PREQUALIFICATION QUESTIONNAIRE
(March 3, 2022)
For
SPIETH HALL ROOF REPLACEMENT AND MECHANICAL UPGRADE
PROJECT NO. 950599
CONTRACT NO. 950599-LF-2022-84
UNIVERSITY OF CALIFORNIA, RIVERSIDE

SUBMITTED BY:

(Bidder Name. If a Joint Venture, state name of JV Entity)

Type of Organization:  □ Sole Proprietor/Individual  □ Partnership
                     □ Joint Venture  □ Corporation
(State of Incorporation)

(Contact Name & Title)

(Street Address)

(City, State, Zip Code)

(Telephone Number)    (Facsimile Number)

(E-mail)

Each prospective bidder must answer all of the following questions and provide all requested information. Any prospective bidder failing to do so will be deemed not responsive and not prequalified with respect to this Prequalification at the University's sole discretion. All bidders that submit a Prequalification Questionnaire will be notified in writing of whether or not they have successfully achieved Prequalification status.

Prospective bidders that correctly respond to all questions that require a specific “YES” or “NO” response to prequalify per the Prequalification Questionnaire Evaluation form, submit all required information and supporting data, obtain the total requisite number of points per response as required AND are determined to have accurately and truthfully responded to the questions will be prequalified. Only those bidders that have been determined to be prequalified will be eligible to submit a bid for the Project.

If a prospective bidder is determined by the University not to be prequalified, the prospective bidder may request a review by the University of California, Riverside. If any person or entity is not satisfied with the outcome of the prequalification, such person or entity may file an objection with the University of California, Riverside. Any such a request or objection must be submitted in writing and received by the University of California, Riverside, at the address for receipt of Prequalification Questionnaires listed on the Advertisement for Contractor Prequalification no later than 3 calendar days after the date of the University's written notice regarding prequalification determination. The decision resulting from such review is final and is not appealable within the University of California. Any assertion that the outcome of the prequalification process was improper will not be grounds for a bid protest.

All information submitted for prequalification evaluation in response to Sections 3 and 16 and marked as “confidential” will be considered official information acquired in confidence, and the University of California will maintain its confidentiality unless (1) the University determines that it is required to release the information to a third party pursuant to the requirements of the California Public Records Act or (2) the University is required by court order to release the information to a third party pursuant to the requirements of the California Public Records Act. In the event that the University receives a request pursuant to the California Public Records Act and the University determines that it is required to disclose information marked “confidential” by the provisions of the California Public Records Act, the University will notify the
prospective bidder of the pending disclosure at least 72 hours prior to such disclosure so that the prospective bidder may seek a restraining order in advance of such disclosure. The University shall err on the side of transparency and will generally treat information provided by the prospective bidder that is not marked “confidential” as subject to disclosure pursuant to the California Public Records Act. Likewise, any decision by the University that any document is subject to disclosure pursuant to the California Public Records Act shall not prevent the University from making a subsequent determination that any document is not subject to disclosure pursuant to the California Public Records Act.

All other information submitted for prequalification evaluation will be considered official information acquired in confidence, and the University will maintain its confidentiality to the extent permitted by law.

As used herein, the terms “prospective bidder” or “bidder” or “contractor” or “entity” mean the same. The terms “prospective bidder” or “bidder” or “contractor” or “entity” mean all entities and individuals who are intended to work as a part of, for, or under the prospective bidder for the Project that is the subject of this prequalification process and includes, without limitation, such entities or individuals who are prime contractors, and if a joint venture, all members of the joint venture. Whenever an individual or entity is referred to, the reference includes the individual or entity and all partners, affiliates, subsidiaries, heirs, executors, administrators, assigns, predecessors and successors in interest of or to the individual or entity. For instance, a reference to a bidder includes the prospective bidder and all partners, affiliates, subsidiaries, heirs, executors, administrators, assigns, insurers, predecessor businesses and successor businesses of the bidder.

WHERE NECESSARY, COPY THE FORMS IN THIS PACKAGE. USE ONLY THESE FORMS. Oral, telephonic, electronic mail (e-mail), facsimile, or telegraphic Prequalification Questionnaires are invalid and will not be accepted.

SUBMIT ONE (1) ORIGINAL ELECTRONIC VERSION THROUGH A LINK PROVIDED BY EMAILING MARY.RAMIREZ@UCR.EDU NO LATER THAN THE DEADLINE IN THE ADVERTISEMENT FOR CONTRACTOR PREQUALIFICATION. EMAIL MUST INCLUDE PROJECT NUMBER AND NAME, WITH “REQUEST FOR UPLOAD LINK” IN THE SUBJECT LINE. SUBMITTALS SENT VIA EMAIL WILL NOT BE ACCEPTED, WE CANNOT GUARANTEE THAT OUR SERVERS WILL ALLOW RECEIPT OF SUCH LARGE FILES.
1. SURVEY (Information Only)

How did you hear about the prequalification for this Project?

☐ Press Enterprise       ☐ UCR Website
☐ McGraw Hill (“Greensheet”)   ☐ Other: ____________________________
☐ Reed

2. LICENSE(S) (Pass/Fail Section)

A. Do you have the following State of California contractor's license current and active with the California Contractor's State License Board?

   License Classification & Code: **B, General Contracting**

   YES ☐  NO ☐

   (NOTE - The prospective bidder submitting this Prequalification Questionnaire must be the holder of the requisite license. If the prospective bidder is a Joint Venture, the Joint Venture must hold the license and satisfy all of the requirements in this Prequalification Questionnaire as the joint venture. This means that the joint venture must have completed the projects that it cites as references in Section 6 while the joint venture.)

