



SAN DIEGO UNIFIED SCHOOL DISTRICT

STRATEGIC SOURCING AND CONTRACTS

MEP SUBCONTRACTOR PREQUALIFICATION FORMS FOR CONSTRUCTION CONTRACTS

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BIDDER'S QUALIFICATION AND VERIFICATION FORMS**CONTRACTOR'S STATEMENT OF EXPERIENCE
AND FINANCIAL CONDITION****REQUEST FOR PREQUALIFICATION OF BIDDERS**
(Public Contract Code Section 20111.6)

This requirement is for all contracts estimated at \$1,000,000 or over, awarded after January 1, 2014.

Each mechanical, electrical and plumbing (MEP) contractor wishing to perform work as a subcontractor to a prime contractor bidding to San Diego Unified School District for projects estimated at \$1,000,000 or over must fully complete this Questionnaire and provide all materials requested herein. The prequalification will remain in effect for 12 months from the notice of qualification.

Answers to questions contained in the attached Prequalification Questionnaire are required, including a complete statement of experience in performing public works projects. These documents will be the basis of qualifying a subcontractor wishing to work for a District prequalified prime contractor. The District reserves the right to check other sources available. Omission of, or refusal to supply, requested information can result in automatic disqualification.

The Questionnaire is not a public record and is not open to public inspection. All information provided will be kept confidential to the extent permitted by law. San Diego Unified School District reserves the right to reject any and all Prequalification Questionnaires and to waive any irregularities in the information contained therein.

Each Questionnaire must be signed under penalty of perjury by an individual who has the legal authority to bind the contractor on whose behalf that person is signing. If any information provided by a contractor becomes inaccurate, the contractor must immediately notify the awarding body and provide updated accurate information in writing and under penalty of perjury.

NOTICE: The following contractor mechanical, electrical and plumbing (MEP) classifications must be prequalified to work for a bidding prime contractor:

C-4, C-7, C-10, C-16, C-20, C-34, C-36, C-38, C-42, C-43 and C-46.

SUBMISSION OF COMPLETED STATEMENTS

Due to precautionary measures, the San Diego Unified School District, Strategic Sourcing and Contracts personnel are working from home with modified access. During this time, please submit your completed prequalification application with the required documentation to prequal@sandi.net and copy Linda Hippe at lhippe@sandi.net. Please mark "Confidential" in subject line.

Email completed Contractor's Statement of Experience and Financial Condition along with the following:

- California Contractor's License
- CalOSHA 300 logs for past 3 years
- Letter of Bondability
- Certificate of Insurance
- Current Financial Statement

To: San Diego Unified School District
Strategic Sourcing and Contracts Department
Attn: Linda Hippe, Contracts Administration Supervisor, Construction
2351 Cardinal Lane, Building M
San Diego, CA 92123

Please mark envelope "Confidential"

BASIS FOR PREQUALIFICATION

1. Contractor will have answered “YES” to all of the Quick Check questions on Page 5 following.
2. Contractor must not have answered “YES” to *any* of the questions cited in SECTION 1 – DISQUALIFYING QUESTIONS.
3. Contractor must have *completed* a minimum of three (3) directly contracted or subcontracted **public works projects** in the State of California within the last five (5) years.
4. Contractor must score a minimum of 80 points in SECTION 4 – SCORED INTERVIEW QUESTIONS.

Quick Check

Should you fill out this Questionnaire?

The following are screening statements, which should be used to determine whether or not you pass the test to require you to enter the prequalification process.

You must be able to answer “YES” to each statement below.

1. Your firm is a subcontractor holding one of the license classifications listed on Page 2 intending to submit a bid to a prime contractor bidding to the District on any project of \$1,000,000 or more.
2. Your firm possesses a valid and current California Contractor’s license in the proper classification(s) for which it will perform for the project or projects for which it intends to bid.
3. Your firm has general liability insurance with a policy limit of at least \$500,000 per occurrence and \$1,000,000 aggregate.
4. Your firm has a current workers’ compensation insurance policy as required by the Labor Code or it is legally self-insured pursuant to Labor Code Section 3700 et seq.
5. Your firm has *completed* at least three (3) directly contracted or subcontracted public works construction projects in the State of California within the last five (5) years. (Public Works is defined as facilities built for government agencies including school districts, special districts, local, county, state and federal agencies and requiring prevailing wage rates paid to workers.)
6. Your firm is eligible to bid on a Public Works contract as per Sections 1777.1 and 1777.7 of the Labor Code.

