



CITY OF PENDLETON OREGON

CONTRACTOR'S PREQUALIFICATION APPLICATION

Effective September 1, 2018 through August 31, 2019

Filing Fee: \$25.00

Submit application and make check payable to:

City of Pendleton
Engineering Department
500 SW Dorion Avenue
Pendleton, OR 97801
541 966-0203

A. Date: _____ Valid Through: _____ 08-31-19

B. Application of: _____
Legal Business Name (Complete Section 8)

Assumed Business Name(s) (Complete Section 6)

List previous business names of your organization: _____

C. Business Structure (check one):

Specific Project (if applicable):

- Individual Sole Proprietorship
- General Partnership
- Corporation
- S-Corporation
- Foreign Corporation
- Limited Partnership (LP)
- Limited Liability Company (LLC)
- Limited Liability Partnership (LLP)

F. Project Title: _____

Bid Opening Date: _____

D. Joint Venture

E. Address:

Physical address, city, state, zip: _____

Mailing address, city, state, zip: _____

Phone: _____ Fax: _____

Contact Person: _____ Phone: _____

Email: _____ Fax: _____
(Person completing application)

Contact Person: _____ Phone: _____

Email: _____ Fax: _____
(Person to appear on Planholders list)

FOR OFFICE USE ONLY

Date Received: _____ Date Approved: _____ Expires: _____

KEEP THESE REFERENCE PAGES FOR YOUR RECORDS

In accordance with the statutes of the State of Oregon, every public contracting agency contemplating receiving bids for and awarding any contract for a public improvement may require any prospective bidder (**herein referred to as applicant**) to submit a full and complete statement concerning their equipment and experience in constructing public improvements. The City of Pendleton requires prequalification and is the public contracting agency in this instance utilizing this prequalification application and prequalification process. Further references to "public contracting agency" throughout this application are intended to be references to the City of Pendleton.

The application and questionnaire forms which are bound herewith comply with the requirements of public contracting rules and will be used in determining the qualifications of applicants and in assigning limits as to the size and kinds of projects for which the applicant may submit bids.

The applicant should use care, honesty and integrity in preparing this information. The public contracting agency may make independent inquiries concerning the contractor's past performance and capabilities.

Manner of Preparing and Filling in Forms:

This application shall include equipment and experience information for only the specific single business organization or entity which is applying for prequalification and which would be the signatory on a contract with the public contracting agency.

All answers and other entries on the forms, except signatures, should be typed or printed in ink. It is the responsibility of the applicant to return all pages whether applicable or not. Failure to do so may be grounds for denial of prequalification.

All answers and entries must be specific and complete in detail.

The prequalification application must be signed by the applicant and sworn to as the form indicates. The signatory of the statement certifies the truth and accuracy of all statements and of all answers to questions.

The original signed application must be sent to the Public Contracting Agency. Photocopy or fax signatures will not be accepted.

Use of Attachments:

Schedules, reports and other forms of prequalification statement may be used as attachments to the prescribed form, provided that the information contained therein specifically includes the information required by this form.

Place of Submission:

Prequalification applications shall be submitted to the City of Pendleton's Engineering Department at the address shown on the prequalification application.

Time of Submission:

Prequalification applications must be submitted to the City of Pendleton by 1:00 p.m. the day before the bid opening in which the applicant wishes to participate. The date on which all required information has been received by the City of Pendleton will be considered the receipt date of the prequalification application.

Appeal Due to Denial or Revocation of Prequalification:

In case the applicant's application for prequalification is denied or in case an existing prequalification is revoked, the applicant may appeal the denial or revocation in accordance with the rules adopted by the appropriate Public Contract Review Board.

Notification of Action Taken:

The applicant will be notified, in writing, of the action on their application.

Period During Which a Qualified Applicant Remains Qualified:

An applicant who has been notified of prequalification will remain qualified one year from the date the affidavit was signed and notarized.

Requirement of Continuing Prequalification:

Applicants who have once been qualified with an agency requiring prequalification and who desire to maintain an uninterrupted prequalification standing are required to submit a new application periodically as required by such agency. Uninterrupted prequalification is contingent upon favorable action on the application. A prequalification may be revoked under the provision of ORS 279C.430.