B. If “YES,” provide the following information about the contractor’s license:

   (1) Name of license holder exactly as on file with the California Contractor's State License Board:

   ________________________________________________________________

   (2) License Number: ________________________________________________

   (3) Issue Date: ___________ (4) Expiration Date: ___________

   (5) DIR Number: _______________ (6) Expiration Date: ___________

C. Has bidder’s contractor's license been suspended or revoked by the California Contractor's State License Board within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?

   YES ☐  NO ☐

3. NOT USED
4. **SURETY (Pass/Fail Section)**

Prospective bidder shall obtain and submit the Surety Declaration in the form shown below, signed by an authorized representative of the surety proposed to be used for this project and notarized.

A. Is the surety to be used authorized by the Insurance Commissioner to transact business in the State of California as an admitted surety insurer (as defined in the California Code of Civil Procedure Section 995.120)?

   - [ ] YES
   - [ ] NO

B. Is the prospective bidder able to obtain **bonding up to $2,000,000.00** for this Project?

   - [ ] YES
   - [ ] NO

**Bond Capacity:**

   1. Provide your maximum bonding limit per project: _______________________

   2. Provide your aggregate bonding limit: _______________________

   3. Provide your available bonding capacity: _______________________

C. Has any surety paid out any monies on claims on the **payment bond** issued by a surety for the benefit of the owner arising out of the construction activities of the bidder within the last five (5) years from the date of the Prequalification Deadline?

   - [ ] YES
   - [ ] NO

D. Has any surety paid out any monies on claims on the **performance bond** issued by a surety for the benefit of an owner arising out of the construction activities of the bidder within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?

   - [ ] YES
   - [ ] NO
E. **Surety Declaration:**

PROVIDE THIS DECLARATION TO YOUR SURETY(IES) FOR COMPLETION. DO NOT HAVE THE SURETY SUBMIT THIS INFORMATION DIRECTLY TO THE UNIVERSITY.

(If bidder has more than one surety, submit a completed form for each.)

The undersigned declares under penalty of perjury that the bonding information indicated above on this Prequalification Questionnaire for __________________________ (Name of Prospective Bidder) is true and correct and that this Declaration was executed in

________________________, in the State of __________________________,

on __________________________.

________________________________________

(Signature)

________________________________________

(Name and Title - Printed or Typed)

________________________________________

(Representing [Surety Name])

________________________________________

(Enterprise Name if Different than Surety Name)

________________________________________

(Street Address)

________________________________________

(City, State, Zip Code)

________________________________________

(Telephone Number) ________________ (Facsimile Number)

________________________________________

(E-mail)

*(ATTACH ORIGINAL NOTARIZATION of SURETY REPRESENTATIVE’S SIGNATURE)*
5. **INSURER (Pass/Fail Section)**

Prospective bidder shall obtain and submit the Insurance Declaration in the form shown below, or submit a sample certificate of insurance form from its insurer, or submit a letter that declares the same as the Insurance Declaration, signed by an authorized representative of its insurer on the representative’s or insurer’s letterhead. (If more than one insurer or insurance representative, submit a completed form or sample certificate of insurance form or letter for each.)

A. Is the bidder able to obtain insurance in the following limits for the required coverages?

<table>
<thead>
<tr>
<th>Insurance Type</th>
<th>Limits of Liability</th>
<th>Minimum Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Commercial Form General Liability Insurance</strong></td>
<td>Each Occurrence - Combined Single Limit for Bodily Injury and Property Damage</td>
<td>$1,000,000</td>
</tr>
<tr>
<td></td>
<td>Products - Completed Operations Aggregate</td>
<td>$1,000,000</td>
</tr>
<tr>
<td></td>
<td>Personal and Advertising Injury</td>
<td>$1,000,000</td>
</tr>
<tr>
<td></td>
<td>General Aggregate</td>
<td>$2,000,000</td>
</tr>
<tr>
<td><strong>Business Automobile Liability Insurance</strong></td>
<td>Each Accident - Combined Single Limit for Bodily Injury and Property Damage</td>
<td>$1,000,000</td>
</tr>
<tr>
<td><strong>Workers’ Compensation and Employer’s Liability</strong></td>
<td>(as required by Federal and State of California law)</td>
<td></td>
</tr>
<tr>
<td>Employer’s Liability:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Each Employee</td>
<td>$1,000,000</td>
<td></td>
</tr>
<tr>
<td>Each Accident</td>
<td>$1,000,000</td>
<td></td>
</tr>
<tr>
<td>Each Policy</td>
<td>$1,000,000</td>
<td></td>
</tr>
</tbody>
</table>

*This insurance must be (i) issued by companies with a Best rating of A- or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody’s) or (ii) guaranteed, under terms consented to by the University (such consent to not be unreasonably withheld), by companies with a Best rating of A- or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody’s). Further, the deductible, or retained limit, for each coverage shall not be more than $100,000.

**This insurance must be issued by companies (i) that have a Best rating of B+ or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody’s); or (ii) that are acceptable to the University.
B. Insurance Declaration:

PROVIDE THIS DECLARATION TO YOUR INSURANCE CARRIER FOR COMPLETION AND HAVE YOUR CARRIER RETURN THE COMPLETED DECLARATION TO YOU. THE PROSPECTIVE CONTRACTOR MUST SUBMIT THIS DECLARATION TO UNIVERSITY. DO NOT HAVE YOUR CARRIER SUBMIT THIS DECLARATION DIRECTLY TO THE UNIVERSITY

The undersigned declares under penalty of perjury that the below named insurer is currently willing to provide the insurance listed above in Section 5.A. of this Prequalification Questionnaire for ____________________________________________________________

and that this Declaration was executed in __________________________________________________

__________________________________________ , in the State of ____________________________

on ____________________________________________ .

