

**MARIN COUNTY STREET LIGHT IMPROVEMENTS
PROJECT NO. CAP-09056
BID PACKAGE REQUEST/QUALIFICATION FORM**

Project Description: This project consists of replacing the existing 1688 High Pressure Sodium street light fixtures, within the Right of Way, with LED light fixtures. The work is to be performed over a 60 working day period requiring multiple crews. In addition, all lights shall be made functional at the end of each work day in order to maintain the same level of service.

The following prequalification form shall be used to determine if a contractor is qualified to bid the referenced project and complete the work. The plans and specifications for the referenced project will be forwarded to each qualified bidder after receipt and evaluation of this form.

CONTRACTOR IDENTITY

Company Name _____
Complete Address _____
Phone Number _____ Fax number _____
Contact Name _____ E-mail address _____
Federal Tax ID # _____
Type of Company: ☐ Corporation ☐ Partnership ☐ Sole Proprietorship
Date formed _____ Number of Employees: Salaried _____ Hourly _____
Average work in place during last 5 years \$ _____ Work under contract \$ _____
Average project size in place last year \$ _____ Uncompleted backlog \$ _____
Size of projects preferred \$ _____ Project location preferred _____
Does the company have offices, plants or warehouses at other locations? ☐ Yes ☐ No
If yes, list addresses. _____

MBE/WBE/SBE/DBE/DVBE CERTIFICATION

Is the company certified? ☐ MBE ☐ WBE ☐ SBE ☐ DBE ☐ DVBE
Certifying Agency(s) _____

BONDING CAPACITY

Are you able to bond projects? ☐ Yes ☐ No Bonding Rate _____ %
Single project limit _____ Aggregate limit _____
Bonding Company/Address _____
Agent Name/Phone # _____

INSURANCE INFORMATION

Workmen's Compensation Modifier _____
General Liability Limits: \$ _____ per occurrence \$ _____ aggregate
Insurance Company/Address _____
Agent Name/ Phone # _____

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BANK REFERENCE Does the company have a line of credit from any lending institution? ☐ Yes ☐ No

Amt. of Credit	Outstanding Balance	Lender's Name/Address	Lending Officer's Name/Phone #
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COMPLETED PROJECTS List four (4) representative similar lighting projects, completed within the public Right of Way which were completed in the last five (5) years .

Name of Project	Contracting Company	Contact Name/Phone No.	Contract Amount	Completion Date
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CURRENT PROJECTS List four (4) representative similar projects currently under construction.

Name of Project	Contracting Company	Contact Name/Phone No.	Contract Amount	% Completed
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TRADE REFERENCES List three (3) of your subcontractors or suppliers.

Company Name	Address	Phone Number	Contact Name
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CLIENT REFERENCES List three (3) clients.

Company Name	Address	Phone Number	Contact Name
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COMPANY'S COMMITMENT TO MITIGATING THE ENVIRONMENTAL IMPACTS OF CONSTRUCTION

Does the company...

- have an environmental mission statement and/or policy? If so, please provide a copy. ☐ Yes ☐ No
- have a waste reduction and recycling program? If so, please provide a copy. ☐ Yes ☐ No
- educate employees and vendors about this program? ☐ Yes ☐ No
- participate in the salvage and/or reuse of waste materials? ☐ Yes ☐ No
If so, please provide information on types, quantities and destination(s).
- utilize recycled content construction materials? ☐ Yes ☐ No
If so, please provide information on types and quantities.

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OTHER INFORMATION In the past five years, has the company...

- operated under any other name? ☐ Yes ☐ No
- had any liens filed against it by any of its subcontractors or suppliers? ☐ Yes ☐ No
- ever failed to complete a contract, been defaulted, or had a contract terminated? ☐ Yes ☐ No
- had liquidated damages assessed against it upon completion of a project? ☐ Yes ☐ No
- or any of its key people been a party to a bankruptcy or reorganization proceeding? ☐ Yes ☐ No
- or any of its key people been involved in any lawsuit arising from a project? ☐ Yes ☐ No
- or any of its key people been investigated for or found to have committed a violation of any labor laws? ☐ Yes ☐ No
- or any of its key people been investigated for or found to have committed a serious OSHA violation (you can research this at <http://www.osha.gov/oshsstats/>)? ☐ Yes ☐ No
- or any of its key people been investigated for or found to have committed a violation of state, federal, or local laws? ☐ Yes ☐ No

Give details for any yes answer. (Use separate sheet if need.) _____

Signature _____
Print Name _____
Title _____
Date _____
Contractor's License No. _____

Please attach: X Financial Statements (last three)
X Key Personnel Resumes
X Insurance Certificate
X Copy of all Contractor's Licenses
X Any additional information