

**SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT  
PREQUALIFICATION NOTICE TO SPECIALTY CONTRACTORS  
“C HAZ/ASB”  
(HAZARDOUS MATERIALS, INCLUDING ASBESTOS ABATEMENT)  
CALLING FOR PRE-QUALIFICATION OF BIDDERS  
FOR PUBLIC WORKS PROJECTS – CONTRACTS VALUED UP TO \$1,000,000**

**November 4, 2003**

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**SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT  
NOTICE TO SPECIALTY CONTRACTORS CALLING FOR PRE-QUALIFICATION  
OF BIDDERS  
FOR PUBLIC WORKS PROJECTS**

NOTICE IS HEREBY GIVEN that Swinerton Management and Consulting, on behalf of the San Mateo County Community College District of San Mateo County, California, acting by and through its Governing Board, hereinafter referred to as the District, will receive up to, but not later than **Tuesday, November 11, 2003, at 2:00 p.m.**, a **sealed Pre-Qualification Application** for approval to bid on an upcoming public works project at the San Mateo County Community College District. Only Specialty Contractors with a “**C HAZ/ASB**” license and who have been approved through this pre-qualification process will be eligible to bid the following public works project:

**PROJECT**

Districtwide Hazardous Material Abatement

**LOCATION**

Cañada College, College of San Mateo, Skyline College

**Submission of Pre-Qualification Applications:** All Pre-Qualification Applications shall be made on a form furnished by the District (copy attached herewith). Additional Pre-Qualification Applications may be obtained from Swinerton Management and Consulting, San Mateo County Community College District, College of San Mateo Building 6, 1700 West Hillsdale Drive, San Mateo, California, 94402, (650) 378-7334. In addition, applications may be obtained from the District’s website, <http://www.smccd.net>, however, interested Specialty Contractors should register with Swinerton Management and Consulting to ensure that any addenda issued are sent to all holders of the prequalification document. The final day bidders may submit requests for clarification is November 6, 2003. Applications will be received by Swinerton Management and Consulting, at their offices located at College of San Mateo Building 6, 1700 West Hillsdale Drive, San Mateo, California, 94402.

**Requirements for Application:** Each application must conform and be responsive to the standard application provided by the District (attached herewith). Any deviation from the standard application form or failure to provide the required information will be considered non-responsiveness and grounds for disqualification and rejection of the application. The District reserves the right to reject any or all pre-qualification applications and to waive any irregularities in any responses received. Prequalification submittals for past projects or for other public agencies are not applicable. A new Prequalification submittal is required to be considered for the advertised projects.

**Mandatory Prequalification Conference:** A mandatory Prequalification conference will be held on Tuesday, November 4, 2003 at 11:00 a.m., in the Conference Room of Swinerton Management & Consulting, located in College of San Mateo Building 6 at 1700 West Hillsdale Drive, San Mateo, CA 94402. Attendance at the prequalification conference is mandatory for Specialty Contractors attempting to become prequalified to bid on the advertised projects. Those planning to attend the conference should allow ample time to find a parking space, secure a parking pass, and walk to the meeting location. The doors to the meeting will be secured at 10 minutes past the start of the meeting. Those that arrive more than 10 minutes past the start of the Prequalification conference will not be allowed to participate in the prequalification process.

**Requirements for Pre-Qualification:** The District's evaluation is solely for the purpose of determining which contractors are deemed responsible and qualified. Pre-qualification of bidders will be reviewed and determined by the District based upon the submitted Pre-Qualification application, and any other information available to the District. The District may request a contractor to submit additional information pertinent to the Application. The District also reserves the right to investigate and rely upon information from other available sources in addition to any documents or information submitted by the Contractor.

