

CONTRACTOR : _____

**CONTRACTOR
PRE-QUALIFICATION PROGRAM**

Marin City Health and Wellness Center

MARIN CITY HEALTH AND WELLNESS CENTER CONTRACTOR PRE-QUALIFICATION PROGRAM PROCEDURES

NOTICE TO ALL BIDDERS: In order to maintain a satisfactory standard of quality for performance and consistency in the construction and maintenance of its facilities, the Marin City Health and Wellness Center ("Clinic") has adopted a Contractor Pre-qualification Program pursuant to California Public Contract Code 20111.5 for all Capital Improvement and Public Works contracts.

HOW DO I PRE-QUALIFY?

- ◆ Submit a complete and signed Contractor Qualification Statement.

As part of this Program, the Clinic requires completion and timely submission of its Contractor Qualification Questionnaire at the time and date for submission of completed Contractor Qualification Questionnaire. The Clinic shall accept Contractor Qualification Statements twice per year on a date publicly advertised by the Clinic.

In order to permit the Clinic sufficient time to review and process applications for pre-qualification, a bidder must be pre-qualified at least five (5) Clinic business days prior to the bid opening date for a contract for which the bidder wishes to be considered. A Clinic business day is a regularly scheduled workday for Clinic staff, excluding weekends and holidays.

Contractors must provide full and complete answers to the questions in the Contractor Qualification Questionnaire. Bidders must sign and date their Pre-Qualification Questionnaires and the Pre-Qualification Questionnaires must be signed by persons duly authorized to sign on behalf of the bidder. The District may reject an incomplete Pre-Qualification Questionnaire. The Clinic reserves the right to request additional information from a bidder as part of the Clinic's Pre-Qualification Program. The Clinic reserves the right to waive any minor irregularities in its Pre-Qualification Process and/or any minor irregularities in the Pre-Qualification Questionnaires submitted as part of this Process.

Contractor Qualification Questionnaires must be submitted in a sealed envelope indicating the name and address of the bidder on the outside of the envelope. The envelope must also state as follows: Contractor Pre-Qualification Program, 880 Las Gallinas Ave, Suite #2, San Rafael, California 94903, Attention: Cathy Torres Mercado, Marin City Health and Wellness Center.

- ◆ The Clinic will notify bidders of their pre-qualification status in writing, in a letter dated at least five (5) business days following submission of their completed Contractor Qualification Questionnaire.

The Contractor Qualification Questionnaire will be read and evaluated by the Clinic. Bidders will be notified of their pre-qualification status by a letter dated five (5) business days after submission of the bidder's Contractor Qualification Questionnaire, unless such time is extended by the Clinic. The Clinic has adopted a uniform system of rating bidders on the basis of their completed questionnaires, in order to determine whether the bidder is qualified to bid on contracts. Bidders receiving a satisfactory score will be deemed qualified to bid on Clinic projects.

WHAT IF I WANT TO BID, BUT I AM NOT PRE-QUALIFIED?

Bids submitted by contractors who have not pre-qualified, as evidenced by a true and correct letter of pre-qualification issued by the Clinic, shall be deemed invalid and non-responsive. Such bids shall be rejected by the Clinic and may be returned unopened.

CAN A CONTRACTOR APPEAL A PREQUALIFICATION DECISION?

If a bidder has submitted a timely pre-qualification questionnaire and the Clinic has declined to accept that bidder as pre-qualified to bid on Clinic projects, that bidder may appeal the Clinic's decision on its pre-qualification status through the procedures set forth herein. An application for pre-qualification is timely if it is submitted within the time limits issued by the Clinic in a public notice. The Clinic reserves the right to reject any application for pre-qualification that has not been submitted timely and in accordance with the Clinic's Pre-Qualification Program Procedure. It is the policy of the Clinic to consider fully and review promptly any timely and properly submitted appeal relating to the Clinic's contractor pre-qualification procedure. Appeals shall be processed in accordance with the provisions set forth herein. A bidder's failure to follow these pre-qualification appeal procedures may result in rejection of the appeal by the Clinic.