Changes:

Major changes must be submitted with a new prequalification application. Minor changes may be submitted by addendum to the public contracting agency.

Minor changes include, but are not limited to:

- changing an address
- company name
- adding or deleting classes of work
- changing an officer

Major changes may include, but are not limited to:

- a change in business structure
- acquisition of another company
- disposal of a major portion of assets
- major ownership changes and
- substantial changes in the company's ability to perform types or amounts of work

Any change to an applicant's prequalification application must be received at the address shown in the prequalification application by 1:00 p.m. the day before the bid opening if that information affects the bid submitted. Any changes requested by the applicant must be submitted and signed by the same person who signed the original application or by a person holding the same position as the person who signed the original application.

Contact the Public Contracting Agency for specific procedures when there are changes to the information submitted in the application.

Requests for revision of the prequalification standing of any applicant will be considered whenever the applicant can make a showing of materially improved ability, but not more often than once in three months.

Joint Venture:

A public contracting agency may adopt special requirements concerning joint ventures. Before submitting a joint venture application, an applicant should ascertain if special instructions are applicable and obtain them from the designated public officer.

Jurisdiction:

ORS 279C.430(2) states: When a contracting agency permits or requires prequalification of bidders, a person who wishes to prequalify shall submit a prequalification application to the contracting agency on a standard form prescribed under subsection (1) of this section. Within thirty (30) days after receipt of a prequalification application, the contracting agency shall investigate the applicant as necessary to determine if the applicant is qualified. The determination shall be made in less than thirty (30) days, if practicable, if the applicant requests an early decision to allow the applicant as much time as possible to prepare a bid on a contract that has been advertised. In making its determination, the contracting agency shall consider only the applicable standards of responsibility listed in ORS 279C.375(3)(b). The agency shall promptly notify the applicant whether or not the applicant is qualified.

Nonresident Bidders:

ORS 279A.120(3) states: When a public contract is awarded to a nonresident bidder and the contract price exceeds \$10,000, the bidder shall promptly report to the Department of Revenue (DOR) on forms to be provided by the department the total contract price, terms of payment, length of contract and such other information as the department may require before the bidder may receive final payment on the public contract. The contracting agency shall satisfy itself that the requirement of this subsection has been complied with before the contracting agency issues a final payment on a public contract.

For information about DOR requirements contact: http://www.oregon.gov/DOR/BUS/contact_us.shtml

NOTICE: APPLICANT MUST ANSWER ALL SECTIONS AND QUESTIONS IN THIS APPLICATION. FAILURE TO DO SO WILL RESULT IN THE APPLICATION BEING RETURNED TO THE APPLICANT FOR COMPLETION.

**INSTRUCTIONS FOR COMPLETING THE CITY OF PENDLETON
PREQUALIFICATION APPLICATION**

To be eligible to bid, an application must be completed in its entirety and **received by the City 1:00 p.m. the day before your first anticipated bid opening date.**

Forms and instructions may be obtained at www.pendleton.or.us/public-works/invitations-bid

GENERAL INFORMATION

- **All pages and sections must be completed and correct.** If not, the application will be returned by mail to the applicant for correction.
- **Do not use correction fluid or correction tape.**
- If accepted, an approval letter will be sent.
- **The correct form must be submitted. Outdated forms or pages will not be accepted.**
- Copied, faxed or emailed applications will be accepted; however, the City of Pendleton reserves the right to request original signatures verification.
- Prequalification is required for **prime contractors**. Subcontractors/suppliers do not need to prequalify.
- **If a section does not apply, enter “n/a”.**

Page 1

- A. Enter today's date.
- B. Application of, enter the **legal name** under which you wish to bid. An assumed business name (**complete Section 6**) is not a legal name; however, it can be used in conjunction with a legal name prefaced by “dba”. A separate Prequalification Application is required for each separate legal entity.
- C. Mark your business structure.
- D. If application is for a joint venture, mark the appropriate box. Contact CITY for additional information.
- E. Provide your physical address for courier use. Provide your mailing address, phone, fax number, business email address and a contact person. Provide contact information for person completing application and person to appear on Planholders list.
- F. Insert specific project title, if applicable, and the bid opening date.

