



# HERE'S OUR OFFICIAL PROPOSAL

BY REINMANPRO

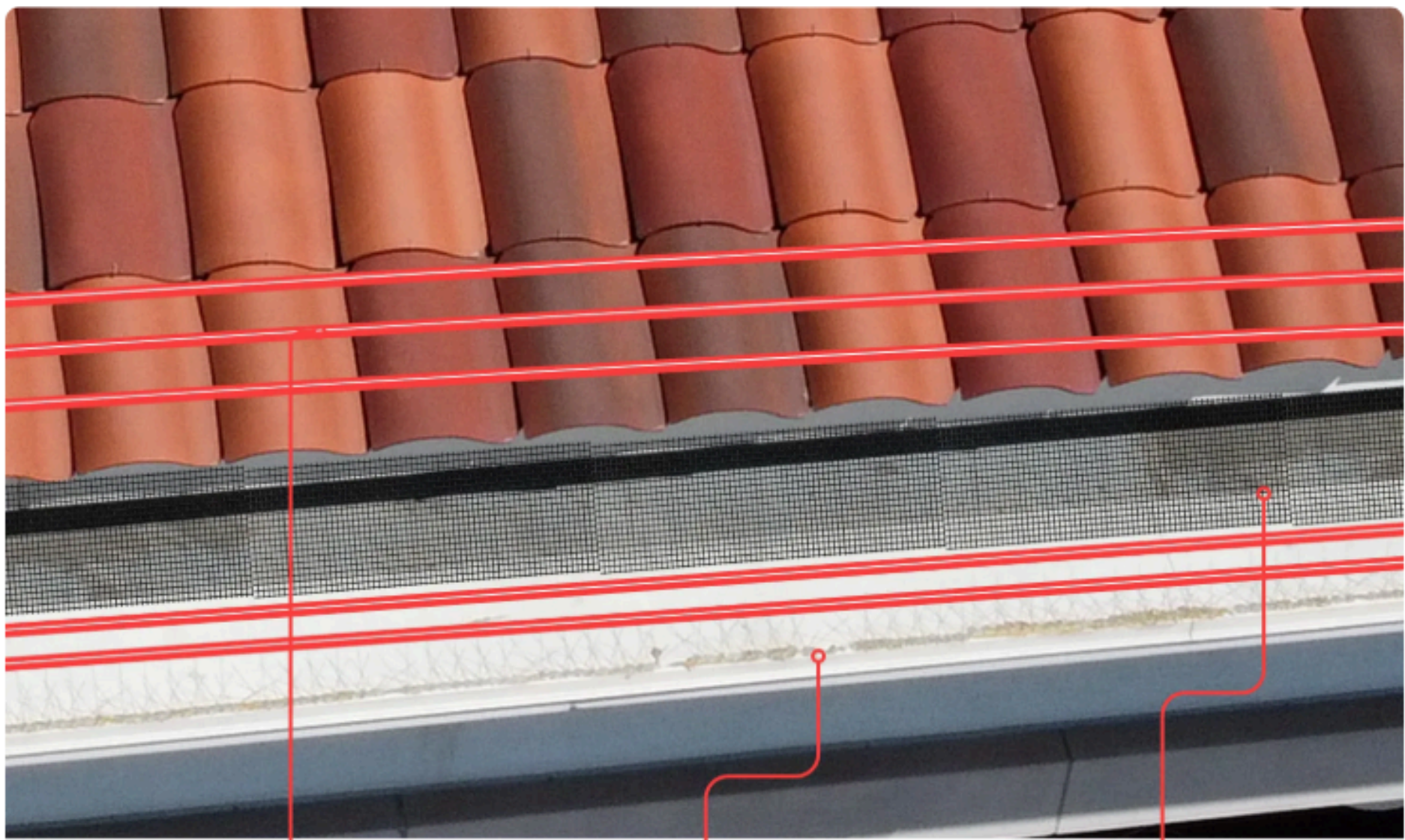
## INTRODUCING OUR TEAM



# THIS IS OUR TEAM

BY REINMANPRO

# OUR STRATEGIC PLANNING PROCESS



**BIRD SHOCK**

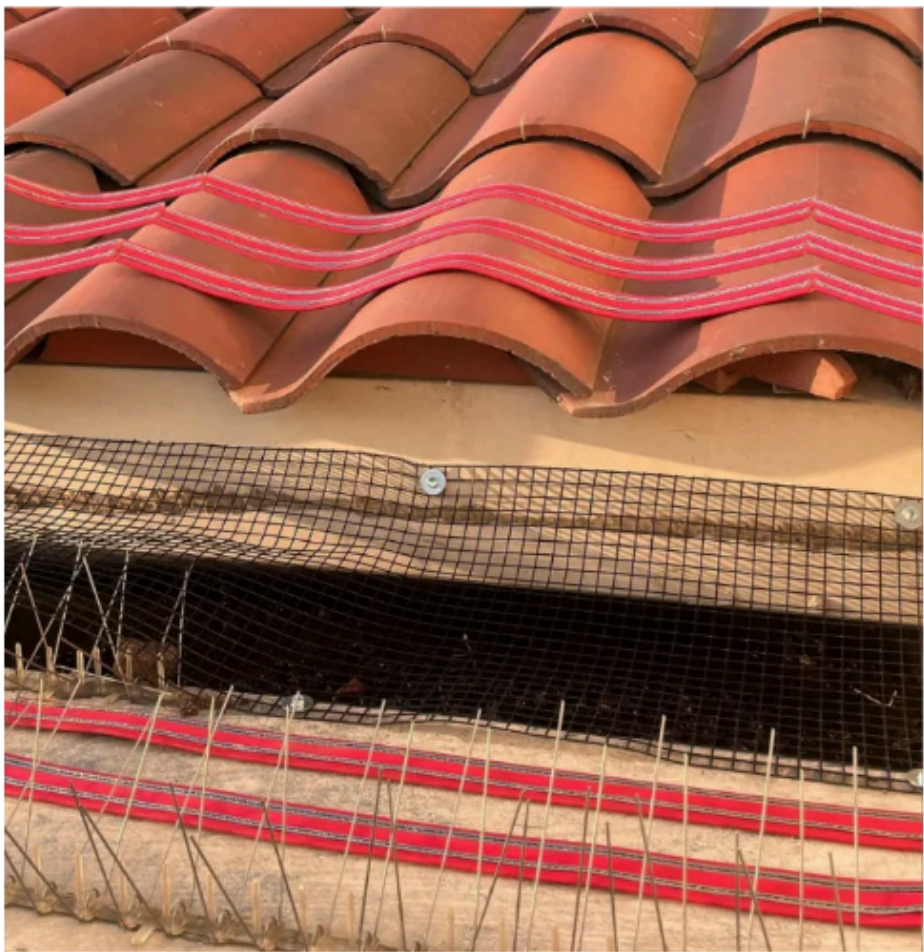


**EXISTING BIRD SPIKES**  
(Previous job)



**WIRE MESH**

## WORK PLAN OVERVIEW



### 1. Without Wiremesh Hinge

#### Fixed Wiremesh Attachment

A secure, permanent installation of wiremesh using self-tapping screws to block pigeon access. Best for areas where routine gutter cleaning is not a concern.



