

SUBCONTRACTOR QUALIFICATION STATEMENT

University of Connecticut – Putnam Refectory Renovations

2358 Alumni Drive, Storrs, CT 06269

May 13, 2015



REPLY TO: todd.werner@whiting-turner.com and jackie.quesada@whiting-turner.com

COMPANY NAME: _____
ADDRESS: _____

CONTACT: _____
TITLE: _____
EMAIL: _____
TELEPHONE: _____

DATE PREPARED: _____

DAS PREQUALIFIED SINGLE PROJECT VALUE: \$ _____ EXPIRATION DATE: _____

S/MBE CERTIFICATION(S) (List if Applicable): _____ CURRENT THRU: _____
(Attach certificate(s))

If not DAS prequalified or S/MBE certified, please complete "Attachment A" and return with prequalification statement.

REQUIRED INFORMATION: (The below information will be used to evaluate the responsibility and integrity of the bidder)

1. ITEM OF WORK: (List Unit(s) of work you are bidding on, see invitation for breakout) _____

2. Please list all work self performed: _____
(Prequalification will be invalidated if 40% of the scope is not self performed)

3. Below please list the three (3) largest jobs which you have completed to date (with references):
Project Name: _____ **Started / Completed** _____ **Approx. Contract Value:** _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

4. Below please list three (3) recently completed commercial kitchen/dining facility projects (if any) (with references):
Project Name: _____ **Started / Completed** _____ **Approx. Contract Value:** _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

5. Below please list three (3) recently completed compressed summer schedule or multiple shift projects (if any) (with references):
Project Name: _____ **Started / Completed** _____ **Approx. Contract Value:** _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

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6. For Fire Protection, Plumbing, Mechanical & Electrical Contractors, please list the three (3) largest jobs which you have completed utilizing building information modeling (3D coordination) (with references):

Project Name: _____ **Started / Completed** _____ **Approx. Contract Value:** _____
_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____
_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____
_____ / / - / / \$ _____

Reference Name: _____ Phone Number: _____

7. Has your organization filed any lawsuits or request arbitration with regard to construction contracts within the last three years? _____ (if yes, identify and explain on a separate sheet)

8. Has your organization had any OSHA violations within the last three years? _____ Current EMR: _____
(if yes, identify and explain on a separate sheet) (Explain on separate sheet if > 1)

9. Are there any judgments, claims, arbitration's proceedings or suites pending or outstanding against your organization or its officers? _____

10. Has your organization ever failed to complete any work awarded to it? _____

11. Have you ever defaulted on a bond? _____ (If yes, please explain on a separate sheet.)

12. ANNUAL WORK VOLUME (Dollar Amount Per Year)
2012 _____
2013 _____
2014 _____

13. Financial Statement: Please attach a copy of your latest audited or reviewed financial statement showing current assets, net fixed assets, other assets, and current liabilities (including projects not yet commenced, but awarded to your company. Include expected contract value and schedule for these projects). This statement will be treated confidentially.

14. List the principals of your organization and their titles:

Name: _____ Title: _____
Name: _____ Title: _____
Name: _____ Title: _____

15. BONDING

Current bonding capacity: Per Job _____ Aggregate _____

Please attach proof of current bonding capacity in the form of a letter from your bonding company.

16. SIGNATURE

The information provided herein is true and sufficiently complete so as not to be misleading.

Signed: _____ (Officer or Partner) _____ (Title)

_____ (Date)

_____ (Name or Organization)

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Attachment A

Complete this form if you are NOT DAS prequalified or S/MBE certified.