If you can answer “Yes” to all of the above statements, please proceed with submission of this package.

**BEFORE YOU SUBMIT YOUR PREQUALIFICATION QUESTIONNAIRE
HAVE YOU DONE THE FOLLOWING?**

- Have you completed all the information required in Section 2 – General Information beginning on page 9? Be sure to identify a specific project you are prequalifying for, if applicable.
- Did you include the CalOSHA 300 logs for past 3 years required on page 15? NOTE: Summaries are not acceptable. To see an example of a 300 log please see the Appendices section at the back of the Questionnaire package.
- Did you include the Letter of Bondability from your bonding surety required on page 9?
- Did you include a current (within the last 2 years) financial statement required on page 9?
- Have you completed all the information required in Section 3 – Organization History, Performance and Compliance with Civil and Criminal Laws beginning on page 11?
- Did you sign the affidavit on page 16?
- Did you include a Certificate of Insurance required on page 18?
- Did you include three (3) recent construction projects and all of the requested information in Section 7 starting on page 19? NOTE: Please include CURRENT contact information for the projects listed.

If you have any questions regarding the questionnaire or its requirements, please contact (858)522-5832 or prequal@sandi.net.

SECTION 1 - DISQUALIFYING QUESTIONS

A “Yes” response to *any* of the following questions will result in automatic disqualification from bidding on San Diego Unified projects.

1. Is your firm currently the debtor in a bankruptcy case?
 Yes No
If Yes, please explain on an attached separate sheet of paper.
2. Have *any* of your contractor’s licenses been revoked at any time in the last five (5) years?
 Yes No
If Yes, please explain on an attached separate sheet of paper.
3. In the last five (5) years has your firm, or any firm with which any of your company’s owners, officers or partners was associated, been debarred, disqualified, defaulted, found non-responsible, terminated for cause, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason? This includes any agreement in which your firm voluntarily agrees not to bid.
NOTE: “Associated with” refers to another construction firm in which an owner, partner or officer of your firm held a similar position, and which is listed in response to Section 3, question 1c or 1d in this questionnaire.
 Yes No
If Yes, please explain on an attached separate sheet of paper.
4. In the last five (5) years, has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?
 Yes No
If Yes, please explain on an attached separate sheet of paper
5. At any time during the last five (5) years, has any surety company made any payments on your firm’s behalf as a result of a default, to satisfy any claims made against a **payment** bond issued on your firm’s behalf in connection with a construction project, either public or private?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.
6. At any time during the last five (5) years, has any surety company made any payments on your firm’s behalf as a result of a default, to satisfy any claims made against a **performance** bond issued on your firm’s behalf in connection with a construction project, either public or private?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.
7. Has your firm, or any of its owners, officers, or partners ever been found liable in a civil suit, or found guilty in a criminal action, for making any false claim or material misrepresentation to any public agency or entity?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.
8. Has your firm, or any of its owners, officers or partners ever been convicted of a crime involving any federal, state, or local law related to construction, either public or private?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.

9. Has your firm or any of its owners, officers or partners ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.
10. Has CAL OSHA cited and assessed penalties against your firm for any “serious,” “willful” or “repeat” violations of its safety or health regulations in the last five (5) years?
Note: If you have filed an appeal of a citation and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.
11. At any time in the last five (5) years, has your firm or any of its owners or officers been convicted of a crime involving the awarding of a contract of a government construction project, or the bidding or performance of a government contract?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.
12. At the time of submitting this prequalification form, is your firm ineligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code sections 1777.1 or 1777.7?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.