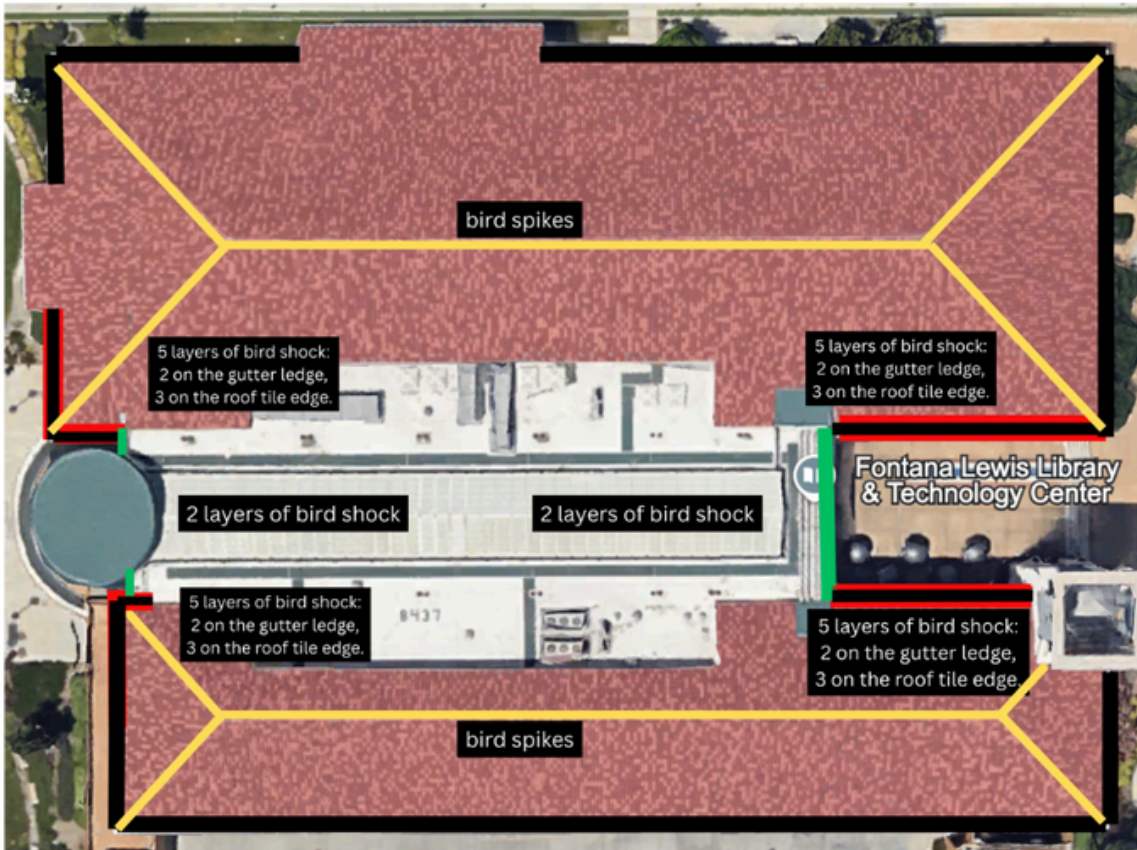
### 2. With Wiremesh Hinge

#### Hinged Wiremesh for Easy Gutter Access

Wiremesh is mounted with a piano hinge and secured to the fascia board, allowing convenient opening for gutter cleaning and ongoing maintenance while still preventing pigeons from nesting.



