

CITY OF MARINETTE
BIDDER'S PROOF OF QUALIFICATIONS

This Bidder's Proof Of Qualifications must be completed and submitted to the Owner a minimum of five (5) days prior to the Bid Deadline. Bidders who have pre-qualified to bid other street reconstruction/utility projects in 2011 calendar year need not resubmit this from, unless the previous information about the Bidder pertaining to the questions herein has changed since your last approved qualification, or the Owner requests additional information.

On all contracts the bidder shall submit a full and complete statement sworn before an officer authorized to administer oaths, of financial ability, equipment, experience in the work prescribed, and such other matters as the Owner may require for the protection and welfare of the public and itself.

The object of the questionnaire is not to discourage bidding or make it difficult for qualified bidders to file bids. Neither is it intended to discourage beginning contractors. It is intended to make it possible for the Owner to have exact information on financial ability, equipment, personnel and experience in the field of the contracts at hand in order to reduce the hazards involved in awarding contract to parties apparently not qualified to perform them. The Owner reserves the right to require additional information before awarding the contract in order to determine qualifications for the work.

The contents of this questionnaire will be considered confidential to the extent allowed by applicable laws and regulations.

If the Owner is not satisfied with the sufficiency of the answers to the questionnaire and financial statement, it may reject the bid or disregard the same or require additional information.

The following experience record, as of date shown, shall be submitted. All questions shall be answered fully. The contents of this form will be considered confidential to the extent allowed by applicable laws and regulations.

Name of Bidder: _____

Business Address: _____

City	State	Zip Code
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Telephone # _____ Fax # _____

1. Where Organized _____

2. Where Incorporated _____

3. Number of years you have been engaged in the contracting business under the present firm name? _____
As Principal contractor _____ As a Sub-Contractor _____
4. General character of work performed by your firm: _____

5. Class of work you usually sublet: _____

6. Have any members of your concern ever operated under any other business name?
Yes _____ No _____
If yes, attach a statement explaining where, when and the former business name(s).
7. Have you ever failed to qualify as a responsible bidder? _____. If yes, attach a statement explaining why.
8. Have you ever refused to enter into a contract after the award is made to you? _____. If yes, attach a statement explaining why.
9. Has any surety or financial institution ever experienced loss on your concern?
If yes, attach a statement explaining why.
10. Have you ever failed to complete work within the Contract Time limits?
Yes _____ No _____ If yes, attach a statement showing where and why.
If yes, were Liquidated Damages or Penalty paid? Yes _____ No _____
If yes, amount \$ _____ (If any part of question 9 is Yes, attach detailed explanation.)
11. Have you ever defaulted on a contract? Yes _____ No _____
If yes, attach a statement showing where and why.
12. Attach a list of the more important contracts completed by your firm including the kind of work and the contract amount.
13. Attach a list of your major equipment.
14. Attach a statement of your experience in the construction of work similar to this project.
15. Attach a statement of background and experience of the principal members of your personnel including officers.
16. Attach a complete list of your company personnel who will be working on this project. List the personnel by crew.

17. Are there any judgments, suits, or claims pending against you? _____. If yes, attach a statement explaining why.

18. Credit available. Furnish written evidence, preferably from Banks.

19. Financial Statement.

Condition at close of business on _____, 20_____.

Assets:

a. Cash	\$ _____
b. Accounts receivable	\$ _____
c. Real estate equity	\$ _____
d. Materials in stock	\$ _____
e. Equipment, book value	\$ _____
f. Furniture and fixtures book value	\$ _____
g. Other Assets	\$ _____

Liabilities:

h. Accounts, notes and interest payable	\$ _____
i. Other liabilities	\$ _____
Total Liabilities	\$ _____
Net Worth	\$ _____

20. Additional information may be submitted if desired.

Dated at _____ this _____ day of 20____.

Name of Organization _____

By _____

Title _____

State of _____

County _____

_____ Being duly

sworn says he/she is _____

(Name of Organization)

and that the answers to the foregoing questions and all statements contained are true and correct.

Signed: _____

Title: _____

Subscribed and sworn to before me this _____

day of _____ 20_____

_____ Notary Public

_____ County _____

My commission expires _____

Attachments: _____ Sheets