The District retains the sole discretion to determine issues of compliance and to determine whether a bidder is responsive and responsible. The District will determine a contractor's quality, fitness and capacity to perform projects satisfactorily. The District's decision on pre-qualification will be based on the evaluation of several factors including but not limited to the following:

1. Construction Experience on comparable projects
2. Contractor's License
3. Work History
4. Litigation and Arbitration History
5. Disqualification from Previous Projects
6. Compliance with Statutory Requirements and Safety Record
7. Prevailing Wage Requirements
8. Project Personnel
9. Insurance Requirements
10. Bonding Information
11. Financial Information
12. Attendance at the mandatory Prequalification conference

In addition to being disqualified for failure to meet the District's criteria, a contractor may be automatically disqualified for any one of the following:

1. Omission of requested information
2. Falsification of information
3. Lack of required valid contractor's license
4. Lack of bondability
5. Lack of insurability
6. Lack of Declaration under penalty of perjury of Application by a duly authorized officer of the firm.
7. Lack of experience in constructing comparable projects

**Bid Award:** The District will receive bids on the project(s) only from Prequalified Specialty Contractors. The contract for a particular project will be awarded to the lowest responsible pre-qualified bidder submitting a responsive bid for that project. The District reserves the right to review and determine the qualifications and responsibility of any subcontractors at the time the individual project is submitted for bid.

**Contract Requirements:** Contractors are advised that the contractor qualified and selected for a specific project as the lowest responsible pre-qualified bidder shall be subject to and must fully comply with all of the requirements of the bidding documents including but not limited to the provision of a Payment Bond and a Performance Bond. The bonds shall be in the form of surety

bonds issued by a corporation licensed in the State of California and satisfactory to both the District and its agents. Sureties must be California State registered Class "A" Securities. In accordance with provisions of Public Contract Code Section 22300, substitution of eligible and equivalent securities for any monies withheld to ensure performance under this contract will be permitted at the request and expense of the Contractor.

**Prevailing Wage Requirements:** Contractors are further informed that they will be subject to and must comply with all of the requirements under the California Labor Code to pay the general prevailing rate of per diem wages and for holiday and overtime work to all workers employed by the contractor. Copies of prevailing rates of per diem wages are available from the Department of Industrial Relations, State of California.

**Labor Compliance Program:** This project will be required to conform to a Labor Compliance Program in accordance with the requirements of the Department of Industrial Relations, State of California.

**Confidentiality:** Responses to the Pre-Qualification application and questionnaire and any financial information submitted for pre-qualification evaluation are not public records and not open to public inspection. The District will maintain the confidentiality of these records to the extent permitted by law. In the event a third party requests these confidential records, the District will notify the affected contractor, and it shall be the contractor's responsibility to defend the District in any action to compel disclosure of the contractor's confidential information.

The San Mateo County Community College District is an equal opportunity employer.

Board of Trustees  
San Mateo County Community College District

**Tom, Constantino, Vice President-Clerk**

**Published:   October 23, 2003  
                  October 30, 2003**

## PRE-QUALIFICATION QUESTIONNAIRE

Each prospective bidder must answer all of the following questions and provide all requested information, where applicable. Any prospective bidder failing to do so may be deemed to be not responsive and not responsible to this prequalification at the sole discretion of the San Mateo County Community College District. All information submitted for prequalification evaluation will be considered official information acquired in confidence, and the District will maintain its confidentiality to the extent permitted by law. Any prospective bidder found to be not prequalified as a result of the bidder's answers to this Pre-Qualification Questionnaire will receive written response from Swinerton Management and Consulting on behalf of the San Mateo County Community College District explaining the decision. If the bidder can refute some of the facts upon which the decision was based, the bidder can request a hearing of the Executive Director of Facilities Planning and Operations for the San Mateo County Community College District to appeal the decision. The decision of the Executive Director is final and may not be appealed within the District.

**Project:** Districtwide Hazardous Material Abatement, Cañada College, Redwood City, California, College of San Mateo, San Mateo, Skyline College, San Bruno CA.

**Description:** The project involves the abatement of hazardous materials, including asbestos containing materials, located in buildings located at the Cañada College, Redwood City, CA the College of San Mateo, San Mateo, CA and Skyline College, San Bruno CA. The buildings will remain fully occupied and operational during construction. In addition, building systems will be required to remain operational during construction.

**Engineer:** Various

**Construction**

**Window:** January 2003 – December 2007

**Project**

**Manager:** Cañada College, Anne Daley, Swinerton Management and Consulting  
College of San Mateo, Ellen O'Leary, Swinerton Management & Consulting  
Skyline College, Doug Henry, Swinerton Management & Consulting

**Note:** Submission of an incomplete and/or unclear Prequalification Submittal may result in the determination of the prospective Specialty Contractor as NON-PREQUALIFIED.