# PARTIAL COVERAGE INSTALLATION



PLAN A

FRONT AND BACK FACADE

YELLOW LINE- BIRD SPIKES

RED LINE - 5 LAYERS OF BIRD SHOCK

GREEN LINE - 2 LAYERS OF BIRD SHOCK

BLACK LINE - GUTTER PROOFING

ADDITIONAL BIRD SPIKES AT  
FACADE’S TOP RAILINGS



PLAN A

PARTIAL  
COVERAGE INSTALLATION



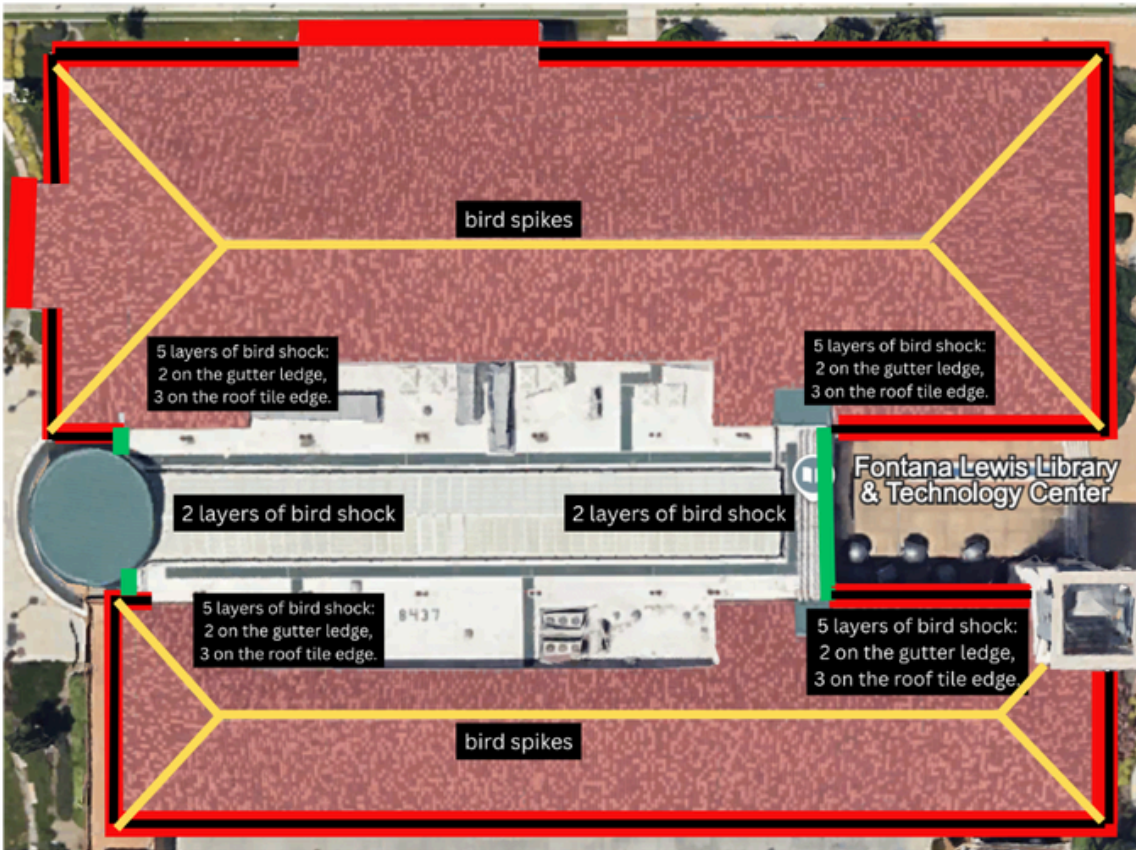
Package A - (PLAN A) Fixed Wire mesh Attachment	Package B (PLAN A) (Hinged Wire mesh for Easy Gutter Access)
Gutter proofing <b>without wire mesh hinge</b> - <b>Black line</b>	Gutter proofing <b>with wire mesh hinge</b> - <b>Black line</b>
5 layers of Bird shock - <b>Red line</b>	5 layers of Bird shock - <b>Red line</b>
2 layers of Bird shock - <b>Green line</b>	2 layers of Bird shock - <b>Green line</b>
Roof ridge Bird spikes installation - <b>yellow line</b>	Roof ridge Bird spikes installation - <b>yellow line</b>
Re cleaning of the Gutter (Facade)	Re cleaning of the Gutter (Facade)
Additional spikes for facade top railings	Additional spikes for facade top railings
2 Bird audio deterrents (Facade)	2 Bird audio deterrents (Facade)
Prevailing wage	Prevailing wage
Package A \$99,184	Package B \$118,826

For the best viewing experience of your personalized proposal, please visit the link below:

<https://reinmanpro.com/fontana-lewis-library-and-technology-center-bird-shock/>



# FULL COVERAGE INSTALLATION



PLAN B  
FRONT AND BACK FACADE

YELLOW LINE- BIRD SPIKES

RED LINE - 5 LAYERS OF BIRD SHOCK

GREEN LINE - 2 LAYERS OF BIRD SHOCK

BLACK LINE - GUTTER PROOFING

ADDITIONAL BIRD SPIKES AT  
FACADE’S TOP RAILINGS



PLAN B

FULL COVERAGE INSTALLATION



Package C - (PLAN B) Fixed Wire mesh Attachment	Package D (PLAN B) (Hinged Wire mesh for Easy Gutter Access)
Gutter proofing <b>without wire mesh hinge</b> - Black line	Gutter proofing <b>with wire mesh hinge</b> - Black line
5 layers of Bird shock - Red line	5 layers of Bird shock - Red line
2 layers of Bird shock - Green line	2 layers of Bird shock - Green line
Roof ridge Bird spikes installation - yellow line	Roof ridge Bird spikes installation - yellow line
Re cleaning of the Gutter (Facade)	Re cleaning of the Gutter (Facade)
Additional spikes for facade top railings	Additional spikes for facade top railings
2 Bird audio deterrents	2 Bird audio deterrents
Prevailing wage	Prevailing wage
Package A \$214,960	Package B \$238,920