A request for appeal of the Clinic's pre-qualification decision is timely if it is submitted within seven (7) business days of the date of the Clinic's written notice to the bidder of that bidder's pre-qualification status, unless the time for appeal is expressly extended by the Clinic in a public notice.

**MARIN CITY HEALTH AND WELLNESS
CENTER CONTRACTOR PRE-
QUALIFICATION QUESTIONNAIRE**

CONTACT INFORMATION

Firm Name: _____
(as it appears on license)

Check One: Corporation
 Partnership
 Sole Proprietorship

Contact Person: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

If Contractor is a **Sole Proprietor, Partnership, or Corporation:**

Owner(s) of Company

Contractor's License Number and expiration date:

_____ Expiration Date _____

If Contractor is a **Joint Venture:**

Owner(s) of Companies comprising the Joint Venture

Contractor's Joint Venture License Number and expiration date:

_____ Expiration date _____

Note: It is unlawful for any two or more licensees, each of whom has been issued a license to act separately in the capacity of a contractor within this state, to be awarded a contract jointly or otherwise act as a contractor without first having secured a joint venture license.

Name of Firm with Primary Bonding and Insurance for Joint Venture, Corporation, Partnership, Sole Proprietorship:

Contact Person for firm that is the Primarily Responsible for Joint Venture Partner, Corporation, Partnership, Sole Proprietorship:

Contact Person: _____

Address: _____

Phone: _____ Fax: _____

THIS CONTACT INFORMATION IS A MATTER OF PUBLIC RECORD. THE REMAINDER OF THE BIDDER QUALIFICATION QUESTIONNAIRE SHALL BE KEPT CONFIDENTIAL IN ACCORDANCE WITH CALIFORNIA LAW.

PART I. ESSENTIAL REQUIREMENTS FOR QUALIFICATION

1. Contractor shall have a liability insurance policy with a policy limit of at least \$1,000,000 per occurrence and \$2,000,000 aggregate. Please provide a Certificate of Insurance showing the required coverages.

Yes No

2. Do you have current workers' compensation insurance policy as required by the Labor Code or are you legally self-insured pursuant to Labor Code section 3700 et. seq.? Please provide a copy of your Worker's Compensation Certificate of Insurance.

Yes No

3. Has your contractor's license been revoked at any time in the last five years?

Yes No

If **yes**, please explain on a separate page and attach hereto.

4. Has a surety firm completed a contract on your behalf, or paid for completion because your firm was default terminated by the project owner within the last five (5) years?

Yes No

If **yes**, please explain on a separate page and attach hereto.

5. At the time of submitting this pre-qualification form, has your firm been deemed by any public works department to be ineligible to bid on or be awarded a public workscontract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code section 1777.1 or Labor Code section 1777.7?

Yes No

If the answer is **yes**, name each agency and state the beginning and ending dates of the period of debarment:

6. At any time during the last five 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 explain on a separate page and attach hereto.

7. Has the contractor's license for any firm named above been revoked at any time in the last five years?

Yes No

If **yes**, please explain.

8. Has a surety firm completed a contract on behalf of any firm named above, or paid for completion because the firm was default terminated by the project owner within the last five (5) years?

Yes No

If **yes**, please explain.

9. If you wish to pre-qualify a Joint Venture, state the name of the firm that will have primary bonding and insurance responsibility for the contract in the event the contract is awarded to the joint venture.

10. State the name of the individual authorized to sign for the joint venture.

Name: _____

DISCLOSURE AND GENERAL QUESTIONS

11. Judgments and Claims: Are there any judgments, Claims, or suites pending or outstanding against the Bidder that could affect its ability to complete this contract?

Yes No

12. Receivership: Has the Bidder filed for bankruptcy receivership or reorganization within the last five years?

Yes No

13. Violation of Labor and Employment Laws and Regulations:

A) During the last year, has the Bidder been found in a hearing held before an appropriate administrative commission, hearing agency or legal tribunal of the State of California designated by law to hear and resolve such matters; to be in violation of any California Labor Code, Prevailing Wage or OSHA laws, rules or regulations?

Yes No

B) Has the Bidder failed to comply with any law, rule or regulation regulating wages of laborers, mechanics and other workers employed in any public works by the State, county, city or any public body or any political subdivision or by any one under contract for public works In performing such public works contracts?

Yes No

PART II. JOB EXPERIENCE AND WORKFORCE CAPACITY

SUMMARY OF WORK EXPERIENCE AS PRIME CONTRACTOR

List work where your business performed as **Prime Contractor only**. Subcontractor experience must be listed in the following table. Please list jobs here. If the bidder has no experience as a prime contractor, please state "none" below.

Contracts completed within the last five years (list at least 4):

Project and Location	Contract Type and Final Amount	Start and Completion Dates*	Name and Phone # of Owner & A/E References

*month/year

Projects under construction as Prime Contractor:

Project and Location	Contract Type, Current Amount & % Complete	Start and Completion Dates*	Name and Phone # of Owner & A/E References

Projects pending as Prime Contractor:

Project and Location	Contract Type, and Amount	Expected Start and Completion	Name and Phone # of Owner & A/E References

SUMMARY OF WORK EXPERIENCE AS SUBCONTRACTOR

Similar contracts completed within the last five years as subcontractor (list at least 4, unless your primary job experience has been as a general contractor). If the bidder has no experience as a subcontractor, please state "none" below.

Subcontract Work Item	Project and Location	Contract Type, Current Amount & % Complete	Start and Completion Dates*	Name and Phone # of Owner & A/E References

*month/year

Projects currently under construction:

Subcontract Work Item	Project and Location	Contract Type, Current Amount & % Complete	Start and Completion Dates*	Name and Phone # of Owner & A/E References

*month/year

Contracts pending:

Subcontract Work Item	Project and Location	Contract Type, Current Amount & % Complete	Start and Completion Dates*	Name and Phone # of Owner & A/E References

*month/year

Note: The information requested in Columns A through D of Table A and Columns E and F of Table B is for record keeping purposes only and will not affect bidder's eligibility to bid.

TABLE A: CONTRACTOR'S WORKFORCE (includes Direct Subcontractors)

Job Titles	TABLE B Current Employees to be Assigned to Contract													
	Total Employees		A Black		B Hispanic		C Asian American		D American Indians & Alaskan Natives		Total		E Total Number of Minority	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Laborers														
Project Superintendent														
Equip Operators														
Truck Drivers														
Cement Finishers														
Brick Masons														
Ironworkers														
Carpenters														
Roofers/MetalRoofers														
Glaziers														
Ceramic Tile Setters														
Painters														
Plasterers/Drywallers														
Elevator Mechanics														
Plumbers														
Insulators														
Pipefitters														
Refrig Mechanics														
TemperatureControl														
Air Test & Balancing														
Sheet Metal														
Sprinkler Fitters														
Electricians														
TelecomInstallers														
TOTALS														

(M = Male, F = Female)

TABLE C: BREAKDOWN OF APPRENTICES, OJT'S AND NEW HIRES

OJT'S & Apprentices														
New Hires														

Disputes

14. Is there any litigation currently pending against your firm, or any firms comprising your joint venture (if you are submitting a bid as a joint venture)?

Yes No

If **yes**, explain on a separate signed page, the amount at issue in the litigation and the claims asserted.

CERTIFICATION OF THE PREQUALIFICATION STATEMENT

The bidder certifies under penalty of perjury under the laws of the State of California that all of the information contained in this pre-qualification statement is true and correct based upon facts known to the bidder.

By: _____

Name: _____
(please type or print)

Date: _____

Title: _____