I. **GENERAL INFORMATION**

Firm/Contractor Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Type of Firm: Corporation: \_\_\_\_\_ Proprietorship: \_\_\_\_\_

Partnership: \_\_\_\_\_ Joint Venture: \_\_\_\_\_

Other (please describe): \_\_\_\_\_

Number of years in business under firm name: \_\_\_\_\_

Full names of firm's owners (> 10% ownership), officers and managing employees:

Has the firm changed its name within the past 3 years? \_\_\_\_\_ If yes, provide former name(s): \_\_\_\_\_.

(Copy this questionnaire and answer the questions in Sections I through XVII for each former firm name; attach to the current firm's Prequalification Questionnaire.)

Have there been any recent (within the last three years) changes in control/ownership of the firm? \_\_\_\_\_ If yes, explain.

Name and title of person completing this questionnaire: \_\_\_\_\_

II. **LICENSE**

The Firm/Contractor must be licensed in the State of California.

Name of license holder on file with the California State License Board:

License Classification & Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Number of years license has been issued under firm name: \_\_\_\_\_

Within the past five years, has the firm been subject to disciplinary action by the California State License Board? \_\_\_\_\_ If yes, provide details of each action and attach all relevant documents.

Have officers or principals of the firm ever had their contractor's license suspended or revoked for any reason? \_\_\_\_\_ If yes, please explain.

### III. CONSTRUCTION EXPERIENCE

Has your firm successfully completed at least three (3) comparable projects within the last ten years?

The Owner seeks Specialty Contractors with experience in the scope of work described in this document in the abatement of hazardous materials in fully occupied buildings. Comparable projects shall include the following elements:

- Work on a site with limited designated contractor parking, limited staging areas, and restricted site access.
- Abatement in a fully occupied and functioning building with restricted work hours.
- Work on a site where the core mission of the enterprise is not to be interrupted.
- Construction of code compliance improvements requiring Division of the State Architect (DSA) approval.
- Construction adjacent to occupied, fully functional buildings and outdoor activities.
- Attainment of total project completion within prescribed schedule.
- High levels of customer service and public relations with building occupants.
- Projects with a high level of complexity requiring tracking of multiple functions and phases.

Listed projects must have been managed and constructed under the on-going business enterprise submitted for prequalification. Projects completed by employees for former employers are not acceptable.

Submit the following *Project Data Sheet* for **each** project submitted as evidence of your firm's Specialty Contractor experience.

- A. If the entity submitting this prequalification questionnaire is a Joint Venture, the Joint Venture entity itself must demonstrate the required previous construction experience as a joint venture. Joint Venture teams newly formed to pursue this prequalification opportunity are not eligible for prequalification.
- B. Listed projects must have been managed and constructed by the business entity submitted for prequalification. Projects completed by present employees of the contractor for former employers are not acceptable.
- C. Submit not more or less than three (3) of the following Project Data Sheets for each comparable project submitted as evidence of your firm's experience.

**PROJECT DATA SHEET**

**RELEVANT EXPERIENCE**

(A separate sheet must be prepared for each project submitted.)

1. Project Name: \_\_\_\_\_

2. Project Location: \_\_\_\_\_

3. Project Description: \_\_\_\_\_

4. Construction Type: \_\_\_\_\_

5. Size (gross sq. ft.): \_\_\_\_\_

6. Business name of entity, which constructed and managed this project:

\_\_\_\_\_

7. How is this project comparable to those projects listed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Was the project completed within budget?