CONTRACTOR'S STATEMENT OF EXPERIENCE AND FINANCIAL CONDITION

SECTION 2 - GENERAL INFORMATION

Contractor: (As name appears on license) Check One: Corporation Partnership Sole Prop. Joint Venture

Address:

Contact Person: Contact's phone:

Email address:

Main Phone: Main Fax Number:

License #: Class: Exp. Date:

Other classification(s) held, if any, and license number(s):

Dept. of Industrial Relations, Public Works Contractor Registration Number

District Use Only: Verified by District on via License Clear: Yes No (www.cslb.ca.gov web page or 1-800-321-2752 for computer)

Tax ID Number: Date Business Formed: Corporate Identification Number:

1. In what type of construction do you specialize?

2. Attach a statement from a surety company (approved by the California Department of Insurance) authorized to issue bonds in the State of California, which states your current available bonding capacity. NOTE: Statement must be from the surety company, not an agent or broker.

District Use Only: Verified by District on

3. Attach a copy of your most current (within the last 18 months) financial statement. NOTE: Statement does not need to be either reviewed or audited.

District Use Only: Verified by District on, dated

4. Are you currently prequalified with any other school district or public agency in San Diego County ___ Yes ___ No

If yes, list ALL agencies for which you have already prequalified:

5. Is your firm an EBE? (Emerging business enterprise?) ___ Yes ___ No. *If Yes, list all of your certifications.* _____

(Visit San Diego Unified’s Business Outreach website at www.sandi.net/page/934 to get on the opportunities database and learn how to do business with the district.)

6. Is your firm a DVBE contractor? ___ Yes ___ No. *If Yes, list your DGS certification number, or if you are certified through SDVOB please provide a copy of your verification letter.*

7. Is your firm willing to be a subcontractor on Project Stabilization Agreement (PSA) jobs and abide by the terms and conditions of the PSA? ___ Yes ___ No

If your answer is No, you will not be prequalified to work as a subcontractor on any District construction projects at \$1,000,000 or over, utilizing school bond proposition funds.

8. Is your firm a union signatory? ___ Yes ___ No. *If Yes, list each craft:*

9. If the answer to #7 above was “Yes”, list your firm’s core workers, i.e. workers that have been in your employment for 30 out of the last 180 days, possesses all necessary certifications/licenses to perform craft work (if any), and is a resident of San Diego County:

10. Are you interested in attending any District training sessions for PSA? ___ Yes ___ No

If so visit San Diego Unified’s PSA web page at <https://www.sandiegounified.org/project-stabilization-agreement-psa> for more information and a list of contacts.

11. List any specific SDUSD project(s) you are prequalifying for, if applicable.

**SECTION 3 - ORGANIZATION HISTORY, PERFORMANCE, AND COMPLIANCE
WITH CIVIL AND CRIMINAL LAWS**

A. Current Organization and Structure of the Business

For Firms That Are Corporations:

- 1a. Date incorporated: _____
- 1b. Under the laws of what state: _____
- 1c. Provide all the following information for each person who is either (a) an officer of the corporation (president, vice president, secretary, treasurer), or (b) the owner of at least ten per cent of the corporation's stock.

Name	Position	Years with Co.	% Ownership

- 1d. Identify every construction firm that any person listed above has been associated with (as owner, general partner, limited partner or officer) at any time during the last five years.
NOTE: For this question, "owner" and "partner" refer to ownership of ten per cent or more of the business, or 10 per cent or more of its stock, if the business is a corporation.

Person's Name	Construction Firm	Dates of Person's Participation with Firm

- 1e. Provide a copy of most recent certification from the California Secretary of State indicating standing.

For Firms That Are Partnerships:

- 1a. Date of formation: _____
- 1b. Under the laws of what state: _____
- 1c. Provide all the following information for each partner who owns 10 per cent or more of the firm.

Name	Position	Years with Co.	% Ownership

- 1d. Identify every construction company that any partner has been associated with (as owner, general partner, limited partner or officer) at any time during the last five years.
NOTE: For this question, "owner" and "partner" refer to ownership of ten per cent or more of the business, or ten per cent or more of its stock, if the business is a corporation.

