

CONTRACTOR'S PREQUALIFICATION STATEMENT

(Please use additional sheets as necessary.)

749 Main Street - Louisville, CO 80027 · (303) 335-4608 · Fax (303) 335-4550 · www.louisvilleco.gov

ADDRESS:			PHONE:				
			FAX:				
CON	CONTACT PERSON:		EMAIL:				
1.	Doy	you wish to be qualified as a prime contractor	or, a sub-contractor or both?				
2.	Plea	se check appropriate organizational structur	e:				
	<u>—</u>		artnership ole Proprietorship				
3.	If a	corporation, answer the following:					
	a. b. c:						
4.	If a	sole proprietorship or partnership, answer th					
	a. b.	Date of Organization:Name and address of all partners:					
	c.	If partnership (state whether general or l	imited):				
5.	How	v many years has your organization been in l	ousiness as a Contractor?				
6.	How	How many years has your organization been in business under its present business name?					
7.	Und	nder what other, or former, names has your organization operated?					

List states and categories in which your organization is legally qualified to do business. Indicate relicense numbers, if applicable. List dates on which partnership or trade name was filed:					
List t	the type of work normally performed by your work forces:				
Have	you ever failed to complete any work awarded to you? If so, note when, where, and why:				
	any officer or partner of your organization ever failed to complete a construction contract handled in their name? If so, state name of individual, name of owner and reason therefor:				
anoth	in the last five years, has any officer or partner of your organization ever been an officer or partner of ner organization when it failed to complete a construction contract? If so, state name of individual, other nization, and reason therefor:				
Has y	your organization ever been assessed liquidated damages? If so, state reasons therefor:				
	se list name, address, contact person, phone number, and email address of government agencies with which have performed work within the last 5 years:				
Pleas	se list bank references:				
In wh	nat other similar businesses do you have a financial interest?				
Name	e of Bonding Company(ies) and name(s), address(es) of agent(s), and email addresses for the last five s:				

	a.	Maximum bonding capacity \$		
	b.	Please list all demands placed on the bid bond or performance bond of the firm during the preceding five-year period. Details should include date, project, dollar amount and an explanation of circumstances.		
9.	of Ap	he Applicant or any of its officers or employees, its subsidiary companies and officers thereof, or any oplicant's affiliates or officers thereof, been convicted of bid related crimes or violations within the past years in any jurisdiction? State the current status of any such officer, subsidiary or affiliate		
0.	been Inclu	Applicant organization or any of its principals, personnel, divisions, or affiliates presently or in the past debarred or suspended from entering into contracts with any federal, state, or local governmental entity? de a description of the reasons for such action having been taken, the effective dates thereof and the rumental agency so acting.		

During the past five years, was the applicant, or is the applicant at this time, a party to any court or administrative proceedings where: (1) the violation of any local, state, or federal statute, ordinance, rule or regulation by the applicant was alleged; or (2) the applicant's bid was involved; or (3) the applicant's performance of any public or private construction work was involved and the amount in controversy exceeded \$25,000. If any such proceedings are identified, please provide the following information for each such proceeding:

PLEASE NOTE: The submission of litigation information in other forms, such as letters from attorneys to company auditors and regulatory agency filing statements, WILL NOT satisfy this disclosure requirement, and may substantially delay the processing of the application for prequalification.

- 1. Date action was commenced.
- 2. Name of court, administrative, or arbitration forum.
- 3. Names of parties.
- 4. Docket number
- 5. Subject matter.
- 6. Outcome and/or current status.
- 22. Please attach the following items:
 - a. A complete list of construction projects your organization has in process, giving the name of the project, owner, engineer, contract amount, percentage complete, and scheduled completion date.
 - b. A complete list of projects undertaken by your firm during the past five years. Other details should include the name of the project, owner, engineer, contract amount, number and amount of change orders, date of completion or percent complete and the percentage of the cost of the work performed with your own forces. Indicate whether your company was the general contractor or a sub-contractor.
 - c. Resumes of the key individuals of your organization.

- d. A table showing the number of professional staff assigned for accounting, construction management, estimating engineering, construction quality control, labor relations, and safety.
- e. <u>A Certified Audited Statement</u>: This statement shall cover the applicant's most recently completed fiscal year and shall be signed by a certified public accountant as a "Certified Audited Statement" in which the accountant expresses his opinion on the fairness with which the statement represents the applicant's financial position, results of operations and changes in financial position.
- f. A list of equipment owned or available through lease.

1. It has of equipment owned of available throu	ign rease.			
The undersigned swears that the foregoing statements and atta and includes all material information necessary to identify a				nd correct
(Name of Org	ganization)			
as well as the ownership thereof. It is recognized and acknown and any material misrepresentation will be grounds for termin action under federal or state laws concerning false statements future contracts with the City of Louisville.	ating any cont	ract and/or prec	qualifications and for	r initiating
	Signature of Owner, Officer, President, Chief Executiv Officer			
	Title		Date	
COUNTY OF				
STATE OF				
Subscribed and sworn to before me this day of		, 20_	·	
SIGNED(Notary Public)	() 11	N. 7		
(Notary Public)	(Address of	Notary)		
My Commission Expires:				
Please return completed form and attachments to:	Der City 749	of Louisville partment of Pul Engineer Main Street hisville, CO 80	blic Works	
OR submit via email (preferred) to:	pwe	orks@louisvil	leco.gov	