Cost At Bid:           \$ \_\_\_\_\_

Cost At Completion: \$ \_\_\_\_\_

Explanation: \_\_\_\_\_

9. For any differing amount between cost at completion and cost at bid, distribute the sources and/or causes of the changes into the following categories:

Document Problems:           \$ \_\_\_\_\_

Unforeseen Conditions:       \$ \_\_\_\_\_

Owner Generated Scope:      \$ \_\_\_\_\_

Regulatory Agency:           \$ \_\_\_\_\_

Other:                            \$ \_\_\_\_\_

Explain Other: \_\_\_\_\_

10. Was construction of the project begun and completed within the last ten (10) years?

YES

NO

11. Was the project completed within the original contract time or the adjusted contract time?

YES

NO

\_\_\_\_\_ Contract Time at bid date (Number of calendar days)

\_\_\_\_\_ Formally adjusted Contract Time (Number of calendar days; if not adjusted, state "Not Applicable")

\_\_\_\_\_ Actual Elapsed Time between issuance of Notice To Proceed and date of final completion (Number of calendar days)

If completion did not occur within the Contract Time at bid date or within the formally Adjusted Contract Time, then explain the reason or reasons for the delay:

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For projects, which have not reached final completion indicate current status with respect to contract time: \_\_\_\_\_

12. Did the project include occupied facilities adjacent to the project?

YES

NO

13. What communications strategies were used by your firm to assist the project team in mitigating the impacts of construction on the adjacent occupied facilities? \_\_\_\_\_

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14. Did the project include restricted site access?

YES

NO

What measures were taken to mitigate the restrictive conditions?

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15. What strategic decisions did your firm contribute to the project which supported the project' success (e.g., value engineering, phasing, innovation, new technology, etc.)?

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16. Did the project include adherence to critical path scheduling?

YES  NO

17. What strategies did your firm use to adjust and/or correct for non-Owner generated slippage in the critical path schedule?

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18. Did the project include finishes and work elements requiring craftsmanship and workmanship?

YES  NO

19. How did your firm manage the quality of workmanship on the job? \_\_\_\_\_

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20. Did the project include California Division of State Architect Compliance review and approval?

YES  NO

21. Did the Owner assess any back-charges?

YES  NO

If answer is yes, explain: \_\_\_\_\_

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22. Did the Owner assess any liquidated damages?

YES  NO

If answer is yes, explain: \_\_\_\_\_

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23. Describe the firm's claim-avoidance strategy and/or philosophy: \_\_\_\_\_

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24. Name of Project Manager: \_\_\_\_\_

Qualifications of this Project Manager: \_\_\_\_\_

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25. Name of Project Superintendent: \_\_\_\_\_

Qualifications of this Project Superintendent: \_\_\_\_\_

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26. Did your firm self-perform any of the work?

YES

NO

If yes, please specify the trades you self-performed:

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27. Project's Owner Information

Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ Fax: (     ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Architect/Engineer/  
Consultants: \_\_\_\_\_

Architect/Engineer  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Architect/Engineer  
E-mail Address: \_\_\_\_\_

*(Attach additional pages with other pertinent project information as necessary.)*

IV. **CURRENT PROJECTS FOR THE SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT, THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY, AND FOR OTHER COMMUNITY COLLEGE DISTRICTS IN THE STATE OF CALIFORNIA**

Submit the following *Current Projects for The San Mateo County Community College District, the Regents of the University of California, the Trustees of the California State University, and for other Community College Districts in the State of California Project Data Sheets* for each current project (regardless of project delivery strategy) between your firm and The San Mateo County Community College District, The Regents of the University of California, The Trustees of the California State University, and for other Community College Districts in the State of California

**If none, indicate NONE (do not leave blank).**

CURRENT PROJECTS FOR THE SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT, THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY, AND FOR OTHER COMMUNITY COLLEGE DISTRICTS in the STATE OF CALIFORNIA

**PROJECT DATA SHEET**

(A separate sheet must be prepared for each project submitted.)

1. Project Name: \_\_\_\_\_
2. Project Location (which campus?): \_\_\_\_\_
3. Type of Facility (circle one):  
University/College Campus                  Community College                  Other
4. Project Delivery Method (e.g., Lump Sum, Design Build, Guaranteed Maximum Price, etc.):  
\_\_\_\_\_
5. Project Description: \_\_\_\_\_  
\_\_\_\_\_
6. Construction Type: \_\_\_\_\_
7. Size (gross sq. ft.): \_\_\_\_\_
8. Business name of entity that is performing this project?  
\_\_\_\_\_
9. Percent Complete: \_\_\_\_\_
10. Description of Firm's Performance on Project Thus Far:
  - a. Completion Date at Notice to Proceed: \_\_\_\_\_
  - b. Current Estimated Completion Date: \_\_\_\_\_
  - c. Construction Cost at Bid: \_\_\_\_\_
  - d. Current Contract Amount: \_\_\_\_\_