For the best viewing experience of your personalized proposal, please visit the link below:

<https://reinmanpro.com/fontana-lewis-library-and-technology-center-bird-shock/>

## ReinmanPro Inc. – City Project Bird Proofing Terms & Conditions

Phone: (951) 260-2561

Effective Date: May 6, 2025

### 1. Scope of Work

ReinmanPro Inc. agrees to provide professional bird proofing services for city-owned property as outlined in the approved estimate or contract. Scope includes custom fabrication and installation of wire mesh on large gutter systems to prevent pigeon nesting, installation of a piano hinge for maintenance access (optional), and installation of bird deterrent shock systems along roof ledges and tile edges powered by solar chargers. Service includes secure fastening and may involve drilling into fascia boards or metal sheets as necessary for proper installation. The Client acknowledges and authorizes such drilling as part of the approved scope of work and accepts associated liability.

### 2. Custom Installation Details

Due to the unique size of the gutter system, ReinmanPro Inc. will fabricate a customized wire mesh solution to fit precisely within the gutter. The client may choose from two installation options:

- With Piano Hinge: Allows easy access for maintenance and gutter cleaning. The hinge enables the mesh to be lifted without full removal.
- Without Piano Hinge: Wire mesh will be fixed securely using self-tapping screws. To access the gutter for cleaning, the mesh must be unscrewed and removed, then reinstalled afterward.

Bird shock systems will be installed along high-traffic bird landing zones and will be powered by solar energy for consistent and eco-friendly operation.

### 3. Final Walk-Through & Documentation

Upon project completion, ReinmanPro Inc. will conduct a walk-through with the city representative and provide detailed photo documentation of all installed components. If a representative is unavailable, documentation will be submitted via email or uploaded to a shared folder as agreed.

### 4. Existing Property Conditions

ReinmanPro Inc. shall not be held responsible or liable for pre-existing conditions including but not limited to damaged gutters, deteriorated roofing, aging tile, prior nesting damage, or electrical inconsistencies unrelated to the installed solar-powered bird shock systems.

### 5. Payment Terms

Unless otherwise agreed in writing, payment is due within thirty (30) days of the invoice date. A 1.5% monthly late fee will apply to balances unpaid after forty-five (45) days and will be compounded monthly.

### 6. Warranty

ReinmanPro Inc. offers a 1-year labor warranty on all custom installations. Manufacturer warranties will apply to bird shock systems and solar-powered units as specified. This warranty does not cover:

- Damage caused by natural disasters (earthquakes, storms, floods, etc.)
- Interference from third-party contractors
- Vandalism or intentional tampering
- Damage resulting from lack of maintenance by the Client

The warranty is void if the system is removed, modified, or serviced by any party not authorized by ReinmanPro Inc.

### 7. Maintenance Access & Liability

ReinmanPro Inc. will install a piano hinge for gutter mesh access when selected by the Client. For fixed installations without a hinge, the mesh will be secured with self-tapping screws and must be manually removed for cleaning. The Client is responsible for any damage caused during third-party maintenance. ReinmanPro Inc. will not be held liable for repairs resulting from misuse or improper handling by non-ReinmanPro personnel. Additionally, by authorizing this installation, the Client accepts all liability related to necessary drilling into fascia boards or metal surfaces for secure attachment and acknowledges that such methods are required for a secure and lasting installation.

### 8. Site Access & Safety

The Client must ensure safe and clear access to work zones on scheduled service dates. All service areas must be cleared of obstructions and public access must be restricted for safety during installation.

### 9. Limitation of Liability

ReinmanPro Inc. is not liable for bird activity in areas not treated by our systems or for issues arising from deferred maintenance of city property. Our responsibility is limited to the components and systems we install.

### 10. Agreement

By approving the estimate, issuing a purchase order, or authorizing commencement of work, the Client agrees to all terms listed herein. Terms may be updated with written notice and will govern all work related to this project unless otherwise stated in writing.