__________________________________________

(Signature)

__________________________________________

(Name & Title)

__________________________________________

(Insurer Name)

__________________________________________

(Street Address)

__________________________________________

(City, State & Zip Code)

__________________________________________

(Telephone Number) ____________________________ (Facsimile Number)

__________________________________________

(Mobile Number) ____________________________ (Email)
6. CONSTRUCTION EXPERIENCE (Pass/Fail Section)

A. Does the prospective bidder have the construction experience required below?

YES ☐ NO ☐

1. Has completed, on or after February 1, 2012, at least 5 projects (private or public) in California:
   a. Acting as the prime or subcontractor during the construction phase on the project;
   b. With an initial construction contract (prime or subcontract) award of $1,000,000.00 or more;
   c. Where the construction involved all of the following: roof demolition of more than 10,000 SF, new roof installation in excess of 10,000 SF, HVAC replacement of 2 or more roof-top units, as required in the attached Project Data Sheets;
   d. Where the construction work occurred in an occupied laboratory building;
   e. That satisfies the Staff Rating requirements in the attached Project Data Sheets; and
   f. That satisfies the Responsible Performance requirements in the attached Project Data Sheets.

AND

2. Has completed, on or after February 1, 2012, at least 2 public works project(s) in California:
   a. Acting as the prime or subcontractor contractor during the construction phase on the project;
   b. With an initial construction contract (prime or subcontract) award of $1,000,000.00 or more;
   c. Where the construction work occurred in an occupied facility surrounded by continuous pedestrian and vehicular traffic during normal business hours;
   d. That satisfies the Superintendent requirements in the attached Project Data Sheets; and
   e. That satisfies the Responsible Performance requirements in the attached Project Data Sheets.

Complete and submit the attached Project Data Sheets as evidence that your construction experience satisfies the above requirements. A PROJECT MAY BE USED TO SATISFY MORE THAN ONE REQUIREMENT.

The term “completed” as used above in this Section means that (1) all work has been completed per your contract and (2) the improvement/facility has been approved and/or accepted (i.e., passed final inspection) by the owner.

NOTE THAT PROJECT REFERENCES WILL BE CONTACTED FOR VERIFICATION OF THE INFORMATION REPORTED ON THE PROJECT DATA SHEETS. IN CASE OF CONFLICT BETWEEN THE INFORMATION REPORTED BY THE PROSPECTIVE BIDDER AND THE INFORMATION PROVIDED BY THE REFERENCE, THE INFORMATION PROVIDED BY REFERENCE SHALL TAKE PRECEDENCE AND AMBIGUITIES SHALL BE RESOLVED AGAINST THE PROSPECTIVE BIDDER.

B. A bidder wishing to use a predecessor business to satisfy prequalification requirements must demonstrate with written information submitted with this Prequalification Questionnaire that it is substantially the same organization (in terms of who is managing the prospective bidder) as the predecessor business. A bidder may meet the requirement of the preceding sentence by demonstrating that the same person is the qualifying individual (under California Contractor’s License Law) for:
(1) Contractor's license of contractor which shall be the same type as the license required for the contract; and

(2) Contractor's license of predecessor business which shall also be the same type as the license required for the contract.
**PROJECT DATA SHEET NO. 1**

1. **Project Name:**

   Location: ___________________________  ___________________________  ___________________________
   (Street Address)  (City)  (State & Zip)

2. **Owner:**

   Contact Name: ___________________________  Tel: ___________________________  Cell: ___________________________
   Contact Title: ___________________________  Email: ___________________________
   Owner was  □ a private entity  □ California State University  □ University of California
   □ 4-Year Private College or University: ___________________________
   □ Other public entity: ___________________________

   Did the Owner hold your contract?  □ Yes or □ No
   If "No," then provide the contact information for the entity that held your contract:
   Company Name: ___________________________
   Contact Person: ___________________________  Tel: ___________________________  Cell: ___________________________
   Email: ___________________________

3. **Design Professional of Record:**

   Address: ___________________________  ___________________________  ___________________________
   (Street Address)  (City)  (State & Zip)
   Email: ___________________________  Tel: ___________________________  Cell: ___________________________

4. **Inspector of Record:**

   Address: ___________________________  ___________________________  ___________________________
   (Street Address)  (City)  (State & Zip)
   Email: ___________________________  Tel: ___________________________  Cell: ___________________________

5. **Your Regional Office Information:**

   State the license number and license classification(s) under which you completed the work: ___________________________
   Provide the name of your superintendent assigned to the work: ___________________________
   Is this same person that you are proposing to be the superintendent on the University’s project?  □ Yes or □ No
   Provide the name of your project manager assigned to the work: ___________________________
   Is this same person that you are proposing to be the project manager on the University’s project?  □ Yes or □ No
   Provide the name of your LEED AP assigned to the work: ___________________________
   Is this same person that you are proposing to be the LEED AP on the University’s project?  □ Yes or □ No
   Provide the address for the office that directly managed the work:
   ___________________________  ___________________________  ___________________________
   (Street Address)  (City)  (State & Zip)
6. **Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)**
   Project Delivery Method: Check one:  
   - [ ] CM at Risk  
   - [ ] Design-Bid-Build  
   - [ ] Design-Build  
   - [ ] Other, specify: ________________________________

7. **Schedule:**
   Original Start Date: ____________________________  
   Actual Start Date: ______________________________
   Original Completion Date: ________________________  
   Actual Completion Date: _________________________  
   # of Time Extensions: ____________________________
   Number of calendar days extension due to **conflicts in construction documents:** __________________________
   Number of calendar days extension due to **unforeseen conditions:** __________________________
   Number of calendar days extension due to **design errors/omissions:** __________________________
   Number of calendar days extension due to **regulatory agency requirements:** __________________________
   Number of calendar days extension due to **owner-initiated changes:** __________________________
   [ ] On a separate page, provide an explanation **for each time extension due to prospective bidder or not otherwise included above** and attach it to this Prequalification Questionnaire.