Pages 5-9

Sections 1, 2, 3, 4, 5 and 6 as applicable, Business Structure:

If you have an assumed business name, you must complete Section 6. If you make a change in officers during the year, you must submit an addendum change form to the City.

Section 7(a), (b) and (c)

Page 10

Section 8, Licenses and Registrations:

Please read this section carefully and provide all requested information.

Section 9, Bonding:

Indicate the total amount of work (in dollars) you can be bonded for at any one time.

Section 10, Bid and Performance Bonds:

Provide requested information on the agent and surety company you **expect** to provide bonds. If you make a change in your surety company during the year, you must submit an addendum change form to the City.

Page 11

Section 11, Supplemental Questions:

All questions apply to the company AND to its owners, officers, partner and principal individuals.

Page 12

Section 12, Equipment, Facilities and Plants:

(A) An attachment can be included if it contains all requested information. Mark “See Attachment”.

(B) You must complete this question.

(C) You must complete this question. If you plan to rent equipment from a company in which you are a principal owner you must list that company's name and type of equipment.

(D) You must complete this question. If “yes”, enter Description, Location and Capacity.

Page 13

Section 13, Classes of Work:

Check beside each class of work for which you have demonstrated the experience in Section 14. This experience may be your own work force or through project management of subcontractors. List all other states where applicant is currently qualified or has been qualified in the last three (3) years.

Pages 14-18

Section 14 Experience:

An attachment can be included if it contains all requested information, including ODOT classes of work. Mark “See Attachment”.

Page 19

Sections 15 and 16 Experience – Continued:

A. and B. You must complete these questions.

Section 17

Space for applicant to provide additional information.

Page 20

Section 18, Affidavit:

Signature must be of an individual who is authorized to execute bids and/or contracts. The affidavit must be notarized.

Page 21

Exhibit A, Terminated Contracts:

Complete if applicant has ever had a contract terminated.

Page 22

Exhibit B, Open Contracts:

Complete if applicant has any open contracts with governmental agencies.

Questions? Call (541) 966-0203

1. If an Oregon corporation, complete this section	N/A
Date Corporation was registered with Secretary of State _____	
President _____	Secretary _____
1 st Vice President _____	Treasurer _____

CONTRACT EXECUTION – List of Authorized Personnel

A) President and Secretary

Printed name of President _____ Signature _____

Printed name of Secretary _____ Signature _____

B) Are other officers besides the President and Secretary of your company authorized to execute contracts? Yes No
If yes, list below and attach certified, true and correct copy of corporate bylaws or minutes stating that authority.

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

C) Are any of the officers [listed above in A) and B)] authorized to sign and execute contracts and bonds on **behalf of the company without the signature of others?** Yes No

IF YES, YOU MUST ATTACH CORPORATE BYLAWS OR MINUTES STATING THIS AUTHORITY TO SIGN ALONE ON BEHALF OF THE CORPORATION IN THE CORPORATE BYLAWS OR MINUTES.

BID EXECUTION – List of Authorized Personnel

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including any officers listed above and those individuals with digital signatures used for electronic bidding.

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

(Additional documentation may be required by the public contracting agency)

2. If a general partnership, complete this section

N/A

Date of Organization _____

If a foreign (out of state) co-partnership or persons engaging in business in the state under an assumed name, but not domiciled within this State, is the partnership or business organization registered as required in compliance with Chapter 648, Oregon Revised Statutes? Yes No

Names and addresses of partners:

If the Contractor is a partnership or limited liability partnership, an authorized representative of each Entity comprising it shall sign the Contract, Performance Bond and Payment Bond, and an authorization to sign shall be attached. If only one partner is signing, then bylaws or minutes must include the authority to sign without the signature of others.

Printed names, titles and signatures of partners authorized to EXECUTE CONTRACTS

Printed name of partner

Signature

Printed name of partner

Signature

Bylaws or minutes submitted (check one): Yes No (Only submit if signatures differ from above)

Printed names, titles and signatures of personnel authorized to EXECUTE BIDS

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including any officers listed above and those individuals with digital signatures used for electronic bidding.

