

Rejection/Waiver/Request. The District reserves the right, in its sole discretion, to reject any or all prequalification questionnaires, to waive irregularities in any prequalification questionnaire or to request further information or documentation from any Contractor.

Public Records. Although the names of Contractors seeking prequalification may be public information, pursuant to, without limitation, Public Contract Code sections 20111.5(a) and 20111.6 (b), each Contractor's questionnaire and financial statements "shall not be public records and shall not be open to public inspection.

Appeal. A Contractor may appeal the District's decision. If a Contractor decides to appeal the District's prequalification decision, it must follow the following procedure:

1. Contractor shall submit, in writing, within five (5) working days from District's determination, a request for a written response from the District to explain the District's determination.
2. Within five (5) working days from receipt of the District's written response to the Contractor's request, Contractor may submit, in writing, a request for a meeting with the District's staff. Contractor may submit with the request any and all information that it believes supports a finding that District's determination should be changed.
3. Within five (5) working days from receipt of the District's written response to the Contractor's submittal of information, Contractor may submit, in writing, a request for a meeting with the District's Assistant Superintendent at which time Contractor may discuss information that it believes supports a finding that District's determination should be changed.
4. Within five (5) working days from receipt of the District's written response to the Contractor's request, Contractor may submit, in writing, a request that the District's finding be submitted to the District's Board of Education ("Board"), at which time the Contractor may address the Board pursuant to the Board's procedures for public inquiry.
5. **FAILURE OF A CONTRACTOR TO TIMELY FOLLOW ALL APPEAL STEPS SHALL BE A WAIVER OF THE CONTRACTOR'S RIGHT TO APPEAL THE DISTRICT'S DECISION.**

**AROMAS SAN JUAN UNIFIED SCHOOL DISTRICT
PREQUALIFICATION QUESTIONNAIRE FOR PROSPECTIVE BIDDERS
September, 2020**

CONTRACTOR (OR "FIRM") INFORMATION		
Contractor's company name:		
Address:		
Telephone:		
Mobile telephone:		
E-mail:		
Years in business under current company name:		
Years at the above address:		
Types of work performed with own forces:		
Gross revenue of the Firm for the past three (3) years:		
\$	\$	\$
Submit an audited or reviewed financial statement for the past two (2) full fiscal years. A letter verifying availability of a line of credit may also be attached; however, it will be considered as supplemental information only, and is not a substitute for the required financial statement.		
Name of license holder exactly as on file with the California State License Board:		
License classification(s):		
License number(s):		
License expiration date(s):		
Responsible Managing Officer (RMO) or Employee (RME) for Contractor:		
Number of years license holder has held the listed license(s):		
Number of years Contractor has done business in California under contractor's license law:		
Number of years Contractor has done business in California under current Contractor's license:		
Has your Firm changed name(s) or license number(s) in the past five (5) years? (Y / N). If "yes", explain on a separate signed sheet, including the reason for the change.		
Has there been any change in ownership of the Firm at any time in the past five (5) years? NOTE: A corporation whose shares are publicly traded is not required to answer this question. (Y / N). If "yes", explain on a separate signed sheet, including the reason for the change.		
Is the Firm a subsidiary, parent, holding company, or affiliate of another construction firm? NOTE: Include information about other firms if one firm owns ten percent (10%) or more of another, or if an owner, partner, or officer of your Firm holds a similar position in another firm. (Y / N). If "yes", explain on a separate signed sheet, the name of the related company(ies) and the percent ownership.		
Indicate the form of Contractor's firm (type of business entity):		
<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation, State: _____ <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other: _____		

List the following for each corporation officer, general partner, limited partner, owner, etc. (as applicable) for the Contractor's type of entity. For joint ventures, include this information for each entity in the joint venture and the percent ownership of each joint venture. Attach all additional information on separate signed sheets as needed.

Name	Position	Years with Co.	% Ownership

Identify every construction firm, contractor and/or construction management firm that the Contractor or any person listed above has been associated with (as officer, general partner, limited partner, owner, RMO, RME etc.) at any time during the **past five (5) years** ("Associated Firm"). Include all additional references and/or information on separate signed sheets. NOTE: For this question, "owner" and "partner" refers to ownership of ten percent (10%) or more of the business, or ten percent (10%) or more of its stock if the business is a corporation. include all additional information on separate signed sheets as needed.