  
Sincerely,  
Bill Amanga  
Company Manager  
Reinmanpro Inc



DATE (MM/DD/YYYY)

3/14/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

PRODUCER	CONTACT NAME: Customer Service Department	FAX (A/C, No): (800) 991-7453
Pike Insurance Services Inc	PHONE (A/C, No, Ext): (800) 411-7453	E-MAIL
3910 Vista Way	ADDRESS: certificates@pikeinsure.com	
Suite 107	INSURER(S) AFFORDING COVERAGE	NAIC #
Oceanside CA 92056	INSURER A: Obsidian Specialty Insurance Company	16871
INSURED	INSURER B :	
Reinmanpro LLC	INSURER C :	
6295 Umbra Road	INSURER D :	
	INSURER E :	
Banning CA 92220	INSURER F :	

## COVERAGES

**CERTIFICATE NUMBER: 25-26 GL MASTER**

**REVISION NUMBER:**

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE				ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS		
A	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY						SCB-GI-000082243	4/13/2025	4/13/2026	EACH OCCURRENCE	\$ 1,000,000
		<input checked="" type="checkbox"/>	CLAIMS-MADE	<input type="checkbox"/>	OCCUR	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000					
						MED EXP (Any one person)	\$ 5,000					
						PERSONAL & ADV INJURY	\$ 1,000,000					
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$ 2,000,000					
	<input checked="" type="checkbox"/>	POLICY	<input type="checkbox"/>	PRO-	<input type="checkbox"/>	LOC	PRODUCTS - COMP/OP AGG				\$ 2,000,000	
		OTHER:					\$					
	AUTOMOBILE LIABILITY									COMBINED SINGLE LIMIT (Ea accident)	\$	
	<input type="checkbox"/>	ANY AUTO			SCHEDULED					BODILY INJURY (Per person)	\$	
	<input type="checkbox"/>	ALL OWNED AUTOS		<input type="checkbox"/>						BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/>	HIRED AUTOS		<input type="checkbox"/>	AUTOS					PROPERTY DAMAGE (Per accident)	\$	
	<input type="checkbox"/>			<input type="checkbox"/>	NON-OWNED						\$	
		UMBRELLA LIAB			<input type="checkbox"/>	OCCUR				EACH OCCURRENCE	\$	
		EXCESS LIAB			<input type="checkbox"/>	CLAIMS-MADE				AGGREGATE	\$	
		DED	<input type="checkbox"/>	RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / N N / A									<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER		
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. EACH ACCIDENT	\$	
E.L. DISEASE - EA EMPLOYEE										\$		
E.L. DISEASE - POLICY LIMIT										\$		

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

## Verification of Coverage

**\*Subject to all policy terms, exclusions and conditions\***

**CERTIFICATE HOLDER**

## CANCELLATION

Verification Of Coverage	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  David Pike/ABDIA

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**ACORD 25 (2014/01)**  
**INS025 (201401)**

**The ACORD name and logo are registered marks of ACORD**



Policy Number:BA040000090121  
Effective Date: 04/02/2025



**Amended Declarations: Add Driver(s)**  
**This policy change has resulted in an additional premium of \$0.00**  
This declarations supersedes any previous declarations bearing the same number for this policy period

**BUSINESS AUTO DECLARATIONS**

For resolving issues or other information you can contact your agent or Mercury using the below phone numbers:

<b>Issued By:</b> California Automobile Insurance Company P.O. BOX 10730 SANTA ANA, CA 92711-0730 Billing: (888) 637-2176 Claims: (800) 503-3724	<b>Agent:</b> Auto Ins Specialists-CA PO BOX 10160 SANTA ANA, CA 927110160 Agent Number: 042792 Agent Phone: (800) 493-7879
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<b>ITEM ONE</b>	<b>GENERAL INFORMATION</b>
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**Named Insured:**REINMANPRO, INC.