Person's Name	Construction Company	Dates of Person's Participation with Firm

For Firms That Are Sole Proprietorships:

- 1a. Date of commencement of business _____
- 1b. Social security number of company owner _____
- 1c. Identify every construction firm that the business owner has been associated with (as owner, general partner, limited partner or officer) at any time during the last five years.
NOTE: For this question, “owner” and “partner” refer to ownership of ten per cent or more of the business, or ten per cent or more of its stock, if the business is a corporation.

Person’s Name	Construction Company	Dates of Person’s Participation with Co.

B. History of the Business and Organizational Performance

- 2. Has there been any change in ownership of the firm at any time during the last three (3) years?
NOTE: A corporation whose shares are publicly traded is not required to answer this question.
 Yes No
If Yes, explain on a separate signed page.
- 3. Is the firm a subsidiary, parent, holding company or affiliate of another construction firm?
NOTE: Include information about other firms if one firm owns 50 per cent or more of another, or if an owner, partner, or officer of your firm holds a similar position in another firm.
 Yes No
If Yes, explain on a separate signed page.
- 4. Are any corporate officers, partners or owners connected to any other construction firms?
NOTE: Include information about other firms if an owner, partner, or officer of your firm holds a similar position in another firm.
 Yes No
If Yes, explain on a separate signed page.
- 5. How many years has your organization been in business in California as a contractor under your present business name and license number? _____
- 6. Was your firm in bankruptcy at any time during the last five (5) years?
 Yes No
If Yes, explain on a separate page.

C. Licenses

- 7. If any of your firm’s license(s) are held in the name of a corporation or partnership, list below the names of the qualifying individual(s) listed on the CSLB records who meet(s) the experience and examination requirements for each license.

- 8. Has your firm changed names or license number in the last five (5) years?
 Yes No
If Yes, explain on a separate signed page, providing prior name/license number, date of change and circumstances surrounding the change.

9. Has any owner, partner or (for corporations:) officer of your firm operated a construction firm under any other name in the last five (5) years?
 Yes No
If Yes, explain on a separate signed page, provide the prior name, the date of change and the circumstances surrounding the change.
10. Has any CSLB license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five (5) years?
 Yes No
If Yes, please explain on an attached separate sheet of paper

D. Contractual Obligations and Disputes – SD Unified Projects

11. At any time during the last five (5) years has your firm received one or more “Notices of Non Compliance” from the District’s representative on District projects?
 Yes No
If Yes, explain on a separate signed page, providing the project name(s), contract number(s), date of award and circumstances related to your receipt of the notice
12. At any time in the last five (5) years has your firm filed two or more requests to withdraw or to be released from a District bid?
 Yes No
If Yes, explain on a separate signed page, providing the project name(s), contract number(s) and the circumstances under which you sought withdrawal.
13. At any time during the last five (5) years has your firm been penalized for illegal/improper Substitution of a Listed Subcontractor on District projects?
 Yes No
If Yes, explain on a separate signed page, providing the project name(s), contract number(s), the name(s) of the subcontractor(s).
14. At any time in the last five (5) years, has your firm been assessed and paid liquidated damages after completion of a project on District projects
 Yes No
If Yes, please explain on an attached separate sheet of paper.

E. Contractual Obligations and Disputes – All Public Works Projects

15. In the last five (5) years, has your firm been involved in any arbitration, mediation, or other dispute resolution process, or litigation with a project owner, filed any claims with a project owner or had any claim filed against it by a project owner, regardless of outcome?
 Yes No
If “Yes,” on separate signed sheets of paper identify the claim by providing the project name, date of the claim, name of the entity (or entities) against whom the claim was filed, a brief description of the nature of the claim, the court in which the case was filed and a brief description of the status of the claim (pending, or if resolved, a brief description of the resolution).
16. In the last five (5) years, has any insurance carrier, for any form of insurance, refused to renew the insurance policy for your firm?
 Yes No
If Yes, please list all instances with explanations on an attached separate sheet of paper.