Name of Person at Associated Firm	Name of Associated Firm	Contractor's License No. of Associated Firm	Dates of Person's Participation with Associated Firm

CONTRACTOR'S BONDING COMPANY (SURETY) INFORMATION

Name(s) of bonding company(ies) your Firm has utilized over the past five (5) years (not broker or agency):

Address(es) of those bonding company(ies):

Number of years Contractor has been with those bonding company/surety:

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Name of broker/agent:

Address of broker/agent:

Telephone number of broker/agent:

E-mail of broker/agent:

Contractor's total current bonding capacity: \$

CONTRACTOR'S INSURANCE INFORMATION

Name of insurance company(ies) your Firm has utilized over the past five (5) years (not broker or agency):

Address of those insurance company(ies):

"Best" rating(s) for those insurance company(ies):

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Number of years Contractor has been with those insurance company(ies):

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Name of broker/agent:

Address of broker/agent:

Telephone number of broker/agent:

E-mail of broker/agent:

Contractor's current insurance limits for the following types of coverage:

Commercial General Liability	Combined Single Limit (per occurrence)	\$
	Combined Single Limit (aggregate)	\$
Product Liability & Completed Operations	(aggregate)	\$
	(per occurrence)	\$
Automobile Liability – Any Auto	Combined Single Limit (aggregate)	\$
Automobile Liability – Any Auto	Combined Single Limit (per occurrence)	\$
Employers' Liability		\$
Builder's Risk (Course of Construction)		

Workers' Compensation Experience Modification Rate for the past five (5) premium years:

(1) Current year:	(2)	(3)
	(4)	(5)

QUESTIONS

Pass/Fail Questions (Essential Criteria)

1.	Does your Firm currently hold all contractors' license(s) necessary to perform the work and have those license(s) been consistently active for at least five (5) years without revocation or suspension? (Please circle one).	<u>YES</u> <u>NO</u> NO = cannot prequalify
2.	Has your Firm or an Associated Firm been found non-responsible, debarred, disqualified, forbidden, or otherwise prohibited from performing work and/or bidding on work for any public agency within California within the past five (5) years? (Please circle one).	<u>YES</u> <u>NO</u> YES = cannot prequalify
3.	Has your Firm or an Associated Firm defaulted on a contract or been terminated for cause by any public agency on any project within California within the past five (5) years and, if so and if challenged, has that default or termination been upheld by a court or an arbitrator? (Please circle one).	<u>YES</u> <u>NO</u> YES = cannot prequalify
4.	Has your Firm or an Associated Firm or any of their owners or officers been convicted of a crime under federal, state, or local law involving: (1) Bidding for, awarding of, or performance of a contract with a public entity; (2) Making a false claim(s) to any public entity; or (3) Fraud, theft, or other act of dishonesty to any contracting party within the past ten (10) years ? (Please circle one).	<u>YES</u> <u>NO</u> YES = cannot prequalify
5.	Has a performance bond surety for your Firm or a performance bond surety for an Associated Firm had to: (1) Take over or complete a project, (2) Supervise the work of a project, or (3) Pay amounts to third parties, related to construction activities of your Firm or an Associated Firm within the past five (5) years? (Please circle one).	<u>YES</u> <u>NO</u> YES = cannot prequalify



If you answered:
"NO" to questions 1 or
"YES" to questions 2-5 then STOP.
You are not eligible for prequalification at this time.

Scored Questions

1.	<p>Has your Firm paid liquidated damages pursuant to a contract for a project with either a public or private owner within the past five (5) years? (Please circle one).</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the project name(s), damages(s), and date(s).</p>	<p><u>YES</u> <u>NO</u></p>
2.	<p>Has your Firm paid a premium of more than one percent (1%) for a performance and payment bond on any project(s) within the past five (5) years? (Please circle one).</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the project name(s), the premium amount(s), and date(s).</p>	<p><u>YES</u> <u>NO</u></p>
3.	<p>Has any insurer had to pay amounts to third parties that were in any way related to construction activities of your Firm within the past five (5) years? (Please circle one).</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the project name(s), the amount(s) paid, and date(s).</p>	<p><u>YES</u> <u>NO</u></p>
4.	<p>Has your Firm's Workers' Compensation Experience Modification Rate exceeded 1.0 at any time for the past five (5) premium years? (Please circle one).</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the EMR(s) and the applicable date(s).</p>	<p><u>YES</u> <u>NO</u></p>
5.	<p>Has there been a period when your Firm had employees but was without workers' compensation insurance or state-approved self-insurance within the past five (5) years? (Please circle one).</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the reason(s) for not having this insurance and the applicable date(s).</p>	<p><u>YES</u> <u>NO</u></p>
6.	<p>Has your Firm declared bankruptcy or been placed in receivership within the past five (5) years? (Please circle one).</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the type of bankruptcy, the Firm's current recovery plan, and the applicable date(s).</p>	<p><u>YES</u> <u>NO</u></p>
7.	<p>Has your Firm been denied bond coverage by a surety company, or has there been a period of time when your Firm had no surety bond in place during a public construction project when one was required within the past five (5) years? (Please circle one).</p> <p style="text-align: center;">If YES, provide details on a separate signed sheet indicating the date(s) when your Firm was denied coverage and the name of the company or companies which denied coverage; and the period(s) during which you had no surety bond in place.</p>	<p><u>YES</u> <u>NO</u></p>
8.	<p>Has a project owner, general contractor, architect, or construction manager filed claim(s) in an amount exceeding \$50,000 against your Firm, or has your Firm filed claim(s) in an amount exceeding \$50,000 against a project owner, general contractor, architect, or construction manager in the past five (5) years?</p> <p style="text-align: center;">If YES, explain and indicate on separate signed sheet(s) the project name(s), claim(s) and the date(s) of claim(s).</p>	<p><u>YES</u> <u>NO</u></p>