**Mailing Address:**12 S SAN GORGONIO AVE, #203 FLOOR 2  
BANNING, CA 92220-6015

**Policy Period:**From 07/17/2024to 07/17/2025at 12:01 AM Standard Time at your mailing address

**Business Type:**Pressure Washing

**Business Category:** Services

**Form of Business:**Corporation

**Total Policy Premium:**\$19,979.28

This policy may be subject to final audit. In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

ENDORSEMENTS ATTACHED TO THIS POLICY	
IL 00 17 11 98 - Common Policy Conditions IL 00 21 09 08 - Nuclear Energy Liability Exclusion IL 00 03 09 08 - Calculation of Premium CA 00 01 10 13 - Business Auto Coverage Form CA 01 21 10 13 - Limited Mexico Coverage CA 01 43 05 17 - California Changes MIL 02 70 04 19 - California Changes - Cancellation and CA 23 94 10 13 - Silica or Silica Related Dust Exclusion IL N 119 10 15 - California Auto Body Repair Consumer Bill of MCA85100817-CA - Mercury Broadening Endorsement CA 04 44 10 13 - Waiver of Subrogation (Specified) CA 20 48 10 13 - Designated Insured	MCA 23 45 06 19 - Public or Livery Passenger Conveyance MCA 99 28 03 19 - Stated Amount Insurance MCANONFAC0516 - Permanently Attached Non-Factory MCA20760112 - Exclusion of Named Driver MCA 21 54 04 19 - California Uninsured Motorists - Bodily CA 21 55 10 13 - California Uninsured Motorists Coverage - CA 03 05 10 13 - California Changes - Waiver of Collision CA 04 24 10 13 - California Auto Medical Payments Coverage CA 99 23 10 13 - Rental Reimbursement Coverage MCA86100617 - Roadside Assistance Coverage CA 99 44 10 13 - Loss Payable Clause MCA AM END 04 19 - Amendatory Endorsement



# California Secretary of State

Business Programs Division  
1500 11th Street, Sacramento, CA 95814

Reinmanpro Inc.  
12 SOUTH SAN GORGONIO AVENUE  
#203 FLOOR 2  
BANNING, CA 92220

## Business Amendment Filing Approved

October 10, 2024

Entity Name: Reinmanpro Inc.  
Entity Type: Stock Corporation - CA - General  
Entity No.: 202251110442  
Document Type: Statement of Information  
Document No.: BA20241808020  
File Date: 10/10/2024

The above referenced document has been approved and filed with the California Secretary of State. To access free copies of filed documents, go to [bizfileOnline.sos.ca.gov](https://bizfileOnline.sos.ca.gov) and enter the entity name or entity number in the Search module.

### What's Next?

The most up to date records may be obtained by searching for the Entity Name or Entity Number in the Search module at [bizfileOnline.sos.ca.gov](https://bizfileOnline.sos.ca.gov).

For further assistance, contact us at (916) 657-5448 or visit [bizfileOnline.sos.ca.gov](https://bizfileOnline.sos.ca.gov).



Thank you for using [bizfile California](https://bizfileOnline.sos.ca.gov), the California Secretary of State's business portal for online filings, searches, business records, and additional resources.

See Specific Instructions on page 3.  
Print or type.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.  
**REINMANPRO INC**

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.  

☐ Individual/sole proprietor or single-member LLC

☐ C Corporation

☐ S Corporation

☐ Partnership

☐ Trust/estate

☐ Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) a \_\_\_\_\_  
**Note:** Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregardedT ef rxotm the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that code is disregarded from the owner should check the appropriate box for the tax classification of its owner.

☐ Other (see instructions) a \_\_\_\_\_

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
  
Exempt payee code (if any) \_\_\_\_\_  
  
Exemption from FATCA reporting (if any) \_\_\_\_\_  
  
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.  
**12 S San Gorgonio Ave 203 Floor 2**

6 City, state, and ZIP code  
**Banning CA 92220**

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I

Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.  
**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

-

-

or

Employer identification number

99

-

39

1

4

2

8

8

Part II

Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and

3. I am a U.S. citizen or other U.S. person (defined below); and


4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions.

You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here

Signature of U.S. person a



Date a

04-05-2025

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.  
**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).  
**Purpose of Form**  
An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)  
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.  
*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

Form 1099-DIV (dividends, including those from stocks or mutual funds)

Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)

Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)

Form 1099-S (proceeds from real estate transactions)

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Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)

Form 1099-C (canceled debt)

Form 1099-A (acquisition or abandonment of secured property)  
Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.  
*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

Cat. No. 10231X

Form **W-9** (Rev. 10-2018)