17. Has your firm been required to pay a premium of more than two per cent (2%) for a performance and payment bond on any project(s) on which your firm worked at any time during the last three years?

Yes No

If Yes, state the percentage that your firm was required to pay and provide an explanation for a percentage rate higher than two per cent on an attached separate sheet of paper.

_____ %

18. During the last five (5) years, has your firm ever been denied bond credit by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required?

Yes No

If Yes, please list all instances with explanations on an attached separate sheet of paper.

F. Worker Safety, Prevailing Wage, Workers Compensation, Apprenticeship – All Public Works Projects

19. Within the past five (5) years has the Department of Industrial Relations/Division of Labor Standards Enforcement found your firm or, if a General Contractor, your subcontractors to have failed to pay prevailing wage on a public works project?

Yes No

If Yes, please explain _____

20. Has there been more than one occasion during the last five (5) years on which your firm was required to pay either back wages or penalties for your own firm's failure to comply with the state's prevailing wage laws?

Yes No

NOTE: This question refers only to your own firm's violation of prevailing wage laws, not to violations of the prevailing wage laws by a subcontractor.

If Yes, please list all instances with explanations on an attached separate sheet of paper.

21. During the last five (5) years, has there been more than one occasion on which your own firm has been penalized or required to pay back wages for failure to comply with the federal Davis-Bacon prevailing wage requirements?

Yes No

If Yes, please list all instances with explanations on an attached separate sheet of paper.

22. Has the EPA, Department of Environmental Health or any Air Quality Management District or any Regional Water Quality Control Board or any other agency with competent jurisdiction cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor, in the last five (5) years?

NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.

Yes No

If Yes, please list all instances with explanations on an attached separate sheet of paper.

23. How often do you require documented safety meetings to be held for construction employees and field supervisors during the course of a project? _____

- 24. List your firm’s Experience Modification Rate (EMR) (California workers’ compensation insurance) for each of the past three premium years.

Current year: _____
 Previous year: _____
 Year prior to previous year: _____

If your EMR for any of these three years is or was 1.00 or higher, attach a letter of explanation.

NOTE: An Experience Modification Rate is issued to your firm annually by your workers’ compensation insurance carrier.

- 25. Within the last five (5) years, has there ever been a period when your firm had employees but was without workers’ compensation insurance or state-approved self-insurance?
 Yes No

If Yes, please list all instances with explanations on an attached separate sheet of paper.

- 26. Attach copies of OSHA 300 Logs from the past 3 years. SEE APPENDICES FOR EXAMPLE OF FORM 300 LOG. Summaries (300A) are NOT acceptable unless there were no injuries for that year.

District Use Only: Verified by District by _____ on _____, for _____ years.
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- 27. Provide the name, address, and telephone number of the apprenticeship program sponsor(s) (approved by the California Division of Apprenticeship Standards) that will provide apprentices to your company for use on any public work project for which you are awarded a contract by San Diego Unified School District.

- 28. If your firm operates its own State-approved apprenticeship program:
 - a. Identify each craft or crafts in which your firm provided apprenticeship training in the past year.
 - b. State the year in which each such apprenticeship program was approved, and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s).
 - c. State the number of individuals who were employed by your firm as apprentices at any time during the past three (3) years in each apprenticeship and the number of persons who, during the past three (3) years, completed apprenticeships in each craft while employed by your firm.

Provide all requested information on a separate sheet of paper and attach to this Questionnaire.

- 29. At any time during the last five (5) years, has your firm been found to have violated any provision of the California apprenticeship laws or regulations, or the laws pertaining to the use of apprentices on public works?
 Yes No

If yes, provide the date(s) of such findings, and attach copies of the Department’s final decision(s).

I, the undersigned, as an authorized agent of my firm, certify and declare that I have read all the foregoing answers and accompanying documents to this prequalification questionnaire and know their contents. The matters stated in the questionnaire answers are true of my own knowledge and belief. I declare under penalty of perjury under the laws of the State of California, that all information provided in this application is true and correct. In addition, by submitting this application, I am authorizing the District to verify all information and contact any and all references listed in order to determine prequalification.