8. **Contract Amount:**
   Original Contract Award $______________________  
   Change Orders $______________________  
   Final Contract Amount $______________________
   Number of Change Orders: __________
   Amount of Change Orders due to **conflicts in construction documents:** $______________________
   Amount of Change Orders due to **unforeseen conditions:** $______________________
   Amount of Change Orders due to **design errors/omissions:** $______________________
   Amount of Change Orders due to **regulatory agency requirements:** $______________________
   Amount of Change Orders due to **owner-initiated changes:** $______________________

9.a. **Project Description:**
   (1) Did you complete the construction work acting as the general contractor? [ ] Yes or [ ] No
   (2) Did you complete your construction work acting as the subcontractor? [ ] Yes or [ ] No
   (3) Construction Type: ________________________________
   (4) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b. **Construction Experience**: (Construction Experience Requirement 6.A.1.)

(1) **The project involved**: (Check all that apply. Each is worth 10 Points. 30 Points required to pass.)

- [ ] Roof demolition of 10,000 SF
- [ ] HVAC Replacement of 2 or more roof-top units
- [ ] New roof installation in excess of 10,000 SF

(2) Did the project involve construction work in an occupied laboratory building? **(Pass/Fail)**

- [ ] Yes, was in an occupied laboratory building
- [ ] No

If “YES,” then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

10. **Staff Rating – Construction**: (Must score at least 35 points to pass.)

(1) The originally assigned project manager remained assigned and involved with the project for the following duration:

- [ ] More than 95% of the construction contract time (10 points)
- [ ] 75% - 95% of the construction contract time (5 points)
- [ ] Less than 75% of the construction contract time (0 points)

(2) The originally assigned superintendent remained assigned and involved with the project for the following duration:

- [ ] More than 95% of the construction contract time (10 points)
- [ ] 75% - 95% of the construction contract time (5 points)
- [ ] Less than 75% of the construction contract time (0 points)

(3) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?

<table>
<thead>
<tr>
<th>How many times did you submit your schedule update on time?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ More than 90% of the time = More than satisfactory (10 points)</td>
</tr>
<tr>
<td>☐ 75% - 90% of the time = Satisfactory (5 points)</td>
</tr>
<tr>
<td>☐ Less than 75% of the time = Needs improvement (0 points)</td>
</tr>
</tbody>
</table>

(4) How many times did the Owner or Owner's Representative approve your schedule update?

<table>
<thead>
<tr>
<th>How many times did the Owner or Owner's Representative approve your schedule update?</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>☐ Less than 75% of the time = Needs improvement (0 points)</td>
</tr>
</tbody>
</table>

(5) How many applications for payment did you submit?

<table>
<thead>
<tr>
<th>When were your applications for payment due?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ More than 90% of the time = More than satisfactory (10 points)</td>
</tr>
<tr>
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</tr>
<tr>
<td>☐ Less than 75% of the time = Needs improvement (0 points)</td>
</tr>
</tbody>
</table>

(6) When were you required to submit updated redlined as-builts?

<table>
<thead>
<tr>
<th>How many times did you submit your updated redlined as-builts on time in the form required by your contract?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ More than 90% of the time = More than satisfactory (10 points)</td>
</tr>
<tr>
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</tr>
<tr>
<td>☐ Less than 75% of the time = Needs improvement (0 points)</td>
</tr>
</tbody>
</table>

(7) How would the entity that held your contract describe your overall performance and compliance with the contract requirements?

| ☐ More than satisfactory (10 points) |
| ☐ Satisfactory (5 points) |
| ☐ Needs improvement (0 points) |
11. Liquidated Damages and Claims:
   a. Were liquidated damages assessed against you?  ☐ Yes or ☐ No  If “Yes,” then state amount: $ __________
   b. Were actual damages assessed against you?  ☐ Yes or ☐ No  If “Yes,” then state amount: $ __________
   c. Were back charges assessed against you?  ☐ Yes or ☐ No  If “Yes,” then state amount: $ __________

   If you answered “Yes” to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:
   (1) Amount of initial claim
   (2) Resolution and amount of final claim
   (3) Source of claim (e.g., subcontractor, etc.)
   (4) Method of resolution.

   d. Did you file a/any claim(s) on the referenced project?  ☐ Yes or ☐ No
      If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. Responsible Performance on the Project Provided on the Project Data Sheet:
   (Pass/Fail Section)
   a. Have you listed any negative references for the Project above?
      YES ☐  NO ☐

   b. Have you provided any information that would conflict with a reference verification check?
      YES ☐  NO ☐

   c. Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
      YES ☐  NO ☐

END OF PROJECT DATA SHEET NO. 1
## PROJECT DATA SHEET NO. 2

### 1. Project Name:

*Project Name*

Location:

(Street Address) ,  ,  (City) ,  (State & Zip)

### 2. Owner:

*Contact Name:*

*Tel:*

*Cell:*

*Contact Title:*

*Email:*

- Owner was □ a private entity □ California State University □ University of California
- □ Other public entity: 

Did the Owner hold your contract? □ Yes or □ No

If “No,” then provide the contact information for the entity that held your contract:

- **Company Name:**
- **Contact Person:**
- **Tel:**
- **Cell:**
- **Email:**

### 3. Design Professional of Record:

*Address:*

(Street Address) ,  ,  (City) ,  (State & Zip)

*Email:*

*Tel:*

*Cell:*

### 4. Inspector of Record:

*Address:*

(Street Address) ,  ,  (City) ,  (State & Zip)

*Email:*

*Tel:*

*Cell:*

### 5. Your Regional Office Information:

State the license number and license classification(s) under which you completed the work: 

Provide the name of your superintendent assigned to the work: 

Is this same person that you are proposing to be the superintendent on the University’s project? □ Yes or □ No

Provide the name of your project manager assigned to the work: 

Is this same person that you are proposing to be the project manager on the University’s project? □ Yes or □ No

Provide the name of your LEED AP assigned to the work: 

Is this same person that you are proposing to be the LEED AP on the University’s project? □ Yes or □ No

Provide the address for the office that directly managed the work:

(Street Address) ,  ,  (City) ,  (State & Zip)
6. **Project Delivery Method:** (CM NOT AT RISK DOES NOT QUALIFY.)