Printed name and title

Signature

Printed name and title

Signature

Printed name and title

Signature

Printed name and title

Signature

(Additional documentation may be required by the public contracting agency)

3. If a foreign (out of state) corporation, complete this section

N/A

When incorporated _____

President _____

Secretary _____

1st Vice President _____

Treasurer _____

CONTRACT EXECUTION – List of Authorized Personnel

A) President and Secretary

Printed name of President _____

Signature _____

Printed name of Secretary _____

Signature _____

B) Are other officers besides the President and Secretary of your company authorized to execute contracts? Yes No
If yes, list below and attach certified, true and correct copy of corporate bylaws or minutes stating that authority.

Printed name and title _____

Signature _____

Printed name and title _____

Signature _____

Printed name and title _____

Signature _____

Printed name and title _____

Signature _____

C) Are any of the officers [listed above in A) and B)] authorized to sign and execute contracts and bonds on **behalf of the company without the signature of others?** Yes No

IF YES, YOU MUST ATTACH CORPORATE BYLAWS OR MINUTES STATING THIS AUTHORITY TO SIGN ALONE ON BEHALF OF THE CORPORATION IN THE CORPORATE BYLAWS OR MINUTES.

BID EXECUTION – List of Authorized Personnel

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including any officers listed above and those individuals with digital signatures used for electronic bidding.

Printed name and title _____

Signature _____

Printed name and title _____

Signature _____

Printed name and title _____

Signature _____

Name and address of registered agent in Oregon:

Date of authorization by Oregon Secretary of State to transact Business in Oregon:

Has applicant filed with Oregon Department of Revenue (DOR) forms required by ORS 279A.120? Yes No

Secretary of State
Phone: 503 986-2200

Department of Revenue
Phone: 503 378-4988

Website: www.filinginoregon.com

Website: www.oregon.gov/DOR

(Additional documentation may be required by the public contracting agency)

4. If a limited liability company, limited liability partnership or a limited partnership indicate below **N/A**

Check one: Limited liability company Limited liability partnership Limited partnership

Have you registered with the Oregon Secretary of State, Corporation Division, Business Registry? Yes No	Name and address of organizer:
-----------------------------------------------------------------------------------------------------------------	--------------------------------

If the Contractor is a LLP or LP company, an authorized representative of **each** Entity comprising it shall sign the Contract, Performance Bond and Payment Bond, **AND YOU MUST SUBMIT YOUR ARTICLES OF ORGANIZATION AND OPERATING AGREEMENTS THAT INDICATES THE AUTHORIZATION TO SIGN. If any representative is authorized to execute contracts without the signature of others, this must be stated in your Articles of Organization and Operating Agreements.**

Printed names, titles and signatures of personnel authorized to **EXECUTE CONTRACTS**:

Printed name and title	Signature
Printed name and title	Signature

Are other representatives besides the ones listed above able to execute contracts? Yes No
If yes, submit names, titles and signatures separately.

Printed names, titles and **signatures** of personnel authorized to **EXECUTE BIDS**

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including those individuals with digital signatures used for electronic bidding.

Printed name and title	Signature
Printed name and title	Signature
Printed name and title	Signature
Printed name and title	Signature
Printed name and title	Signature

5. If doing business as a sole proprietorship, fill out the following information **N/A**

Name of individual liable for all obligations of the business: _____

If applicant is a sole proprietor using an assumed business name, please list name below:

Secretary of State registration date: _____ Expiration date: _____

Printed name and title	Signature
------------------------	-----------

(Additional documentation may be required by the public contracting agency)

6. If doing business under an assumed business name, fill out the following information **N/A**

Assumed business name: _____

Owner's name and address: _____

Oregon Secretary of State
 Corporation Division's Registration No: _____ Renewal date: _____
www.filinginoregon.com/bizreg/index.htm

7. OWNERSHIP AND CONTROL (A, B and C)

(a) Is there an organization, owned or controlled by the applicant, its officers, directors, partners and anyone owning at least 10 percent interest in the firm or in which the applicant was or is an officer, director, partner, doing business in Oregon under another name?

Yes No If yes, please list in space below. If no, write N/A in space below.

(b) Are there any individuals, companies or corporations owning 10 percent or more of applicant's firm?