Signed: _____ Dated: _____

Print Name: _____ Title: _____

Place of Execution: _____

SECTION 4 - SCORED INTERVIEW QUESTIONS

The following questions will be used to interview randomly selected contacts from at least two (2) completed projects. If you performed work as a subcontractor on any or all of your listed projects, District will contact the general contractor for the project for the interview questions. If you have performed on projects as a prime contractor for the District within the last five (5) years, District will interview the project and construction managers for the project for the two (2) most recently completed projects. The District will conduct the interviews. No action on the contractor's part is necessary. These questions are included on the package given to the contractor for information only.

The highest possible score on any single project is 100 points. An average score of less than 80 points disqualifies a subcontractor from working on projects that are proposed by San Diego Unified School District.

1. Are there any outstanding stop notices, liens or claims by the contractor that are currently unresolved on contracts for which notices of completion are recorded? (10 points if none)
2. Please rate the contractor's performance regarding the amount of supervision required by the owner during execution of the project. (10 points maximum)
3. Please rate the contractor's performance in providing reports and other paperwork, including change order paperwork and scheduling updates in a timely manner. (10 points maximum)
4. Did the contractor finish their portion of the project on schedule? Please rate the contractor's performance on the following factors:
 - a. Providing sufficiently experienced supervision over the project (10 points maximum)
 - b. Adequately staffing the project (10 points maximum)
 - c. Providing sufficient equipment to perform the work in a timely manner on the project (10 points maximum)
 - d. Required supervision from owner (10 points – minimal supervision, 0 points – excessive supervision)
5. Were there any change orders on the project? Please rate the contractor's performance on the following factors:
 - a. The quality of the change order work (10 points maximum)
 - b. Providing timely submission of cost and time estimates to perform change order work (10 points maximum)
 - c. How well the contractor integrated the change order work into the existing work (10 points maximum)

SECTION 5 - INSURANCE

Do you currently have a minimum of \$500,000 per occurrence and \$1,000,000 aggregate Combined Comprehensive Single Limit Liability Insurance? ____ Yes ____ No.

If you do not have the minimum insurance requirement, how much is your current coverage for Combined Comprehensive Single Limit Liability Insurance?

\$ _____ Per Occurrence \$ _____ Aggregate

Attach your certificate of insurance (ACORD) with your submitted questionnaire.

NOTE: Provide 2 years history of insurance coverage, using a separate page if necessary. Include phone numbers and contact names.

Current Insurance Company Information Name: _____
Address: _____
Years with Current Insurance Co.: _____
Phone #: () _____
Contact: _____

Prior Insurance Company Information Name: _____
(Provide if under 2 years with current agency) Address: _____
Years with Prior Insurance Co.: _____
Phone #: () _____
Contact: _____

District Use Only: Verified by District by _____ on _____ by speaking with _____ Comments: _____ _____ Certificate of Insurance attached? ____ Yes ____ No Expiration date of insurance: _____
--

SECTION 6– RECENT CONSTRUCTION PROJECTS COMPLETED

Contractor shall provide information about its three (3) ***recent/largest public works prime contracts or subcontracts completed*** in the State of California within the last five (5) years. ***Names and references must be current and verifiable.***

1. **Project Name:** _____

Location: _____

Owner/Government Agency: _____

Owner Contact (name, title and *current* phone number): _____

Was your company a Prime contractor on this project? (yes / no) _____

Prime Contractor (firm): _____

Prime Contractor Contact (name, title and phone number): _____

Owner/GC’s Construction Manager and/or Project Manager:

NOTE: This person must have been on the project site and can evaluate your company’s performance. (Provide person’s name, title, employer and verified *current* phone number):

Description of Project, Scope of Work Performed: _____

Date work completed _____ Subcontract Value: _____

2. **Project Name:** _____

Location: _____

Owner/Government Agency: _____

Owner Contact (name, title and *current* phone number): _____

Was your company a Prime contractor on this project? (yes / no) _____

Prime Contractor (firm): _____

Prime Contractor Contact (name, title and phone number): _____

Owner/GC's Construction Manager and/or Project Manager:

NOTE: This person must have been on the project site and can evaluate your company's performance. (Provide person's name, title, employer and verified *current* phone number):

Description of Project, Scope of Work Performed: _____

Date work completed _____ Subcontract Value: _____

3. Project Name: _____

Location: _____

Owner/Government Agency: _____

Owner Contact (name, title and *current* phone number): _____

Was your company a Prime contractor on this project? (yes / no) _____

Prime Contractor (firm): _____

Prime Contractor Contact (name, title and phone number): _____

Owner/GC's Construction Manager and/or Project Manager:

NOTE: This person must have been on the project site and can evaluate your company's performance. (Provide person's name, title, employer and verified *current* phone number):

Description of Project/Scope of Work Performed: _____

Date work completed _____ Subcontract Value: _____

List recent projects completed for *California school districts*, including community college districts, in the last five (5) years (if not listed above): **NOTE:** You may list up to two (2) San Diego Unified School District projects. Use a separate sheet if needed.

School District _____ Contract \$ _____ Date Completed _____ Job Name/Work Performed _____ Was your company the Prime? Yes ___ No ___ If not, list Prime _____ Owner Contact (PM/CM/Super) _____ Title _____ Phone _____ Prime Contact (PM/CM/Super) _____ Title _____ Phone _____
School District _____ Contract \$ _____ Date Completed _____ Job Name/Work Performed _____ Was your company the Prime? Yes ___ No ___ If not, list Prime _____ Owner Contact (PM/CM/Super) _____ Title _____ Phone _____ Prime Contact (PM/CM/Super) _____ Title _____ Phone _____
School District _____ Contract \$ _____ Date Completed _____ Job Name/Work Performed _____ Was your company the Prime? Yes ___ No ___ If not, list Prime _____ Owner Contact (PM/CM/Super) _____ Title _____ Phone _____ Prime Contact (PM/CM/Super) _____ Title _____ Phone _____
School District _____ Contract \$ _____ Date Completed _____ Job Name/Work Performed _____ Was your company the Prime? Yes ___ No ___ If not, list Prime _____ Owner Contact (PM/CM/Super) _____ Title _____ Phone _____ Prime Contact (PM/CM/Super) _____ Title _____ Phone _____
School District _____ Contract \$ _____ Date Completed _____ Job Name/Work Performed _____ Was your company the Prime? Yes ___ No ___ If not, list Prime _____ Owner Contact (PM/CM/Super) _____ Title _____ Phone _____ Prime Contact (PM/CM/Super) _____ Title _____ Phone _____

4. List two (2) current principle Trade Suppliers

Company	Material Provided	Contact	Phone #

5. List three (3) current principle Trade Subcontractors

Company	Service Provided	Contact	Phone #

District Use Only: Supplier - Reference Verification <u>Supplier #1</u> Co. Name: _____ Spoke With: _____ Annual Volume: _____ Pd. at terms: Yes _____ No _____ Last usage date: _____ Ver. by _____ on _____ Comments: _____ <u>Subcontractor #1</u> Co. Name: _____ Spoke With: _____ Annual Volume: _____ Pd. at terms: Yes _____ No _____ Last usage date: _____ Ver. by _____ on _____ Comments
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6. List experience record of staff:

Name	Position	Years With Firm	Experience

APPENDICES

DISTRICT PREQUALIFICATION STANDARDS FOR SUBCONTRACTORS

- (1) Contractor's Statement of Experience
- (2) Appropriate California Contractor's License
- (3) Contractor's Financial Statement and Letter of Bondability
- (4) Certificate of Insurance

Only one (1) copy of the prequalification is required to be submitted. A new and current submittal shall be required each year by the anniversary date of initial qualification. A Contractor may also file new statements quarterly if there is substantial change in the Contractor's financial status, and a new rating based on the latest statement will be issued. In no case will prequalification remain in effect longer than one (1) year from the date of notice of prequalification. The District reserves the right to update or modify the Questionnaire at any time, which may result in a different Questionnaire being issued for any subsequent annual re-qualification. The following items must be provided or the prequalification submittal will not be accepted.