   Project Delivery Method: Check one:  
   - [ ] CM at Risk  
   - [ ] Design-Bid-Build  
   - [ ] Design-Build  
   - [ ] Other, specify:  

7. **Schedule:**

   Original Start Date:  
   Actual Start Date:  
   Original Completion Date:  
   Actual Completion Date:  
   # of Time Extensions:  

   Number of calendar days extension due to **conflicts in construction documents:**  
   Number of calendar days extension due to **unforeseen conditions:**  
   Number of calendar days extension due to **design errors/omissions:**  
   Number of calendar days extension due to **regulatory agency requirements:**  
   Number of calendar days extension due to **owner-initiated changes:**  

   [ ] On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.

8. **Contract Amount:**

   Original Contract Award $  
   Change Orders $  Number of Change Orders:  
   Final Contract Amount $  

   Amount of Change Orders due to **conflicts in construction documents:** $  
   Amount of Change Orders due to **unforeseen conditions:** $  
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   d) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
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   - [ ] No

   If “YES,” then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

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   - [ ] Less than 75% of the construction contract time (0 points)

   (2) The originally assigned superintendent remained assigned and involved with the project for the following duration:
   - [ ] More than 95% of the construction contract time (10 points)
   - [ ] 75% - 95% of the construction contract time (5 points)
   - [ ] Less than 75% of the construction contract time (0 points)

   (3) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?

      How many times did you submit your schedule update on time?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   (4) How many times did the Owner or Owner’s Representative approve your schedule update?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   (5) How many applications for payment did you submit?

      How many times did you submit your applications for payment on time in the form required by your contract?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   (6) When were you required to submit updated redlined as-builts?

      How many times did you submit your updated redlined as-builts on time in the form required by your contract?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   (7) How would the entity that held your contract describe your overall performance and compliance with the contract requirements?
      - [ ] More than satisfactory (10 points)
      - [ ] Satisfactory (5 points)
      - [ ] Needs improvement (0 points)
11. **Liquidated Damages and Claims:**
   a) Were liquidated damages assessed against you? □ Yes or □ No If “Yes,” then state amount: $ ______
   b) Were actual damages assessed against you? □ Yes or □ No If “Yes,” then state amount: $ ______
   c) Were back charges assessed against you? □ Yes or □ No If “Yes,” then state amount: $ ______

   If you answered “Yes” to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:
   1. Amount of initial claim
   2. Resolution and amount of final claim
   3. Source of claim (e.g., subcontractor, etc.)

   d) Did you file a/any claim(s) on the referenced project? □ Yes or □ No

   If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. **Responsible Performance on the Project Provided on the Project Data Sheet:**
    (Pass/Fail Section)
    a. Have you listed any negative references for the Project above?
       YES □ NO □
    b. Have you provided any information that would conflict with a reference verification check?
       YES □ NO □
    c. Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
       YES □ NO □

**END OF PROJECT DATA SHEET NO. 2**
1. **Project Name:**

   Location: __________________________, __________________________, __________________________

2. **Owner:**

   Contact Name: __________________________ Tel: __________________________ Cell: __________________________

   Contact Title: __________________________ Email: __________________________

   Owner was ☐ a private entity ☐ California State University ☐ University of California

   ☐ 4-Year Private College or University: __________________________

   ☐ Other public entity: __________________________

   Did the Owner hold your contract? ☐ Yes or ☐ No

   If “No,” then provide the contact information for the entity that held your contract:

   Company Name: __________________________

   Contact Person: __________________________ Tel: __________________________ Cell: __________________________

   Email: __________________________

3. **Design Professional of Record:**

   Address: __________________________, __________________________, __________________________

   Email: __________________________ Tel: __________________________ Cell: __________________________

4. **Inspector of Record:**

   Address: __________________________, __________________________, __________________________

   Email: __________________________ Tel: __________________________ Cell: __________________________

5. **Your Regional Office Information:**

   State the license number and license classification(s) under which you completed the work: __________________________

   Provide the name of your superintendent assigned to the work: __________________________

   Is this same person that you are proposing to be the superintendent on the University’s project? ☐ Yes or ☐ No

   Provide the name of your project manager assigned to the work: __________________________

   Is this same person that you are proposing to be the project manager on the University’s project? ☐ Yes or ☐ No

   Provide the name of your LEED AP assigned to the work: __________________________

   Is this same person that you are proposing to be the LEED AP on the University’s project? ☐ Yes or ☐ No

   Provide the address for the office that directly managed the work:

   __________________________, __________________________, __________________________
6. **Project Delivery Method:** (CM NOT AT RISK DOES NOT QUALIFY.)

   Project Delivery Method: Check one:  
   - [ ] CM at Risk  
   - [ ] Design-Bid-Build  
   - [ ] Design-Build  
   - [ ] Other, specify: ____________________________

7. **Schedule:**

   Original Start Date: ____________________________  Actual Start Date: ____________________________
   Original Completion Date: ____________________________  Actual Completion Date: ____________________________

   # of Time Extensions: ____________________________

   Number of calendar days extension due to **conflicts in construction documents:** ____________________________
   Number of calendar days extension due to **unforeseen conditions:** ____________________________
   Number of calendar days extension due to **design errors/omissions:** ____________________________
   Number of calendar days extension due to **regulatory agency requirements:** ____________________________
   Number of calendar days extension due to **owner-initiated changes:** ____________________________

   [ ] On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.