- a) Has your firm ever had a conviction or entry of a plea of guilty or nolo contendere for commission of a criminal offense as an incident to obtaining or attempting to obtain a public or private contract or subcontract or in the performance of such contract or subcontract?
(Connecticut General Statute 31-57c) **YES / NO**

- b) Has your firm ever had a conviction or entry of a plea of guilty or nolo contendere under state or federal law for embezzlement, theft, forgery, bribery, falsification or destruction of records, receiving stolen property, or any other offense indicating a lack of business integrity or business honesty which affects responsibility as a contractor? (Connecticut General Statute 31-57c) **YES / NO**

- c) Has your firm ever had a conviction or entry of a plea of guilty or nolo contendere under state or federal antitrust, collusion or conspiracy statutes arising out of the submission of bids or proposals?
(Connecticut General Statute 31-57c) **YES / NO**

- d) Has your firm ever been cited for noncompliance with contract provisions on a public project, of a character regarded by the awarding authority to be of such gravity as to indicate a lack of responsibility to perform as a state contractor, including deliberate failure, without good cause, to perform in accordance with specifications or time limits provided in a contract? **YES / NO**

- e) On a separate sheet of paper, identify any OSHA citations within the past five (5) years under present business name or any past business name. Have you been cited for three or more willful or serious violations of OSHA, or of any standard, order or regulations promulgated pursuant to such Act which violations were cited in accordance with the provisions of any State Occupational Safety and Health Act or the Occupational Safety and Health Act of 1970 and which were not abated within the time fixed by the citation; and which citation has not been set aside following appeal to the appropriate agency or court having jurisdiction? Additionally list any criminal convictions related to the injury or death of any employee. (Connecticut General Statute 31-57b)

- f) Has your firm ever appeared on any list published by the Connecticut State Labor Department of persons or firms that have been found by the National Labor Relations Board and by a final decision rendered by a Federal Court to have been in violation of the National Labor Relations Act, 29 USC 151 et. seq. or to have been found in contempt of court by a final decision of a Federal Court for failure to correct a violation of the National Labor Relations Act on three or more occasions involving different violations? (Connecticut General Statute 31-57a) **YES / NO**

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- g) On a separate sheet of paper, identify any instances within the previous five years in which you or any entity in which you have an interest, has appeared on a list published by the State of Connecticut Labor Department of persons or firms which the Labor Department has found to have disregarded or violated your obligations to employees and subcontractors on public works projects under Connecticut General Statutes 31-53 and 31-76c (i.e. payment of prevailing wages and overtime payments) or in which you have been barred from Federal government contracts in accordance with the provisions of the Davis Beacon Act, 40 U.S. C. 276a-2. Describe in detail the circumstances of each violation, including but not limited to, the date and nature of the violation, the project on which the violation occurred, the source, if known, of any complaint giving rise to any Department of Labor investigation, the results of any such investigation, the penalty imposed or other action taken by the Department of Labor, any remedial action which was taken and any other resolution of any such complaint or violation. (Connecticut General Statute 31-53a) On the same sheet describe the policies and procedures that you would implement on this project to ensure that you will remain in compliance with the statutory wage rates and payment of wages as noted above.
- h) On a separate sheet of paper identify any instances in which any complaint has been made to, or any investigation or inquiry has been conducted by, the State of Connecticut Department of Labor regarding any alleged non-compliance by your firm of any provision of Part III of Chapter 557 (CT General Statutes Sections 31-52 through 31-57e, prevailing wage and other requirements) during the past five calendar years. Describe in detail the circumstances of each violation, including but not limited to, the date and nature of the violation, the project on which the violation occurred, the source, the source, if known, of any complaint giving rise to any Department of Labor investigation, the results of any such investigation, the penalty imposed or other action taken by the Department of Labor, any remedial action which was taken and any other resolution of any such complaint or violation. On the same sheet of paper describe the policies and procedures that you would implement on this project to ensure that you will remain in compliance with the statutory wage rates and payment of wages as noted above.
- i) Have you ever been cited or penalized by any government agency for failure to comply with any affirmative action, non-discrimination, or other human rights requirements applicable to any work performed by you? If so, provide on a separate sheet of paper date(s), details, disposition and docket number(s) for each such instance. **YES / NO**