

Qualification Statement



1) Submittal Date: _____

2) Applicant (Firm/Company) Name:

3) Telephone Number: _____

4) Fax Number: _____

5) Website Address:

6) Mailing Address

7) Shipping Address (Fed Ex):

8) Main Contact
Name: _____
Title: _____
Telephone Number: _____
Fax Number: _____
E-Mail Address: _____

9) Federal Employer ID No. (FEIN): _____

10) Year Present Firm Established: _____

11) Annual Sales - last fiscal year: \$ _____

12) Annual Sales - last 5 years average: \$ _____

13) Type of Organization:
____ Individual/Sole Proprietorship
____ Professional Corporation/Association
____ Corporation State _____
____ Joint Venture* License #: _____
____ Partnership *Licensing State: _____
____ Other*

14) Total Number of Employees: _____
15) Design/Build Capabilities:
Yes ____ No ____ N/A ____

16) Worker's Compensation Experience Modification Rate (EMR)? _____ If
over 1.0 please provide 5 year history.
17) Does applicant have a safety program and written hazard communication program? Yes ____ No ____

18) Is the applicant certified as an:
8a ____ SDB ____ HUBZone ____ ANC ____ NHO ____
CDC ____ VBE ____ SDVO ____ WBE ____ MBE ____
DBE ____ Tribally Owned ____ Other Native American Owned ____

19) Union Affiliations: Is applicant signatory with any labor unions? Yes ____ No ____

(If yes, list union names and local numbers below)

National Agreements: _____
Local Agreements: _____

Qualification Statement

20) **Divisions of Work:** Check the disciplines for which the applicant is submitting its Qualification Statement

Consultants

- Boundary/Topographical Surveying Services
- Site Design & Civil Engineering Services
- Landscaping Design
- Construction Staking
- Traffic Engineering Services
- Environmental Engineering & Site Investigation Services
- Geotechnical Investigation Services
- Materials Testing
- Architectural Services
- Structural Engineering
- Mechanical Engineering
- Electrical Engineering
- Safety Consulting
- Other: _____
- Other: _____
- Other: _____

Vendors **

- Equipment Rental
- Office & Storage Trailers
- Sanitary Facilities
- Dumpsters/Rubbish Removal
- Concrete/Masonry Products
- Lumber and Building Materials

General Contracting and Subcontractors - Architectural Trades

- General Contractor
- General Labor Services
- Construction Cleaning Services
- Site Security Services
- Scaffolding
- Barricades & Temporary Fencing
- Building Demolition
- Selective Demolition
- Concrete - Footings & Foundations
- Concrete - Building Floors
- Concrete - Precast
- Concrete - Tilt-Up
- Concrete - Cutting & Boring
- Masonry
- Structural Steel - Fabrication
- Structural Steel - Erection
- Miscellaneous Steel/Metal Fabrications
- Finish Carpentry/General Trades
- Damp Proofing/Waterproofing
- Building Insulation
- Exterior Insulation Finish Systems (EIFS)
- Siding - Wood
- Siding - Aluminum & Vinyl
- Gutters & Downspouts
- Roofing - Membrane
- Roofing - Asphalt Shingles
- Roofing - Metal
- Roofing - Clay Tile
- Roofing - Flashing & Sheet Metal

Vendors (cont.)

- Roofing and Siding Materials
- Wood Doors
- Hollow Metal Doors & Frames
- Finish Hardware
- Windows - premanufactured
- Drywall & Metal Studs Materials
- Hard Tile Flooring Materials
- Acoustical Ceilings
- Resilient Flooring Materials
- Wood Flooring Materials
- Specialty Flooring Materials
- Paint/Wall Covering Materials
- Marker & Tack Board Materials
- Plastic Signage Materials
- Toilet Partitions and Accessories
- Wall & Corner Guard Materials
- Fire Extinguishers & Cabinets
- Flag Poles
- Lockers
- Projection Screens & AV Equipment
- Casework - premanufactured
- Tops & Sills - premanufactured
- Other: _____

- Roofing - Accessories
- Caulking - General
- Caulking - Fire & Smoke Protection
- Coiling Doors & Grilles
- Locksmith Services
- Glass & Glazing
- Drywall & Metal Studs
- Drywall Taping & Finishing
- Hard Tile
- Acoustical Ceilings
- Resilient Flooring & Carpet
- Wood Flooring
- Specialty Flooring
- Paint/Wall Covering
- Signs
- Lockers
- Food Service Equipment
- Athletic Equipment
- Play Structures & Playground Equipment
- Window Treatments
- Casework - custom fabrication
- Fabricated Engineered Structures (Wood/Post-Framed)
- Metal Building Systems
- Elevators & Lifts
- Other: _____
- Other: _____

Qualification Statement

Subcontractors - Mechanical & Electrical Trades

- Fire Suppression Systems (Sprinklers)
- Plumbing
- Gas Systems for Laboratory & Healthcare (Medgas)
- Heating, Ventilating & Air Conditioning (HVAC)
- Electrical
- Communications (Data & Telephone)
- Intrusion Detection (Security Systems)
- Fire Detection & Alarm Systems
- Other: _____
- Other: _____

