



CITY OF PLEASANT HILL

100 Gregory Lane
Pleasant Hill, CA 94523

Revised 3/25/2003

Public Works

Contractor Pre-Qualification

Questionnaire

City of Pleasant Hill

Contractor General Information

Firm Name: _____

Contact Person: _____

Address: _____

Telephone No. _____ Fax. No. _____

Check One: _____ Email Address: _____

Corporation Partnership Sole Proprietor

If firm is a sole proprietor or partnership:

Owner(s) of Company: _____

License Number(s):	Classification:	Expiration Date:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Primary Type of General Work of Interest: _____
(List only one, example: Paving, Concrete, Landscaping, Underground, Electrical, Building)

Secondary or other type of work performed: _____

(List more than one, example: Paving, Concrete, Landscaping, Underground, Electrical, Building)

Bonding capacity (per job): Provide documentation from your surety identifying the following:

Name of bonding company/surety: _____

Name of surety agent, address and telephone number: _____

How many years has your organization been in business in California as a contractor under your present business name and license number?

_____ (years).

I, the undersigned, certify and declare that I have read all the foregoing answers to this pre-qualification questionnaire and know their contents. The matters stated in the questionnaire answers are true of my own knowledge and belief, except as to those matters stated on information and belief, and as to those matters I believe them to be true. I declare under penalty of perjury under the laws of the State of California, that the foregoing is correct.

Dated: _____

Name: _____

PART 1. ESSENTIAL REQUIREMENTS FOR QUALIFICATION

Contractor will be immediately disqualified if answer to any questions 1 through 2 is “No”.

- | | Yes | NO |
|---|--------------------------|--------------------------|
| 1. Contractor has a liability insurance policy with a policy limit of at least \$1,000,000 per occurrence and \$2,000,000 aggregate. | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Contractor has a current Worker’s Compensation policy as required by the State of California Labor Code or is legally self-insured pursuant to Labor Code section 3700 et.seq. | <input type="checkbox"/> | <input type="checkbox"/> |

Contractor will be immediately disqualified if the answer to any of questions 3, 4, or 5 is “yes.”¹

- | | Yes | NO |
|---|--------------------------|--------------------------|
| 3. Has your contractor’s license been revoked at any time in the past five years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Has a surety company completed a contract on your behalf, or paid for completion because your firm was default terminated by the project owner within the last five years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. At the time of submitting this pre-qualification form, is your firm ineligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code section 1777.1 (violation of public works labor laws) or Labor Code section 1777.7 (violation of apprentice requirements)? | <input type="checkbox"/> | <input type="checkbox"/> |

¹ A contractor disqualified solely because of a “yes” answer given to question 3, 4, or 5 may appeal the disqualification and provide an explanation of the relevant circumstances during the appeal procedure.

PART II. ORGANIZATION, HISTORY, PERFORMANCE COMPLIANCE WITH CIVIL AND CRIMINAL LAW

If the answer to any of the following questions is “Yes”, please explain on a separate signed sheet.

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1. Is your firm currently the debtor in a bankruptcy case? Or has it been at any time during the last five (5) years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Has any Contractor’s State License Board (CSLB) license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. At any time in the last five years has your firm been assessed and paid liquidated damages after completion of a project under a construction contract with either a public or private owner? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. In the last five years, has your firm, or any firm with which any of your company’s owners, officers or partners are associated, been debarred, disqualified, removed or otherwise prevented from bidding on or competing for any government agency or public works project for any reason? | <input type="checkbox"/> | <input type="checkbox"/> |
| Note: “Associated with” refers to another construction firm in which an owner, partner or officer of your firm held a similar position. | | |
| 5. In the last five years, has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. In the past five years, has any claim <u>against</u> your firm concerning your firm’s work on a construction project been <u>filed in court or arbitration</u> ? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. At any time during the past five years, has any surety company made any payments on your firm’s behalf as a result of a default to satisfy any claims made against a performance or payment bond issued on your firm’s behalf in connection with a construction project, either public or private? | <input type="checkbox"/> | <input type="checkbox"/> |

- | | | YES | NO |
|-----|---|--------------------------|--------------------------|
| 8. | In the last five years, has any insurance carrier, for any form of insurance, refused to renew the insurance policy for your firm? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. | During the last five years, has your firm ever been denied bond coverage by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. | Has Cal/OSHA cited and assessed penalties against your firm for any “serious,” “willful” or “repeat” violations of its safety or health regulations in the past five years?
Note: If you have filed an appeal of a citation, and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it. | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. | Has the federal Occupational Safety and Health Administration cited and assessed penalties against your firm in the past five years?
Note: If you have filed an appeal of a citation and the appeals board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation. | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. | Has the EPA or any air quality management district or any regional water quality control board cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor in the past five years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. | Has there been more than one occasion during the last five years in which your firm was required to pay either back wages or penalties for your own firm’s failure to comply with the state’s prevailing wage laws” or the federal Davis-Bacon prevailing wage requirements.
Note: This question refers only to your own firm’s violation of prevailing wage laws, not to violations of the prevailing wage laws by a subcontractor. | <input type="checkbox"/> | <input type="checkbox"/> |

PART III. RECENT PROJECTS COMPLETED

Contractor shall provide information about its six most recently completed public works projects and three largest completed private projects within the last three years. Names and references must be current and verifiable. Copy and use separate sheets of paper containing the following information.

Project Name: _____

Location: _____

Public Agency/Owner: _____

Owner Contact (name and current telephone number): _____

Description of Project, Scope of Work Performed: _____

Initial Awarded amount: _____

Total value of Change Orders: _____

Total Cost of Final Project: _____

Actual Date of Completion: _____