PUBLIC WORKS REQUIREMENTS

Prequalification requires the successful completion of at least three (3) public works prime or subcontracts completed in the state of California in the last five (5) years.

FINANCIAL INFORMATION

A. Financial Statement Requirements

A current financial statement will be required for bidding subcontracts on District projects estimated at \$1,000,000 or over. The statement must be no older than two (2) years old. The statement is not required to be either reviewed or audited by a certified public accountant.

B. Term of Financial Statements

A Contractor's financial information is valid until the date shown is more than twelve (12) months old. The District reserves the right to reject statements in which the financial information is more than twelve (12) months old. All applicable portions of the form should be completed with schedules attached if the space provided does not suffice.

BONDABILITY

The bonding surety is required to be an authorized surety in the state of California with an A.M. Best Key Rating of A-:VII or better. It is required that the contractor includes a letter of bondability from the surety indicating their support levels.

INSURANCE

A minimum \$1,000,000 per occurrence and \$2,000,000 aggregate combined comprehensive single limit liability insurance is required for all projects.

NOTIFICATION OF PREQUALIFICATION RESULT

Completed prequalification forms must be submitted no later than **10 days prior to bid opening due date** (*in accordance with Public Contract Code 20111.6*).

Contractors will be notified of their prequalification rating by fax or US mail, as well as posted to a list of prequalified contractors on the District's website. Notification will be made as soon as possible, but no later than 5 days prior to bid opening.

PROCEDURE FOR APPEAL OF PREQUALIFICATION RESULTS

An appeal of prequalification results must be made in writing (e-mail is not acceptable). The appeal must be filed and received by the Contracts Administration Supervisor, at the address as mentioned herein, not more than five (5) calendar days following the date of issuance of the District's letter of denial of prequalification; and the written appeal sets forth, in detail, all grounds for the appeal, including without limitation all facts, supporting documentation, legal authorities and argument in support of the grounds for the appeal; any matters not set forth in the written appeal shall be deemed waived. All factual contentions must be supported by competent, admissible and creditable evidence.

Within thirty (30) days after receipt of the Contractor's request the District will call to order a three-member appeal panel made up of Facilities Planning and Construction management/supervisory staff or any other staff deemed qualified by the District. The Contractor and up to three (3) representatives are invited to appear in person to bring before the appeal panel any additional or new information; Contractor's testimony shall be limited to twenty (20) minutes. The panel shall advise the Contractor on the points where his/her questionnaire response has fallen below the minimum required number of points to qualify, and allow the Contractor to speak to the issues. The Contractor is then released from the meeting and the panel members shall come to consensus on whether or not to allow the Contractor to prequalify. The Contractor will be faxed notification of the appeal panel's decision within five (5) days after the meeting.

If Contractor is not prequalified, they may not submit a new prequalification questionnaire for a period of one (1) year from date of disqualification. If Contractor requests an appeal and loses the appeal, the disqualification shall be for one (1) year from date of the panel's written decision.

Example of OSHA Form 300

Cal/OSHA Form 300 (Rev. 7/2007) Appendix A
Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes. See CCR Title 8 14300.29(b)(8)-(10)



You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in CCR Title 8 Section 14300.8 through 14300.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (Cal/OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local Cal/OSHA office for help.

Establishment name _____
City _____ State _____

Identify the person		Describe the case				Classify the case				Enter the number of days the injured or ill worker was:		Check the "injury" column or choose one type of illness:						
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	Death	Days away from work	Job transfer or restriction	Other recordable cases	(K)	(L)	(M) Injury	(1) Skin disorder	(2) Stress disorder	(3) Respiratory condition	(4) Poisoning	(5) Hearing loss	(6) All other illnesses
						(G)	(H)	(I)	(J)	days	days	(1)	(2)	(3)	(4)	(5)	(6)	
			mon/tues/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			mon/tues/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			month/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			mon/tues/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			month/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			mon/tues/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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			month/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			mon/tues/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			month/day			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	___ days	___ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Page totals: _____
Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Page ___ of ___