11. For any differing amount between cost to date and cost at bid, distribute the sources and/or causes of these changes into the following categories:

Document Problems:	\$ _____
Unforeseen Conditions:	\$ _____
Owner Generated Scope:	\$ _____
Regulatory Agency:	\$ _____
Other:	\$ _____

12. If the entity submitting this prequalification questionnaire is a Joint Venture, is the Joint Venture entity itself performing this project?

YES

NO

N/A

13. Project Owner's Information

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Architect/Engineer/  
Consultants: \_\_\_\_\_

Architect/Engineer  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Architect/Engineer  
E-mail Address: \_\_\_\_\_

*(Attach additional pages with other pertinent project information as necessary.)*

V. **PAST PROJECTS FOR THE SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT, THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, THE TRUSTEES OF THE CALIFORNIA STATE UNIVERSITY, AND FOR OTHER COMMUNITY COLLEGE DISTRICTS IN THE STATE OF CALIFORNIA.**

Submit the following *Past Projects for the San Mateo County Community College District, The Regents of the University of California, the Trustees of the California State University, and for other Community College Districts in the State of California Project Data Sheets* for each past project (regardless of project contracting method) between your firm and the San Mateo County Community College District, The Regents of the University of California, The Trustees of the California State University, and for other Community College Districts in the State of California for the last ten (10) years. If the Project has been previously submitted in response to question # 6 indicate “same” after Project Name entry.

**If none, indicate NONE (do not leave blank).**

PAST PROJECTS FOR THE SAN MATEO COUNTY COMMUNITY COLLEGE DISTRICT,  
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, THE TRUSTEES OF THE  
CALIFORNIA STATE UNIVERSITY, AND FOR OTHER COMMUNITY COLLEGE  
DISTRICTS IN THE STATE OF CALIFORNIA

**PROJECT DATA SHEET**

(A separate sheet must be prepared for each project submitted.)

1. Project Name: \_\_\_\_\_

2. Project Location (which campus?): \_\_\_\_\_

3. Type of Facility (circle one):

University/College Campus                  Community College                  Other

4. Project Delivery Method (e.g., Lump Sum, Design Build, Guaranteed Maximum Price, etc.):

\_\_\_\_\_

5. Project Description: \_\_\_\_\_

\_\_\_\_\_

6. Construction Type: \_\_\_\_\_

7. Size (gross sq. ft.): \_\_\_\_\_

8. Business name of entity that performed this project:

\_\_\_\_\_

9. Was the project completed within budget?

Cost at Bid: \$ \_\_\_\_\_

Cost at Completion: \$ \_\_\_\_\_

Explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. For any differing amount between cost at completion and cost at bid, distribute the sources and/or causes of these changes into the following categories:

Document Problems:	\$ _____
Unforeseen Conditions:	\$ _____
Owner Generated Scope:	\$ _____
Regulatory Agency:	\$ _____
Other:	\$ _____

11. Year project was completed: \_\_\_\_\_

12. Was the project completed within the original contract time or the adjusted contract time?

YES  NO

If completion did not occur within the original or the adjusted contract time, indicate elapsed time in whole calendar days between original or adjusted contract time and actual final completion: \_\_\_\_\_

13. Did the Owner assess any back-charges?

YES  NO

If the answer is yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Did the Owner assess any liquidated damages?

