AS-NEEDED UNDERGROUND STORAGE TANK DESIGNATED OPERATOR SERVICES MONDAY AUGUST 3 2015, AT 10:00 A.M., CONFERENCE ROOM D LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS

Please print clearly and leave your business card.

Page 1 of 3

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
Company Name	Attendee's Name	Mailing Address: 3755 W Kethys burg City: Fresho State: Ct Zip: 93722
Name of Parent Company (if Applicable)	Junu SCA mle	Telephone Number: (557) 371-3300 FAX: (559)277-00555 E-Mail Address: WWW, Rumer CC, Com
LNICK TECH TELESTES TAK	HARREE JEMNSON	Mailing Address: 13145 Mora Dr., Unit 7 City: Sant te Springs State: 4 Zip: 40760
Name of Parent Company (if Applicable)	Act Solve & MKts	Telephone Number: (565)777-2300 FAX: (565)777-330/ E-Mail Address: 0)0h17507608000000000000000000000000000000000
Company Name SMices, In Company Name	attendee's Name	Mailing Address: 10250 Merchan Rd. City: Pale Shell state: CH zip: 93314
Name of Parent Company (if Applicable)	Thief Designated aperated	Telephone Number: (80)339-9930_FAX: () E-Mail Address (2+he1) he is US+ Services. Com.
Company Name	Attendee's Name	Mailing Address: 25971 JOLOUR (FUTTO) - City: Frostwill Rand State: CA Zip: 92610
Name of Parent Company (if Applicable)	Parject Manneyer	Telephone Number: (949) 460 5200 FAX: (949 960 5210
Flaminy Anymanantul	DIAN MANINA Attendee's Name	Mailing Address: 1372 E. VIUDNIM DC. City: FUNCTON State: CA Zip: 97.831
Name of Parent Company (if Applicable)	ADKIT BOHMUNIC	Telephone Number: 114 871-2800 FAX: 714 871-2801 E-Mail Address: 0716Min/A & Planina Can Commontal, Que

AS-NEEDED UNDERGROUND STORAGE TANK DESIGNATED OPERATOR SERVICES HONDAY A

Please print clearly and leave your busine

Pageof			ess card.
)	OM D	M., CONFERENCE RO	AUGUST 3 2015, AT 10:00 A.M., CONFERENCE ROOM D
	XS	ENT OF PUBLIC WOR	NGELES COUNTY DEPARTMENT OF PUBLIC WORKS
		PENGNA FED CTEXA	RGROUND STORAGE TANN DESIGNATED OFFINALON SERVICES

Name of Parent Company (if Applicable)	Company Name	Company Name Name of Parent Company (if Applicable)	Company Name Name of Parent Company (if Applicable)	Applicable)	COMBANY NAME
Title	Attendee's Name	Attendee's Name	Attendee's Name	Maurici d Javamilla Attendee's Name Attendee's Name Attendee's Name Troject Manages	NAME OF PERSON ATTENDING
E-Mail Address:	Mailing Address: City: State: Zip: Telephone Number: { } FAX: { }	Mailing Address: City: State: Zip: Telephone Number: FAX:)	Mailing Address: City: State: Zip: Telephone Number: () FAX: () E-Mail Address:	Mailing Address: Krijakam; No e drobersty enviro kom City: Lin State: Ch zip: 90045 E-Mail Address: 5261 W Imperial Hwy City: los Angeles State: CA zip: 90045 Telephone Number: (310, 854-8300 FAX: (310, 854-0199) E-Mail Address: M Jaramillo e ander Sen enviro.com	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS

AS-NEEDED UNDERGROUND STORAGE TANK DESIGNATED OPERATOR SERVICES **PROPOSERS' CONFERENCE**

Please p

LOS MOND <i>A</i>	LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS MONDAY AUGUST 3 2015, AT 10:00 A.M., CONFERENCE ROOM D	NT OF PUBLIC WORKS ., CONFERENCE ROOM D
rint clearly and leave your business card.	iness card.	Page <u></u> of <u></u>
COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
CCES. INC.	JOHN MADAD DOUST	Mailing Address: 2034 COTNER ANT STE 408
Company Name	Attendee's Name 7 coie of Manager.	Telephone Number: (310) 479 7183 FAX: (310) 479 1286
ame of Parent Company (if Applicable)	Title	E-Mail Address: Tdoyst @ acces engineering com

