

WALK THROUGH
CHANNEL RIGHT OF WAY CLEARING SERVICES – EAST AREA (2009-AN018)
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
THURSDAY, MAY 21, 2009, AT 9 A.M., LONGDEN YARD

Please print clearly and leave your business card.

Page 1 of 4

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Tree Pros Inc Company Name	Gus Cardero Attendee's Name	Mailing Address: P.O. Box 1066 City: Chino State: CA Zip: 91708 Telephone Number: (909) 548-0033 FAX: (909) 606-2107 E-Mail Address: gus@treepros.com
Waxcel Construction Company Name	MARC Wager Attendee's Name	Mailing Address: 3214 OAK DELL RD City: Studio City State: CA Zip: 91604 Telephone Number: (818) 762-8053 FAX: (818) 769-9088 E-Mail Address: WAXELAN@aol.com
Oraco Landscaping Company Name	Carlos Orozco Attendee's Name	Mailing Address: 419 East end Ave City: Banning State: CA Zip: 91766 Telephone Number: (909) 623-8287 FAX: (909) 469-0634 E-Mail Address: carlos@banninglandscape.com
Trimming Land Co. Inc. Company Name	Joe Antonio Martinez Attendee's Name	Mailing Address: 10513 Dolores Ave City: South Gate State: CA Zip: 90280 Telephone Number: (323) 569-4498 FAX: (323) 569-3747 E-Mail Address: TrimmingLCO@sbcglobal.net
California Arbor Company Name	Brad Karsen Attendee's Name	Mailing Address: 3812 Franklin S AVE City: Chino State: CA Zip: 91710 Telephone Number: (909) 590-4100 FAX: ()

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COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
S.C. Yamamoto, Inc. Company Name	Cole L. Aakaki Attendee's Name Director of water & environmental sciences Title	Mailing Address: 2031 Emery Ave City: La Habra State: CA Zip: 90631 Telephone Number: 714, 992-5783 FAX: (562) 690-1546 E-Mail Address: SCYJUNIOR@AOL.COM
United Pacific Services Company Name	ERIC L. FRANKLIN Attendee's Name Exec. V.P. Title	Mailing Address: 120 E. LA HABRA BLVD. STE City: LA HABRA State: CA Zip: 90631 Telephone Number: (562) 691-4600 FAX: (562) 691-8835 E-Mail Address: eric@UNITEDPAC.COM
TreSmith Enterprises Company Name	Terry Hunter Attendee's Name Contract Administrator Title	Mailing Address: 1551 N. MILLER City: Anaheim State: CA Zip: 92806 Telephone Number: (714) 996-6057 FAX: (714) 996-6057 E-Mail Address: info@tre-smith.net
Certified Tree Care Company Name	Joe Navarro Attendee's Name Area Manager Title	Mailing Address: 2298 N. BATAVIA ST City: Orange State: CA Zip: 92865 Telephone Number: (714) 279-8119 FAX: (714) 279-8133 E-Mail Address: lchaidze@earthlink.net
Mariposa Landscapes Inc. Company Name	Dennis Jones Attendee's Name MANAGER Title	Mailing Address: 15529 ARROW HWY City: IRVINE State: CA Zip: 92706 Telephone Number: (626) 960 0196 FAX: (626) 960 8477 E-Mail Address: DENND@MARIPOSA-LANDSCAPE.COM

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<u>OAKRIDGE LANDSCAPE</u> Company Name	<u>FERNANDO RAMOS</u> Attendee's Name	Mailing Address: <u>8616 HASSELL AVE</u> City: <u>NORTH HILLS</u> State: <u>CA</u> Zip: <u>91343</u> Telephone Number: <u>(818) 891-0408</u> FAX: <u>(818) 892-9273</u> E-Mail Address: <u>FERNANDO@OAKRIDGELANDSCAPE.NET</u>
<u>OAKRIDGE LANDSCAPE</u> Company Name	<u>EDWIN VARGAS-SOPEN</u> Attendee's Name	Mailing Address: <u>8616 HASSELL AVE</u> City: <u>NORTH HILLS</u> State: <u>CA</u> Zip: <u>91343</u> Telephone Number: <u>(818) 891-0408</u> FAX: <u>(818) 892-9273</u> E-Mail Address: _____
<u>WCA</u> Company Name	<u>MANUEL PEREZ</u> Attendee's Name	Mailing Address: <u>2200 E. Via Burton ST</u> City: <u>ANAHEIM</u> State: <u>CA</u> Zip: <u>92806</u> Telephone Number: <u>(714) 991-1900</u> FAX: <u>(714) 956-3745</u> E-Mail Address: <u>MPEREZ@WCAINC.COM</u>
<u>WCA</u> Company Name	<u>CYNTHIA</u> Attendee's Name	Mailing Address: <u>10000</u> City: <u>CA</u> State: <u>CA</u> Zip: <u>928</u> Telephone Number: <u>(910) 325 1706</u> FAX: <u>()</u> E-Mail Address: <u>CYNTHIA@YELPO.COM</u>
<u>Washington Grove Mgmt</u> Company Name	<u>Kyle L. Williams</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: _____ FAX: _____ E-Mail Address: _____
<u>Washington Grove Mgmt</u> Company Name	<u>Supervisor</u> Attendee's Name	Mailing Address: _____ City: _____ State: _____ Zip: _____ Telephone Number: _____ FAX: _____ E-Mail Address: _____

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Dworsky One Inc Company Name	1659 W. 9th St Attendee's Name U. P. vs operator Title	Mailing Address: 1659 W. 9th St City: Ogden State: UT Zip: 84202 Telephone Number: (909) 946-3196 FAX: (909) 946-3820 E-Mail Address: leon.vib@cedwardskysewices.com
United Pacific Services Company Name	leo Ramker Attendee's Name Supervisor Title	Mailing Address: 5529 Leeds St City: SOUTH GATE State: CA Zip: 90280 Telephone Number: (562) 691-4800 FAX: (562) 691-8839 E-Mail Address: leo@unitedpac.com
Fox East Landscape Company Name	Tony Moon Attendee's Name President Title	Mailing Address: P.O. Box 75035 City: State: Zip: Telephone Number: () () FAX: () E-Mail Address:
Company Name	Attendee's Name	Mailing Address: City: State: Zip: Telephone Number: () () FAX: () E-Mail Address:
Name of Parent Company (if Applicable)	Title	
Company Name	Attendee's Name	Mailing Address: City: State: Zip: Telephone Number: () () FAX: () E-Mail Address:
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