YES  NO

If the answer is yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

15. Were any claims filed on the project?

YES  NO

16. If claims were filed on the project, please provide the following details for *each* claim:

a. Dollar Amount of Initial Claim: \_\_\_\_\_

b. Source of Claim (e.g., subcontractor, etc.): \_\_\_\_\_

c. Method of resolution (e.g., negotiation, mediation, arbitration, litigation): \_\_\_\_\_

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17. Name of Project Manager: \_\_\_\_\_

Qualifications of this Project Manager: \_\_\_\_\_

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18. Name of Project Superintendent: \_\_\_\_\_

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19. Project Owner's Information

Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: (     ) \_\_\_\_\_ Fax: (     ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Architect/Engineer/  
Consultants: \_\_\_\_\_

Architect/Engineer  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Architect/Engineer  
E-mail Address: \_\_\_\_\_

*(Attach additional pages with other pertinent project information as necessary.)*

**VI. LITIGATION AND ARBITRATION HISTORY**

Other than those projects previously listed in response to Section V, list all projects within the last (10) years in which claims were made against your firm, or claims you made against an Owner or Specialty Contractor, resulting in litigation, arbitration, mediation or settlement (attach additional sheets, if necessary). Separately list all **CURRENT AND/OR /PENDING** disputes:

- Pursued via mediation, arbitration, or litigation
- Initiated within the last ten (10) years
- In which additional compensation is sought
- Where alleged breach of contract is alleged
- Indemnity is sought
- Between your firm (or any principal of your firm) and any Owner

If none, indicate “none”. Do not leave blank.

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Date Completed: \_\_\_\_\_

Initial Contract Value (bid award): \_\_\_\_\_

Final Contract Value: \_\_\_\_\_

Amount of Claim: \_\_\_\_\_

Brief overview of the claim and final resolution: \_\_\_\_\_

\_\_\_\_\_

**VII. DISQUALIFICATION**

A. Has your firm been disqualified from performing work for the District?

\_\_\_\_\_

If yes, provide the project name(s). If none, indicate “none”. Do not leave blank.

\_\_\_\_\_

- B. Has your firm been disqualified or barred from performing work for a public entity other than the District? If yes, provide the following information for each occurrence. If none, indicate "none". Do not leave blank.

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Reason for Disqualification: \_\_\_\_\_

Contact Person  
(name and telephone number): \_\_\_\_\_

**VIII. COMPLIANCE WITH STATUTORY REQUIREMENTS AND SAFETY**

- A. Has there been an inquiry or charge by the U.S. Department of Labor, Division of Industrial Relations against your firm within the past five (5) years? \_\_\_\_\_  
If yes, provide the following information. If none, indicate "none". Do not leave blank.

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Date of Inquiry/Violation Date: \_\_\_\_\_

Description of the  
Inquiry/Violation: \_\_\_\_\_

Current Status  
and/or Resolution: \_\_\_\_\_

- B. Does your firm have any outstanding judgments, demands or liens resulting from violations of the California Labor Code, California Business and Professions Code or State Licensing laws? \_\_\_\_\_ If yes, identify judgment, demand or lien and its status. If none, indicate "none". Do not leave blank.

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Date of Inquiry/Violation Date: \_\_\_\_\_

Description of the  
Inquiry/Violation: \_\_\_\_\_

Current Status  
and/or Resolution: \_\_\_\_\_

C. Is your firm currently under investigation by any Federal or state agency for failing to comply with Federal or state laws, including but not limited to the California Labor Code, California Business and Professions Code or State Licensing laws? \_\_\_\_\_ If yes, provide the following information. If none, indicate "none", do not leave blank.

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Date of Inquiry/Violation Date: \_\_\_\_\_

Description of the Inquiry/Violation: \_\_\_\_\_

Current Status and/or Resolution: \_\_\_\_\_

D. Has your firm been cited for OSHA violations within the past five (5) years? \_\_\_\_\_ If yes, provide the following:

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Date of Inquiry/Violation Date: \_\_\_\_\_

Description of the Inquiry/Violation: \_\_\_\_\_

Current Status and/or Resolution: \_\_\_\_\_

E. Attach copy of your firm's EMR verification from the State of California or from your insurance company.

**IX. PROJECT PERSONNEL**

Employees listed will be considered qualified only if they have each successfully completed at least three (3) comparable projects within the last ten (10) years, each with a project sum comparable to, or in excess of, the estimated construction cost(s) listed within this prequalification document.

At the time of Bid, the Specialty Contractor will be required to reconfirm staff assignments to the project based on this submittal. If any of the staff listed in the

Prequalification are no longer employed by the firm at the time the project starts, or are otherwise unavailable, the firm's Bid may be considered non-responsive. The Owner may consider substitution of listed staff by others; however, comparable project history and other relevant information must be submitted to the Owner for approval, prior to the determination of Bid results.