8. **Contract Amount:**

   Original Contract Award $ ____________________________  Number of Change Orders: _______
   Change Orders $ ____________________________  Number of Change Orders: _______
   Final Contract Amount $ ____________________________

   Amount of Change Orders due to **conflicts in construction documents:** $ ____________________________
   Amount of Change Orders due to **unforeseen conditions:** $ ____________________________
   Amount of Change Orders due to **design errors/omissions:** $ ____________________________
   Amount of Change Orders due to **regulatory agency requirements:** $ ____________________________
   Amount of Change Orders due to **owner-initiated changes:** $ ____________________________

9.a. **Project Description:**

   1. Did you complete the construction work acting as the general contractor? [ ] Yes or [ ] No
   2. Did you complete your construction work acting as the subcontractor? [ ] Yes or [ ] No
   3. **Construction Type:** ____________________________
   4. Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b. **Construction Experience:** (Construction Experience Requirement 6.A.1.)

1. **The project involved:** (Check all that apply. Each is worth 10 Points. 30 Points required to pass.)
   - [ ] Roof demolition of 10,000 SF
   - [ ] HVAC Replacement of 2 or more roof-top units
   - [ ] New roof installation in excess of 10,000 SF

2. **Did the project involve construction work in an occupied laboratory building?** (Pass/Fail)
   - [ ] Yes, was in an occupied laboratory building
   - [ ] No

   If "YES," then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

10. **Staff Rating – Construction:** (Must score at least 35 points to pass.)

   1. The originally assigned project manager remained assigned and involved with the project for the following duration:
      - [ ] More than 95% of the construction contract time (10 points)
      - [ ] 75% - 95% of the construction contract time (5 points)
      - [ ] Less than 75% of the construction contract time (0 points)

   2. The originally assigned superintendent remained assigned and involved with the project for the following duration:
      - [ ] More than 95% of the construction contract time (10 points)
      - [ ] 75% - 95% of the construction contract time (5 points)
      - [ ] Less than 75% of the construction contract time (0 points)

   3. When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?
      - How many times did you submit your schedule update on time?
          - [ ] More than 90% of the time = More than satisfactory (10 points)
          - [ ] 75% - 90% of the time = Satisfactory (5 points)
          - [ ] Less than 75% of the time = Needs improvement (0 points)

   4. How many times did the Owner or Owner’s Representative approve your schedule update?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   5. How many applications for payment did you submit?
      - When were your applications for payment due?
      - How many times did you submit your applications for payment on time in the form required by your contract?
          - [ ] More than 90% of the time = More than satisfactory (10 points)
          - [ ] 75% - 90% of the time = Satisfactory (5 points)
          - [ ] Less than 75% of the time = Needs improvement (0 points)

   6. When were you required to submit updated redlined as-builts?
      - How many times did you submit your updated redlined as-builts on time in the form required by your contract?
          - [ ] More than 90% of the time = More than satisfactory (10 points)
          - [ ] 75% - 90% of the time = Satisfactory (5 points)
          - [ ] Less than 75% of the time = Needs improvement (0 points)

   7. How would the entity that held your contract describe your overall performance and compliance with the contract requirements?
      - [ ] More than satisfactory (10 points)
      - [ ] Satisfactory (5 points)
      - [ ] Needs improvement (0 points)
11. **Liquidated Damages and Claims:**
   a) Were liquidated damages assessed against you? ☐ Yes or ☐ No
      If “Yes,” then state amount: $ __________
   b) Were actual damages assessed against you? ☐ Yes or ☐ No
      If “Yes,” then state amount: $ __________
   c) Were back charges assessed against you? ☐ Yes or ☐ No
      If “Yes,” then state amount: $ __________

   If you answered “Yes” to any of the above questions, provide the following information on a separate
   page and attach it to this Prequalification Questionnaire:
   (9) Amount of initial claim
   (10) Resolution and amount of final claim
   (11) Source of claim (e.g., subcontractor, etc.)
   (12) Method of resolution.

   d) Did you file any claim(s) on the referenced project? ☐ Yes or ☐ No
      If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. **Responsible Performance on the Project Provided on the Project Data Sheet:**
    (Pass/Fail Section)

   a. Have you listed any negative references for the Project above?
      YES ☐ NO ☐

   b. Have you provided any information that would conflict with a reference verification check?
      YES ☐ NO ☐

   c. Do you have a history of poor past performance of work on the Project referenced above as
evidenced by continued use of defective materials, unauthorized product substitutions, refusal to
correct work not in accordance with the contract documents, or repeated failure to provide proper
supervision required by the contract documents?
      YES ☐ NO ☐

   **END OF PROJECT DATA SHEET NO. 3**
**PROJECT DATA SHEET NO. 4**

1. **Project Name:**

   Location: ____________________________________________________________________________
   
   (Street Address) , (City) , (State & Zip)

2. **Owner:**

   Contact Name: _________________________________________________________________________
   
   Tel: _______________ Cell: _______________
   
   Contact Title: _________________________________________________________________________
   
   Email: ________________________________________________________________________________

   Owner was ☐ a private entity ☐ California State University ☐ University of California
   
   ☐ 4-Year Private College or University: _______________________________________________________
   
   ☐ Other public entity: _____________________________________________________________________

   Did the Owner hold your contract? ☐ Yes or ☐ No
   
   If "No," then provide the contact information for the entity that held your contract:
   
   Company Name: _________________________________________________________________________
   
   Contact Person: _________________________________________________________________________
   
   Tel: _______________ Cell: _______________
   
   Email: ________________________________________________________________________________

3. **Design Professional of Record:**

   Address: ________________________________________________________________________________
   
   (Street Address) , (City) , (State & Zip)
   
   Email: ________________________________________________________________________________
   