Subcontractors - Site Work Trades

- Earthwork & Excavation
- Site Utilities
- Site Concrete - Sidewalks & Drives
- Site Concrete - Curbs & Gutters
- Asphalt Paving
- Asphalt Striping & Maintenance
- Soil Treatment - Termite Control
- Permanent Fencing & Gates
- Landscaping
- Irrigation Systems

21) Is your company listed in the Federal Government Central Contractor Registry (CCR)? Yes No
 If yes, which NAICS Codes are you listed under _____

22) **Regions of Work:** List the states in which your firm is registered to conduct business for disciplines marked in Box 20:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Illinois | <input type="checkbox"/> Montana | <input type="checkbox"/> Rhode Island |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Indiana | <input type="checkbox"/> Nebraska | <input type="checkbox"/> South Carolina |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Iowa | <input type="checkbox"/> Nevada | <input type="checkbox"/> South Dakota |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Kansas | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Tennessee |
| <input type="checkbox"/> California | <input type="checkbox"/> Kentucky | <input type="checkbox"/> New Jersey | <input type="checkbox"/> Texas |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Louisiana | <input type="checkbox"/> New Mexico | <input type="checkbox"/> Utah |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Maine | <input type="checkbox"/> New York | <input type="checkbox"/> Vermont |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Maryland | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Virginia |
| <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Michigan | <input type="checkbox"/> Ohio | <input type="checkbox"/> West Virginia |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Minnesota | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Wisconsin |
| <input type="checkbox"/> Hawaii | <input type="checkbox"/> Mississippi | <input type="checkbox"/> Oregon | <input type="checkbox"/> Wyoming |
| <input type="checkbox"/> Idaho | <input type="checkbox"/> Missouri | <input type="checkbox"/> Pennsylvania | |

**** Note: Vendors - list only those states that you are registered to remit taxes ****

Qualification Statement

23) **List Principal Owners:**

(Attach as many sheets as necessary)

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Percentage of Ownership: _____
Brief Resume: _____

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Percentage of Ownership: _____
Brief Resume: _____

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Percentage of Ownership: _____
Brief Resume: _____

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Percentage of Ownership: _____
Brief Resume: _____

24) **List Key Personnel:**

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Brief Resume: _____

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Brief Resume: _____

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Brief Resume: _____

Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Brief Resume: _____

Qualification Statement

25) **List Bank and five credit/trade references (minimum 5 year relationship):**

Bank:
Address: _____
Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Line of Credit Limit: _____

Company:
Address: _____
Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Relationship: _____

Company:
Address: _____
Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Relationship: _____

Company:
Address: _____
Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Relationship: _____

Company:
Address: _____
Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Relationship: _____

Company:
Address: _____
Name: _____
Title: _____
Phone Number: _____
Fax Number: _____
E-Mail Address: _____
Relationship: _____

Qualification Statement

26) **Past Projects:** List a variety of projects completed over the past five years. A minimum of five projects must be listed.

<u>Project Name</u>	<u>Location</u>	<u>Project Cost</u>	<u>Project Completion Date</u>
<u>Project Owner Name</u>	<u>Phone Number</u>	<u>Total Square Footage</u>	
_____	_____	\$ _____	_____
_____	_____	Sq.Ft. _____	
_____	_____	\$ _____	_____
_____	_____	Sq. Ft. _____	
_____	_____	\$ _____	_____
_____	_____	Sq.Ft. _____	
_____	_____	\$ _____	_____
_____	_____	Sq. Ft. _____	
_____	_____	\$ _____	_____
_____	_____	Sq.Ft. _____	
_____	_____	\$ _____	_____
_____	_____	Sq.Ft. _____	
_____	_____	\$ _____	_____
_____	_____	Sq.Ft. _____	

Qualification Statement

27) Financial Statement Information:

Audited Financial Statements are preferred for all applicants. Note: Firms which do not have Audited Financial Statements may submit reviewed statements. Small firms which do not have Audited or Reviewed Financial Statements may submit Compilations. However, the following information at a minimum is required in each category.

Audited Financial Statements for the last two fiscal years including:

- * Auditor's Report
- * Balance Sheets
- * Statements of Income and Retained Earnings
- * Statement of Cash Flows
- * All footnotes to these statements

Reviewed Financial Statements for last two years including:

- * Balance Sheets
- * Statements of Income and Retained Earnings
- * Statement of Cash Flows
- * All footnotes to these statements

Compilations for last two years including:

- * Balance Sheets
- * Statements of Income and Retained Earnings
- * Statement of Cash Flows
- * All footnotes to these statements

28) Dunn & Bradstreet Information:

Num: _____ Rating: _____

29) Insurance and Bonding:

Identify insurance policies currently held by the firm. For each policy, name the following: policy limits, expiration date, carrier, agent, agent name, agent address, agent phone number. (Or provide sample insurance form(s) indicating required information)

Type of Insurance	Effective Date	Expiration Date	Agent Name, address and phone number
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Carrier Name and Policy Number

Policy Limits _____

General Liability _____

Professional Liability _____

Automobile Liability _____

Excess/Umbrella Liability _____

Workers Comp. and Employer's Liability _____

30) Bonding Agent Name Address & Phone Number:

31) Bonding Capacity: \$ _____ per job \$ _____ aggregate