Yes No If yes, please list in space below. If no, write N/A in space below.

(c) Are there any other personnel in applicant's organization who have a financial interest in or serve as officers or partners in another firm prequalified to bid in this or another state?

Yes No If yes, please list below in space provided. If no, write N/A in space below.

Individual's Name	Present Position or Office	Other Firm or Firms	Position in Other Firm(s)	State of Other Firm(s)

8. LICENSES AND REGISTRATIONS

**Oregon Secretary of State Corporation
Division – Active Business Registry No.**
www.filinginoregon.com/bizreg/index.htm
Phone: (503)986-2200

Required for Legal Business Name, Assumed Business Name (page 1B), Corps, LLCs, LLPs, and LPs. Required prior to contract execution.

Oregon Construction Contractors Board No.
www.ccb.state.or.us
Phone: (503)378-4621

Required prior to bid opening for state-funded projects or prior to contract execution for federally-funded projects (not required for Aggregate Production or Landscaping work categories).

**Oregon Business Landscape Contractors
License No. and company name:**

**Individual Landscape Contractor License No.
and name:**
www.lcb.state.or.us
Phone: (503)986-6561

**Oregon Electrical Contractor License No. and
company name:**

Supervisor’s License No. and Name:
www.oregon.bcd.org
Building Codes Division phone: (503)378-4133

**Oregon Plumbing Business License No. and
company name:**

Journeyman’s License No. and Name:

**Oregon Boiler/Pressure Vessel Business
License No. and company name:**
www.oregon.bcd.org
Building Codes Division phone (503)378-4133

Other License No.

9. BONDING TOTAL

Indicate the total amount of work, expressed in dollars, for which the applicant can be bonded at one time:

\$ _____

10. BID, PERFORMANCE AND PAYMENT SURETY BONDS

If the contract(s) for which this prequalification is applicable requires bid, performance and payment bonds, the applicant shall state the name of the agent and name, address and telephone number of the surety company applicant **expects** to provide the bonds.

Agent’s name: _____

Agent’s address: _____

Agent’s telephone no.: _____

Surety name: _____

Surety address: _____

Surety telephone no.: _____

11. SUPPLEMENTAL QUESTIONS

- A) Have you ever been denied prequalification or had prequalification suspended or revoked by any state, local or federal agency in this or any other state?
(check one) Yes No If yes, please attach an explanation.
- B) Have you ever been debarred from bidding on contracts by any state, local or federal agency in this or any other state under any state or federal law?
(check one) Yes No If yes, please attach an explanation.
- C) Has any officer or partner of the applicant ever applied for prequalification with the public contracting agency under a different name?
(check one) Yes No If yes, please attach an explanation.
- D) Has the applicant ever failed to complete a state, local or federal public improvement (works) contract?
(check one) Yes No If yes, please attach an explanation.
- E) Has an officer or partner of the applicant ever been found in breach of a local, state or federal contract?
(check one) Yes No If yes, please attach an explanation.
- F) Within the last three years has the applicant, or any officer, partner, agent or employee of applicant been found to have violated any state or federal prevailing wage statute or regulation (including the federal Davis-Bacon and related Acts and ORS 279C.800 et. seq.) in any Final Order of the Oregon Bureau of Labor and Industries or the United States Department of Labor, or by any court of competent jurisdiction?
(check one) Yes No

If yes, provide copies of the final order(s) or judgment in which this occurred and explain **in detail**:

- (a) The circumstances behind any violation, including the amount(s) not paid.
- (b) Whether the amount(s) have now been paid.
- (c) The reasons for the violation.
- (d) All efforts undertaken to ensure that future violations will not occur.

- G) Within the last three years has the applicant, or any officer, partner, agent or employee of applicant been found to have violated any state or federal environmental statute or regulation (including, but not limited to, Environmental Protection Agency, Department of Environmental Quality, US Fish and Wildlife Service, Department of Fish and Wildlife, US Army Corps of Engineers, Division of State Lands, Department of Agriculture or Department of Interior) or any permit issued by one of these agencies, in any agency Final Order or by any court of competent jurisdiction?
(check one) Yes No

If yes, provide copies of the final order(s) or judgment in which this occurred and explain **in detail**:

- (e) The circumstances behind any violation, including the amount(s) not paid.
- (f) Whether the amount(s) have now been paid.
- (g) The reasons for the violation.
- (h) All efforts undertaken to ensure that future violations will not occur.

- H) Has the applicant ever had a contract terminated for failure to comply with the terms or conditions of a contract?
(check one) Yes No If yes, please complete Exhibit A attached
- I) Does applicant presently have any open contracts with any governmental agencies?
(check one) Yes No If yes, please complete Exhibit B attached

12. EQUIPMENT, FACILITIES AND PLANTS (A, B, C and D)

(A) Equipment owned by the applicant: List only major items. Lump together small equipment and tools. Attachments are acceptable if all required information is included.

Quantity, Description and Capacity of Items	Age in Years	Condition of Equipment

(B) Total market value of equipment: \$ _____

(C) Does applicant intend to rent equipment? Yes No If yes, provide a general description:

***(D)** Production Facility or Plant Yes No If yes, provide a general description:

Description	Location	Capacity

***City's acceptance of this prequalification does not imply City's approval as material sources for City projects**

13. CLASSES OF WORK

Fill in classes of work on which you wish to bid. Classes of work include, but are not limited to, work listed in parentheses. If more space is required, attach additional sheets.

For Each Class of Work:

Check beside each Class of Work for which you have demonstrated experience in Section 14. This may be with your own work force or through project management of subcontractors.

List all other states where applicant is currently qualified or has been qualified within the last three (3) years to perform work.

(Highways, Roads, Streets)

Class of Work	States qualified within the last (3) years
(AB) Aggregate Bases	_____
(ACP) Asphalt Concrete Paving and Oiling (Paving, Chip Sealing, Crack Sealing, Slurry Sealing, Fog Sealing)	_____
(REIN) Bridges and Structures (Concrete, Steel and Timber Bridges, Retaining Walls and Soundwalls; Seismic Retrofit; Box Culverts; Structural Plate Pipe, and Pipe Arches)	_____
(BLD1) Buildings (Toilets, Bathhouses, Maintenance, Sand Sheds)	_____
(EART) Earthwork and Drainage (Clearing, Earthwork, Blasting, Riprap, Culverts, Manholes, Inlets, Storm Sewers, Sanitary Systems)	_____
(ELEC) Electrical (Traffic Signals, Illumination, Ramp Meters, Roadway Weather Information Systems (RWIS), Variable Message Signs (VMS), Traffic Cameras)	_____
(LS) Landscaping (Roadside Seeding, Lawns, Shrubs, Trees, Irrigation Systems, Topsoil, Temporary and Permanent Erosion Control)	_____
(MHA) Miscellaneous Highway Appurtenances (Guardrail, Barrier, Curbs, Walks, Fences, Protective Screening, Impact Attenuators, Cold Plane Pavement Removal, Rumble Strips)	_____
(PAI1) Painting (Bridges and Buildings)	_____
(PAVE) Pavement Markings (Permanent – Painted, Durable, Markers, Delineators)	_____
(PCP) Portland Cement Concrete Paving	_____
(AC) Rock Production (Aggregate Crushing, Sanding Rock)	_____
(SIGN) Signing (Permanent)	_____
(TTC) Temporary Traffic Control (All Temporary Traffic Control Items Including Flaggers and PilotCars)	_____
(OTH1) Other (List specific class)	_____
_____	_____
_____	_____

14. EXPERIENCE

List three (3) **major** projects that support each class of work you selected in Section 13 that applicant has undertaken as a prime or sub in the last five years beginning with the most recent. (Multiple classes of work can apply to each project) Please limit the experience to the past five years.

Attachments are acceptable if all required information is included.

1. **Agency or Company Name (Name, address and phone w/area code):** _____

Name of Project and Location of Work: _____

Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.

AB ACP REIN BLD1 EART ELEC LS MHA PAI1 PAV PCP AC SIGN TTC or OTH1

Contract Amount: _____ **Date of Completion (if completed):** _____ **Prime or Sub**

Project Bonded: No Yes **Surety Company if Project Bonded:** _____

2. **Agency or Company Name (Name, address and phone w/area code):** _____

Name of Project and Location of Work: _____

Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.

AB ACP REIN BLD1 EART ELEC LS MHA PAI1 PAV PCP AC SIGN TTC or OTH1

Contract Amount: _____ **Date of Completion (if completed):** _____ **Prime or Sub**

Project Bonded: No Yes **Surety Company if Project Bonded:** _____

3. **Agency or Company Name (Name, address and phone w/area code):** _____

Name of Project and Location of Work: _____

Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.

AB ACP REIN BLD1 EART ELEC LS MHA PAI1 PAV PCP AC SIGN TTC or OTH1

Contract Amount: _____ **Date of Completion (if completed):** _____ **Prime or Sub**

Project Bonded: No Yes **Surety Company if Project Bonded:** _____

14. EXPERIENCE

List three (3) **major** projects that support each class of work you selected in Section 13 that applicant has undertaken as a prime or sub in the last five years beginning with the most recent. (Multiple classes of work can apply to each project) Please limit the experience to the past five years.

Attachments are acceptable if all required information is included.

1. Agency or Company Name (Name, address and phone w/area code): _____

Name of Project and Location of Work: _____

Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.

AB ACP REIN BLD1 EART ELEC LS MHA PAI1 PAV PCP AC SIGN TTC or OTH1

Contract Amount: _____ Date of Completion (if completed): _____ Prime or Sub

Project Bonded: No Yes Surety Company if Project Bonded: _____

2. Agency or Company Name (Name, address and phone w/area code): _____

Name of Project and Location of Work: _____

Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.

AB ACP REIN BLD1 EART ELEC LS MHA PAI1 PAV PCP AC SIGN TTC or OTH1

Contract Amount: _____ Date of Completion (if completed): _____ Prime or Sub

Project Bonded: No Yes Surety Company if Project Bonded: _____

3. Agency or Company Name (Name, address and phone w/area code): _____

Name of Project and Location of Work: _____

Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.

AB ACP REIN BLD1 EART ELEC LS MHA PAI1 PAV PCP AC SIGN TTC or OTH1

Contract Amount: _____ Date of Completion (if completed): _____ Prime or Sub

Project Bonded: No Yes Surety Company if Project Bonded: _____

14. EXPERIENCE

List three (3) **major** projects that support each class of work you selected in Section 13 that applicant has undertaken as a prime or sub in the last five years beginning with the most recent. (Multiple classes of work can apply to each project) Please limit the experience to the past five years.

Attachments are acceptable if all required information is included.

1. Agency or Company Name (Name, address and phone w/area code): _____															
Name of Project and Location of Work: _____															
Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.															
AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or	OTH1
Contract Amount: _____				Date of Completion (if completed): _____				Prime				or		Sub	
Project Bonded: No Yes Surety Company if Project Bonded: _____															

2. Agency or Company Name (Name, address and phone w/area code): _____															
Name of Project and Location of Work: _____															
Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.															
AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or	OTH1
Contract Amount: _____				Date of Completion (if completed): _____				Prime				or		Sub	
Project Bonded: No Yes Surety Company if Project Bonded: _____															

3. Agency or Company Name (Name, address and phone w/area code): _____															
Name of Project and Location of Work: _____															
Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.															
AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or	OTH1
Contract Amount: _____				Date of Completion (if completed): _____				Prime				or		Sub	
Project Bonded: No Yes Surety Company if Project Bonded: _____															

14. EXPERIENCE

List three (3) **major** projects that support each class of work you selected in Section 13 that applicant has undertaken as a prime or sub in the last five years beginning with the most recent. (Multiple classes of work can apply to each project) Please limit the experience to the past five years.

Attachments are acceptable if all required information is included.

1. Agency or Company Name (Name, address and phone w/area code): _____														
Name of Project and Location of Work: _____														
Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.														
AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or OTH1
Contract Amount: _____				Date of Completion (if completed): _____				Prime or Sub						
Project Bonded: No Yes Surety Company if Project Bonded: _____														

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Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.														
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Contract Amount: _____				Date of Completion (if completed): _____				Prime or Sub						
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AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or	OTH1	
Contract Amount: _____				Date of Completion (if completed): _____				Prime					or		Sub	
Project Bonded: No Yes Surety Company if Project Bonded: _____																

2. Agency or Company Name (Name, address and phone w/area code): _____																
Name of Project and Location of Work: _____																
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AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or	OTH1	
Contract Amount: _____				Date of Completion (if completed): _____				Prime					or		Sub	
Project Bonded: No Yes Surety Company if Project Bonded: _____																

3. Agency or Company Name (Name, address and phone w/area code): _____																
Name of Project and Location of Work: _____																
Check the Class(es) of Work listed below that you listed on Page 13 that pertain to this project.																
AB	ACP	REIN	BLD1	EART	ELEC	LS	MHA	PAI1	PAV	PCP	AC	SIGN	TTC	or	OTH1	
Contract Amount: _____				Date of Completion (if completed): _____				Prime					or		Sub	
Project Bonded: No Yes Surety Company if Project Bonded: _____																

15. EXPERIENCE – Continued

A. How many years has applicant been in business under present name?

As a prime contractor? _____ As a subcontractor? _____

B. How many years experience in construction work has applicant had?

As a prime contractor? _____ As a subcontractor? _____

16. EXPERIENCE – Continued

What is the construction experience of all owners, officers, partners and principal individuals in applicant's organization? Also, list any other individuals or organizations that control or influence bidding in any way and to any extent.

(Attach additional sheets, if needed)

Individual's Name	Present Position or Office	Years of Construction Experience	Magnitude and Type of Work

17. The following space may be used for general remarks and explanations pertaining to the foregoing prequalification statements. Explain here any claimed experience of a business organization or entity other than the applicant, including that of any business entity which was a predecessor of applicant or which has been acquired by applicant.

18. AFFIDAVIT

STATE OF _____)
 _____)
 County of _____)

I, _____, acknowledge that I am _____

(Title of individual authorized to execute bids and/or contracts)
 of the applicant herein and that the statements made in this application are true and that any false, deceptive or fraudulent statements on the application or at a hearing will result in the denial of prequalification and may subject me to charges of false swearing or perjury; I acknowledge that should there be any subsequent material reduction in applicant's ability to carry out any project for which applicant desires to submit a bid, applicant will give written notice of such change to the designated officer to whom this application is submitted at least ten (10) days prior to the bid opening; and that it is understood that such notice may change the eligibility of applicant to submit the bid.

(Original signature of individual authorized to execute bids and/or contracts)

Signed and affirmed before me this _____ day of _____, 20____.

Notary Seal or Stamp

 Notary Public for _____
 My Commission Expires: _____

EXHIBIT A
Terminated Contracts

List of terminated projects within the last three (3) years (attached additional sheets if necessary):

1) Project Name: _____

Original expected completion date: _____

Date of termination: _____

Reason for noncompliance with terms or conditions of contract: _____

Owner representative's name and phone number: _____

2) Project Name: _____

Original expected completion date: _____

Date of termination: _____

Reason for noncompliance with terms or conditions of contract: _____

Owner representative's name and phone number: _____

3) Project Name: _____

Original expected completion date: _____

Date of termination: _____

Reason for noncompliance with terms or conditions of contract: _____

Owner representative's name and phone number: _____

4) Project Name: _____

Original expected completion date: _____

Date of termination: _____

Reason for noncompliance with terms or conditions of contract: _____

Owner representative's name and phone number: _____

EXHIBIT B
Open Contracts

List of open government agency projects (list on-going, maintenance type contracts last):

1) Project Name: _____

Original contract completion date: _____ Expected completion date: _____

Estimated percent of completion: _____

Description of remaining work: _____

If contract date has passed, reason for contract not being completed by original contract date: _____

Owner representative's name and phone number: _____

2) Project Name: _____

Original contract completion date: _____ Expected completion date: _____

Estimated percent of completion: _____

Description of remaining work: _____

If contract date has passed, reason for contract not being completed by original contract date: _____

Owner representative's name and phone number: _____

3) Project Name: _____

Original contract completion date: _____ Expected completion date: _____

Estimated percent of completion: _____

Description of remaining work: _____

If contract date has passed, reason for contract not being completed by original contract date: _____

Owner representative's name and phone number: _____

(Attach additional sheets if necessary)