   Tel: _______________ Cell: _______________

4. **Inspector of Record:**

   Address: ________________________________________________________________________________
   
   (Street Address) , (City) , (State & Zip)
   
   Email: ________________________________________________________________________________
   
   Tel: _______________ Cell: _______________

5. **Your Regional Office Information:**

   State the license number and license classification(s) under which you completed the work: ______________________________________________________________________

   Provide the name of your superintendent assigned to the work: ______________________________________________________________________

   Is this same person that you are proposing to be the superintendent on the University’s project? ☐ Yes or ☐ No

   Provide the name of your project manager assigned to the work: ______________________________________________________________________

   Is this same person that you are proposing to be the project manager on the University’s project? ☐ Yes or ☐ No

   Provide the name of your LEED AP assigned to the work: ______________________________________________________________________

   Is this same person that you are proposing to be the LEED AP on the University’s project? ☐ Yes or ☐ No

   Provide the address for the office that directly managed the work:

   ______________________________________________________________________________________
   
   (Street Address) , (City) , (State & Zip)
6. **Project Delivery Method:** (CM NOT AT RISK DOES NOT QUALIFY.)

   Project Delivery Method: Check one:  
   - CM at Risk  
   - Design-Bid-Build  
   - Design-Build  
   - Other, specify: ________________________________

7. **Schedule:**

   Original Start Date: ________________  Actual Start Date: ________________
   Original Completion Date: ________________  Actual Completion Date: ________________

   Number of Time Extensions: ________________

   Number of calendar days extension due to **conflicts in construction documents:** ________________
   Number of calendar days extension due to **unforeseen conditions:** ________________
   Number of calendar days extension due to **design errors/omissions:** ________________
   Number of calendar days extension due to **regulatory agency requirements:** ________________
   Number of calendar days extension due to **owner-initiated changes:** ________________

   On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.

8. **Contract Amount:**

   Original Contract Award $ ________________
   Change Orders $ ________________  Number of Change Orders: ________________
   Final Contract Amount $ ________________

   Amount of Change Orders due to **conflicts in construction documents:** $ ________________
   Amount of Change Orders due to **unforeseen conditions:** $ ________________
   Amount of Change Orders due to **design errors/omissions:** $ ________________
   Amount of Change Orders due to **regulatory agency requirements:** $ ________________
   Amount of Change Orders due to **owner-initiated changes:** $ ________________

9.a. **Project Description:**

   a) Did you complete the construction work acting as the general contractor?  
      - Yes or  
      - No
   b) Did you complete your construction work acting as the subcontractor?  
      - Yes or  
      - No
   c) Construction Type: ________________________________
   d) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b. **Construction Experience**: (Construction Experience Requirement 6.A.1.)

1. **The project involved**: (Check all that apply. Each is worth 10 Points. 30 Points required to pass.)
   - [ ] Roof demolition of 10,000 SF
   - [ ] HVAC Replacement of 2 or more roof-top units
   - [ ] New roof installation in excess of 10,000 SF

2. Did the project involve construction work in an occupied laboratory building? **(Pass/Fail)**
   - [ ] Yes, was in an occupied laboratory building
   - [ ] No
   
   If "YES," then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

10. **Staff Rating – Construction**: (Must score at least 35 points to pass.)

1. The originally assigned project manager remained assigned and involved with the project for the following duration:
   - [ ] More than 95% of the construction contract time (10 points)
   - [ ] 75% - 95% of the construction contract time (5 points)
   - [ ] Less than 75% of the construction contract time (0 points)

2. The originally assigned superintendent remained assigned and involved with the project for the following duration:
   - [ ] More than 95% of the construction contract time (10 points)
   - [ ] 75% - 95% of the construction contract time (5 points)
   - [ ] Less than 75% of the construction contract time (0 points)

3. When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?
   - [ ] More than 90% of the time = More than satisfactory (10 points)
   - [ ] 75% - 90% of the time = Satisfactory (5 points)
   - [ ] Less than 75% of the time = Needs improvement (0 points)

4. How many times did the Owner or Owner's Representative approve your schedule update?
   - [ ] More than 90% of the time = More than satisfactory (10 points)
   - [ ] 75% - 90% of the time = Satisfactory (5 points)
   - [ ] Less than 75% of the time = Needs improvement (0 points)

5. How many applications for payment did you submit?
   - When were your applications for payment due?
   - [ ] More than 90% of the time = More than satisfactory (10 points)
   - [ ] 75% - 90% of the time = Satisfactory (5 points)
   - [ ] Less than 75% of the time = Needs improvement (0 points)

6. When were you required to submit updated redlined as-builts?
   - How many times did you submit your updated redlined as-builts on time in the form required by your contract?
   - [ ] More than 90% of the time = More than satisfactory (10 points)
   - [ ] 75% - 90% of the time = Satisfactory (5 points)
   - [ ] Less than 75% of the time = Needs improvement (0 points)

7. How would the entity that held your contract describe your overall performance and compliance with the contract requirements?
   - [ ] More than satisfactory (10 points)
   - [ ] Satisfactory (5 points)
   - [ ] Needs improvement (0 points)
11. **Liquidated Damages and Claims:**
   a) Were liquidated damages assessed against you? □ Yes or □ No If “Yes,” then state amount: $ __________
   b) Were actual damages assessed against you? □ Yes or □ No If “Yes,” then state amount: $ __________
   c) Were back charges assessed against you? □ Yes or □ No If “Yes,” then state amount: $ __________

   If you answered “Yes” to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:
   (13) Amount of initial claim
   (14) Resolution and amount of final claim
   (15) Source of claim (e.g., subcontractor, etc.)
   (16) Method of resolution.

   d) Did you file a/any claim(s) on the referenced project? □ Yes or □ No
      If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. **Responsible Performance on the Project Provided on the Project Data Sheet:**
    (Pass/Fail Section)
    a. Have you listed any negative references for the Project above?
       YES □ NO □
    b. Have you provided any information that would conflict with a reference verification check?
       YES □ NO □
    c. Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
       YES □ NO □