A.C.E.S. INC. Company Name Name of Parent Company (if Applicable)	JoHN MADAD DOUST Attendee's Name Project Manager.	Mailing Address: LOSH COTNEK HUL SIE 400 City: LOS ANDELES State: LA Zip: 90025 Telephone Number: (310) 4797183 FAX: 310) 4791286 E-Mail Address: FLAUSH @ Accessory reging com
Aba Centrallance Tonk lost was Name of Parent Company (if Applicable)	Attendee's Name	Mailing Address: P.O. Box 2155 City: Santa Pantana State: CA zip: 93120 Telephone Number: 25, 667-640 FAX: () E-Mail Address: hankerson@ cox. net
		Mailing Address:
Company Name	Attendee's Name	City:
Name of Parent Company (if Applicable)	Title	E-Mail Address: Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
Name of Parent Company (if Applicable)	Title	E-Mail Address: Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
Name of Parent Company (if Applicable)	Title	E-Mail Address:

PROPOSERS' CONFERENCE AS-NEEDED UNDERGROUND STORAGE TANK DESIGNATED OPERATORS SERVICES

Please print clearly and

Page of	d leave your business card.
	MONDAY AUGUST 3 2015 AT 11:00 A.M., WALK THROUGH
	LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
CITO	NEEDED ONDERGROOND WICKAGE LANS DEGIGNALED OFFISH OFFISH

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
HEMING BALLOMMERTHAL COMPANY Name	Attendee's Name	Mailing Address:State:Zip:
Name of Parent Company (if Applicable)	project andinase	Telephone Number: () FAX: () E-Mail Address:
Anderson Environment	Mouricio Jaramillo	Mailing Address:State:Zip:
Name of Parent Company (if Applicable)	Project Manage	Telephone Number: () FAX: () E-Mail Address:
Enview Technologies Company Name	Attendee's Name	Mailing Address: City: Telephone Number: () FAX: ()
		Mailing Address:
Company Name	Attendee's Name	City: State: Zip: Telephone Number: () FAX: (
Name of Parent Company (if Applicable)	litte	E-Mail Address: Mailing Address:
Company Name	Attendee's Name	City: Zip: Telephone Number: FAX:
Name of Parent Company (if Applicable)	Title	E-Mail Address:

AS-NEEDED UNDERGROUND STORAGE TANK DESIGNATED OPERATORS SERVICES LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS MONDAY AUGUST 3 2015 AT 11:00 A.M., WALK THROUGH

Please print clearly and leave your business card.

ρ
age
103
1, 3
으
[(, .
100

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
BERMINE ENY. Services	Ger Vander Veza	ا محدد
Company Name Name of Parent Company (if Applicable)	Attendee's Name	Telephone Number: (949) 4605200 FAX: (744)
Company Name Company Name Company Name	JACK Meders Name	Mailing Address: City: State: Zip:
Name of Parent Company (if Applicable)	Title	Telephone Number: () FAX: ()
Space (me Enterprises)	Robert Hamkonson	Mailing Address: P.O. Book 2155 City: Samba Parthana State: Zip:
Name of Parent Company (if Applicable)	Title	Telephone Number: () FAX: () E-Mail Address:
		Mailing Address:
Company Name	Attendee's Name	City: State: Zip: Telephone Number: (FAX: ()
Name of Parent Company (if Applicable)	Trtle	E-Mail Address:
		Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
Name of Parent Company (if Applicable)	Title	E-Mail Address:

AS-NEEDED UNDERGROUND STORAGE TANK DESIGNATED OPERATORS SERVICES LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS MONDAY AUGUST 3 2015 AT 11:00 A.M., WALK THROUGH

Please print clearly and leave your business card.

Page	
() ()	\
今	
$ \mathcal{N} $)

COMPANY NAME	NAME OF PERSON ATTENDING	MAIL/PHONE/FAX NUMBERS & E-MAIL ADDRESS
W SON BELST BOUNDS	Attender's Name Attender's Name Attender's Name	Mailing Address: 16250 Meacham Colorin: Bakersheld state: CH zip:43314 Telephone Number: 600-336-46200.
Name of Parent Company (if Applicable)		E-Mail Address LATTENTICAL USTSTUCES : COM
A CCES IN C Company Name	John Madad Dost Attendee's Name	Mailing Address: State: Zip:
Name of Parent Company (if Applicable)	Projet Manager.	Telephone Number: (FAX: () E-Mail Address:
		Address:
Company Name	Attendee's Name	City: State: Zip: Telephone Number: () FAX: ()
Name of Parent Company (if Applicable)	Title	E-Mail Address:
		Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
Name of Parent Company (if Applicable)	Title	E-Mail Address:
		Mailing Address:
Company Name	Attendee's Name	City: State: Zip:
Name of Parent Company (if Applicable)	Title	E-Mail Address: