4,999	4B) \$5,000 - \$24,999	5B) > \$25,000
POR PACKAGE DOCUMENTS							
<input type="checkbox"/> Purchase Order Request Form	☑	☑	☑	☑	☑	☑	☑
<input type="checkbox"/> Proposal - to include company name, license #, address, phone #, fax #, & quote #	☑	☑	☑	☑	☑	☑	☑
<input type="checkbox"/> Project Info for DIR Registration Form (PWC -100 Form)							☑
<input type="checkbox"/> Agreement (signed)			☑	☑	☑	☑	☑
<input type="checkbox"/> Certificates of Liability Insurance CURRENT (General Liability, Auto, Workers Compensation)			☑	☑	☑	☑	☑
<input type="checkbox"/> W-9 (Required for NEW District Vendor & New Vendor Form)	Required for NEW Vendor Only						
<input type="checkbox"/> Contractor's License Website https://www2.cslb.ca.gov/OnlineServices/CheckLicense/checklicense.aspx			☑	☑	☑	☑	☑
<input type="checkbox"/> Contractor'S Proof of DIR Registration form DIR Website Contractor's Proof of DIR Registration from DIR Website			☑	☑	☑	☑	☑
<input type="checkbox"/> 1 Additional Proposal + 1 Government Estimate (CM Estimati		☑	☑	☑	☑	☑	☑
<input type="checkbox"/> Public Works Project Requirements & Documents (each page must be initialed)				☑	☑	☑	☑
<input type="checkbox"/> Tobacco-Free Schools BP 3513.3 (Initialed)				☑	☑	☑	☑
<input type="checkbox"/> Contractor's Certificate Regarding Drug-Free Workplace				☑	☑	☑	☑
<input type="checkbox"/> Contractor's Certificate Regarding Alcoholic Beverage, Illegal Drugs and Tabaco-Free Campus Policy				☑	☑	☑	☑
<input type="checkbox"/> Insurance Requirements Form (Initialed)				☑	☑	☑	☑
<input type="checkbox"/> California Prevailing Wage Requirements for all jobs >\$1,000 (Initialed)				☑	☑	☑	☑
<input type="checkbox"/> Santa Monica Municipal Code Article 4 Public Welfare, Morals & Policy (Initialed)*				☑	☑	☑	☑
<input type="checkbox"/> Malibu Municipal Code Title 8 Health & Safety Chapter 8.24 Noise (Initialed)**				☑	☑	☑	☑
<input type="checkbox"/> SMMUSD Instructions to Contractors (Initialed)				☑	☑	☑	☑
<input type="checkbox"/> Contractor's Certificate Regarding Worker's Compensation				☑	☑	☑	☑
<input type="checkbox"/> Payment Bond (California Public Works) (Initialed) (only if over \$25K - remove the 3 pages if under \$25K)							☑
<input type="checkbox"/> Department of Industrial Relations Registration Requirement Form			☑	☑	☑	☑	☑
<input type="checkbox"/> Purchase Order Instructions to Vendors				☑	☑	☑	☑
<input type="checkbox"/> Certification Pursuant to Education Code §45125.1				☑	☑	☑	☑
<input type="checkbox"/> References				☑	☑	☑	☑
<input type="checkbox"/> Disabled Veteran Business Enterprise ("DVBE") Participation Goal (Initialed)				☑	☑	☑	☑
<input type="checkbox"/> Certification - Participation of Disabled Veteran Business Enterprises				☑	☑	☑	☑
<input type="checkbox"/> DVBE Participation Report				☑	☑	☑	☑

* Only required for work within Santa Monica city limits

** Only required for work within Malibu city limits

If Document is not required REMOVE from package before submitting