**A. Project Manager (s)**

Complete the following section for each listed Project Manager(s).

Name: \_\_\_\_\_

Years with the firm: \_\_\_\_\_

Licenses held: \_\_\_\_\_

Years of experience on projects with university, college, community college, schools or other public entities: \_\_\_\_\_

The Project Manager named above was assigned and responsible for the following comparable projects:

Project	Construction Cost
1. _____	_____
2. _____	_____
3. _____	_____

Provide a completed PROJECT DATA SHEET for any of the projects listed above that were not previously listed/completed in response to other sections of this Prequalification document.

**B. Project Superintendent (s)**

Complete the following section for each listed Project Superintendent(s).

Name: \_\_\_\_\_

Years with the firm: \_\_\_\_\_

Licenses held: \_\_\_\_\_

Years of experience on projects with university, college, community college, schools or other public entities: \_\_\_\_\_

The Project Superintendent named above was assigned and responsible for the following comparable projects:

Project	Construction Cost
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1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Provide a completed PROJECT DATA SHEET for any of the projects listed above that were not previously listed/completed in response to other sections of this Prequalification document.

**X. INSURANCE REQUIREMENTS**

Prospective Specialty Contractors desiring to be prequalified are informed that they will be subject to and must fully comply with all Bid conditions including the following insurance coverage and associated limits.

Prospective Specialty Contractors shall submit the below form, signed by representative of insurer and notarized. If firm has used current insurer for less than five (5) years, list insurer(s) previously used and indicate number of years used to demonstrate five (5) complete years of insurer history.

- A. Is the insurer to be used listed by Best with a rating of A- or better, and a financial classification of IX or better (or an equivalent rating by Standard & Poor or Moody's)?

YES  NO

Indicate Best Rating: \_\_\_\_\_

Indicate Best Financial Classification: \_\_\_\_\_  
(or provide Standard & Poor or Moody's rating)

- B. Is the Specialty Contractor able to obtain insurance in the following limits for this construction contract?

YES  NO

Comprehensive or Commercial Form General Liability Insurance - Minimum

<u>Limits of Liability</u>	<u>Requirement</u>
Each Occurrence - Combined Single Limit for Bodily Injury and Property Damage	\$1,000,000
Products - Completed Operations Aggregate	\$1,000,000
Personal and Aggregate Injury	\$1,000,000
General Aggregate - Not Applicable to Comprehensive Form	\$1,000,000
<u>Business Automobile Liability Insurance - Limits of Liability</u>	
Each Accident - Combined Single Limit for Bodily Injury and Property Damage	\$1,000,000

C. How long has the Prospective Specialty Contractor been with this insurer?

Number of Years: \_\_\_\_\_

D. If the entity submitting this prequalification questionnaire is a Joint Venture, can the Joint Venture or partnership entity itself obtain insurance in the limits, noted above in Section B, for this construction contract?

YES

NO

N/A

E. Declaration:

The undersigned declares under penalty of perjury that the insurance limits indicated above are true and correct and that this declaration was executed in \_\_\_\_\_ (County), \_\_\_\_\_, (State) on \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name and Title - Printed or Typed)

\_\_\_\_\_  
(Representing [Insurance Company Name])

\_\_\_\_\_  
(Firm Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Facsimile Number)

\_\_\_\_\_  
(Email Address)

**(ATTACH NOTARIZATION OF INSURER REPRESENTATIVE'S SIGNATURE)**

**XI. BONDING INFORMATION**

Prospective Specialty Contractors desiring to be prequalified are informed that they will be subject to and must fully comply with all Bid conditions including providing 100% payment and 100% performance bonds.

Prospective Specialty Contractors shall submit the below form, signed by representative of surety and notarized. If firm has used current surety for less than five (5) years, list surety(ies) previously used and indicate number of years used to demonstrate five (5) complete years of surety history.

- A. Is the surety to be used listed in the latest published State of California Department of Insurance list of *Insurance Organizations Authorized by the Insurance Commissioner to Transact Business of Insurance in the State of California*?