9.	<p>Has your Firm or an Associated Firm been cited and/or assessed any penalties for non-compliance with state and/or federal laws and/or regulations, including public bidding requirements and Labor Code violations, within the past five (5) years?</p> <p>If "YES," indicate on separate signed sheet(s) the project name(s), violation(s), and date(s) of citation(s) and/or assessment(s).</p>	<p><u>YES</u> <u>NO</u></p>
10.	<p>Has your Firm been cited and/or assessed penalties by the Environmental Protection Agency, any air quality management district, any regional water quality control board, or any other environmental agency within the past five (5) years?</p> <p>If "yes," indicate on separate signed sheet(s) the project name(s), violation(s), and date(s) of citation.</p>	<p><u>YES</u> <u>NO</u></p>
11.	<p>Has CAL OSHA and/or federal Occupational Safety and Health Administration cited and assessed penalties against your Firm, including any "serious," "willful" or "repeat" violations of safety or health regulations within the past five (5) years?</p> <p>If "yes," indicate on separate signed sheet(s) the project name(s), violation(s), and date(s) of citation. If the citation was appealed and a decision has been issued, state the case number and the date of the decision.</p>	<p><u>YES</u> <u>NO</u></p>
12.	<p>Has your Firm been required to pay either back wages or penalties for its failure to comply with California's prevailing wage laws, with California's apprenticeship laws or regulations, or with federal Davis-Bacon prevailing wage laws within the past five (5) years?</p> <p>If "yes," indicate on separate signed sheet(s) the project name(s), the nature of the violation(s), the name and owner of the project(s), the number of employees who were initially underpaid and the amount of back wages and penalties that you're Firm was required to pay.</p>	<p><u>YES</u> <u>NO</u></p>
13.	<p>Does your Firm require weekly, documented safety meetings to be held for construction employees and field supervisors during the course of a project?</p>	<p><u>YES</u> <u>NO</u></p>
14.	<p>Provide the name, address and telephone number of the apprenticeship program (approved by the California Apprenticeship Council) from whom you intend to request the dispatch of apprentices to your Firm for use on any public work project for which you are awarded a contract by the District.</p>	
15.	<p>Has your Firm contracted for and completed construction of a minimum of:</p> <ul style="list-style-type: none"> • Three (3) California K-12 public school district construction projects, • Each with a value of at least \$500,000, and • All within the past five (5) years? <p>NOTE: You must list these projects in the "Contractor Project References" Section.</p>	<p><u>YES</u> <u>NO</u></p>

CONTRACTOR PROJECT REFERENCES

List **ALL** projects in which your Firm has participated as a contractor or first-tier subcontractor during the past **five (5) years**

- You may limit your response to the thirty (30) most-recently completed projects, but you **must** include at least the four (4) most recent California K-12 public school projects. Include all information indicated below on separate signed sheets as necessary, and explain or clarify any response as necessary

Project name/identification:
Project address/location:
Project owner, contact person, and telephone:
Project architect name and telephone number:
If Contractor was a subcontractor on the project, name of general contractor and telephone number:
Scope of Work:
Original completion date:
Date completed:
Initial Firm contract value (as of time of bid award):
Final Firm contract value:
Did the project include constructing or modernizing an earthquake resistant building?

CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct:

Date: _____

Proper Name of Contractor: _____

Signature: _____

By: _____ (Print Name)

Title: _____