YES

NO

- B. Is the prospective Specialty Contractor able to obtain bonding up to and including an amount equal to the estimated construction cost?

YES

NO

- C. Is it true that the surety has *not* paid out any monies for the construction activities of the prospective Specialty Contractor whatsoever within the last five (5) years?

YES

NO

If answer is no, explain on attached additional sheets.

- D. How long has the Prospective Specialty Contractor been with this surety?

Number of Years: \_\_\_\_\_

- E. If the entity submitting this prequalification questionnaire is a Joint Venture or partnership, has any surety paid out any monies on claims on the performance bond issued by a surety for the benefit of the Owner arising out of the construction activities of any member of the Joint Venture or partnership within the last ten (10) years?

YES

NO

N/A

F. Surety Declaration:

[Provide this Declaration to your surety(ies) for completion. Do not have the surety submit this information directly to the College.]

The undersigned declares under penalty of perjury that the bonding capacity indicated above is true and correct and that this declaration was executed in \_\_\_\_\_ (County), \_\_\_\_\_, (State) on \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name and Title - Printed or Typed)

\_\_\_\_\_  
(Representing [Surety Name])

\_\_\_\_\_  
(Firm Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Facsimile Number)

\_\_\_\_\_  
(Email Address)

***(ATTACH NOTARIZATION OF SURETY REPRESENTATIVE'S SIGNATURE)***

**XII. FINANCIAL INFORMATION**

- A. Firms seeking to Prequalify for projects must demonstrate average annual revenue of \$5 million/year over the last five (5) consecutive years. For purposes of this Prequalification Questionnaire “business construction revenue” is defined as payments to prospective Specialty Contractors from Owners for construction, excluding any and all legal awards.

1998 Annual Revenue \_\_\_\_\_  
1999 Annual Revenue \_\_\_\_\_  
2000 Annual Revenue \_\_\_\_\_  
2001 Annual Revenue \_\_\_\_\_  
2002 Annual Revenue \_\_\_\_\_  
  
Avg over the past 5 years \_\_\_\_\_

- B. What was the largest amount of work completed in one year by the firm?

Year: \_\_\_\_\_

Total Dollar Amount: \_\_\_\_\_

Number of Projects: \_\_\_\_\_

Largest Project Amount: \_\_\_\_\_

- C. Has your firm or affiliated entity ever declared bankruptcy or been in receivership?

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

- D. Attach a copy of your current reviewed or audited financial statement. The date on the statement must be within the last twelve months.

**XIII. ADDITIONAL SPECIALTY CONTRACTOR REQUIREMENTS**

The following items (XIII.A. and XIII.B) are listed for information purposes only. These items will not be included in the analysis of prequalification documents.

- A. If fully prequalified and a successful Bidder, the Specialty Contractor may be required to submit certain specific documents to the Owner and/or Owner’s Representative in electronic format. Indicate computer programs currently used by your firm:

	<u>Owner Standard</u>	<u>Your Firm</u>
Word processing (e.g., letters, memos, etc.)	Microsoft Word	_____
Cost Analysis, Payments, Field Orders, Change Orders, etc.	Microsoft Excel	_____
Project Scheduling	Primavera	_____
Computer-aided Drafting	AutoCad 2000	_____
Project Management	Prolog	_____
Email	Outlook	_____
Web Browser	Internet Explorer	_____

B. If fully prequalified and a successful Bidder, the Specialty Contractor is required to use electronic mail (email). Does your firm currently use email?

YES

NO

**XIV. ATTENDANCE AT MANDATORY PREQUALIFICATION CONFERENCE**

Did a representative of your firm attend the Mandatory Prequalification Conference conducted on **Tuesday, November 4, 2003, at 10:10 a.m. in the Conference Room, Swinerton Management & Consulting, Building 6, 1700 West Hillsdale Blvd., San Mateo, CA.**

YES

NO

**XV. DECLARATION**

The undersigned declares under penalty of perjury that all of the pre-qualification information submitted with this application is true and correct and a duly authorized officer of the Firm executed this Declaration.

Dated: \_\_\_\_\_

\_\_\_\_\_ Company

\_\_\_\_\_ Signature

Title