**END OF PROJECT DATA SHEET NO. 4**
PROJECT DATA SHEET NO. 5

1. Project Name: ____________________________________________

Location: ________________________________________________
           (Street Address) , (City) , (State & Zip)

2. Owner:

   Contact Name: ___________________________________________
   Tel: ___________________ Cell: ______________
   Contact Title: ___________________________________________
   Email: ________________________________________________

   Owner was □ a private entity □ California State University □ University of California
   □ 4-Year Private College or University: _______________________________
   □ Other public entity: __________________________________________

   Did the Owner hold your contract? ■ Yes or ■ No
   If “No,” then provide the contact information for the entity that held your contract:
   Company Name: ____________________________________________
   Contact Person: ________________________________ Tel: ____________
   Cell: ______________ Email: ________________________________

3. Design Professional of Record:

   Address: ________________________________________________
   (Street Address) , (City) , (State & Zip)
   Email: ________________________________________________
   Tel: ___________________ Cell: ______________

4. Inspector of Record:

   Address: ________________________________________________
   (Street Address) , (City) , (State & Zip)
   Email: ________________________________________________
   Tel: ___________________ Cell: ______________

5. Your Regional Office Information:

   State the license number and license classification(s) under which you completed the work:
   _______________________________________________________

   Provide the name of your superintendent assigned to the work:
   _______________________________________________________

   Is this same person that you are proposing to be the superintendent on the University’s project? ■ Yes or ■ No

   Provide the name of your project manager assigned to the work:
   _______________________________________________________

   Is this same person that you are proposing to be the project manager on the University’s project? ■ Yes or ■ No

   Provide the name of your LEED AP assigned to the work:
   _______________________________________________________

   Is this same person that you are proposing to be the LEED AP on the University’s project? ■ Yes or ■ No

   Provide the address for the office that directly managed the work:
   _______________________________________________________
   (Street Address) , (City) , (State & Zip)
6. Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)
   Project Delivery Method: Check one:  ☐ CM at Risk  ☐ Design-Bid-Build  ☐ Design-Build
   ☐ Other, specify: ________________________________

7. Schedule:
   Original Start Date: ________________  Actual Start Date: ________________
   Original Completion Date: ________________  Actual Completion Date: ________________
   # of Time Extensions: ________________

   Number of calendar days extension due to conflicts in construction documents: ________________
   Number of calendar days extension due to unforeseen conditions: ________________
   Number of calendar days extension due to design errors/omissions: ________________
   Number of calendar days extension due to regulatory agency requirements: ________________
   Number of calendar days extension due to owner-initiated changes: ________________

   ☐ On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.

8. Contract Amount:
   Original Contract Award $ ________________
   Change Orders $ ________________  Number of Change Orders: ______
   Final Contract Amount $ ________________

   Amount of Change Orders due to conflicts in construction documents: $ ________________
   Amount of Change Orders due to unforeseen conditions: $ ________________
   Amount of Change Orders due to design errors/omissions: $ ________________
   Amount of Change Orders due to regulatory agency requirements: $ ________________
   Amount of Change Orders due to owner-initiated changes: $ ________________

9.a. Project Description:
   a) Did you complete the construction work acting as the general contractor? ☐ Yes or ☐ No
   b) Did you complete your construction work acting as the subcontractor? ☐ Yes or ☐ No
   c) Construction Type: ________________________________
   d) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b. **Construction Experience:** (Construction Experience Requirement 6.A.1.)

1. **The project involved:** (Check all that apply. Each is worth 10 Points. 30 Points required to pass.)
   - [ ] Roof demolition of 10,000 SF
   - [ ] HVAC Replacement of 2 or more roof-top units
   - [x] New roof installation in excess of 10,000 SF

2. Did the project involve construction work in an occupied laboratory building? **(Pass/Fail)**
   - [ ] Yes, was in an occupied laboratory building
   - [ ] No

   If “YES,” then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

10. **Staff Rating – Construction:** **(Must score at least 35 points to pass.)**

   1. The originally assigned project manager remained assigned and involved with the project for the following duration:
      - [ ] More than 95% of the construction contract time (10 points)
      - [ ] 75% - 95% of the construction contract time (5 points)
      - [ ] Less than 75% of the construction contract time (0 points)

   2. The originally assigned superintendent remained assigned and involved with the project for the following duration:
      - [ ] More than 95% of the construction contract time (10 points)
      - [ ] 75% - 95% of the construction contract time (5 points)
      - [ ] Less than 75% of the construction contract time (0 points)

   3. When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   4. How many times did the Owner or Owner’s Representative approve your schedule update?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   5. How many applications for payment did you submit?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   6. When were your applications for payment due?
      - [ ] More than 90% of the time = More than satisfactory (10 points)
      - [ ] 75% - 90% of the time = Satisfactory (5 points)
      - [ ] Less than 75% of the time = Needs improvement (0 points)

   7. **How would the entity that held your contract describe your overall performance and compliance with the contract requirements?**
      - [ ] More than satisfactory (10 points)
      - [ ] Satisfactory (5 points)
      - [ ] Needs improvement (0 points)
11. **Liquidated Damages and Claims:**
   a) Were liquidated damages assessed against you?  ☐ Yes or ☐ No  If “Yes,” then state amount: $ __________
   b) Were actual damages assessed against you?  ☐ Yes or ☐ No  If “Yes,” then state amount: $ __________
   c) Were back charges assessed against you?  ☐ Yes or ☐ No  If “Yes,” then state amount: $ __________

   If you answered “Yes” to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:
   (17) Amount of initial claim
   (18) Resolution and amount of final claim
   (19) Source of claim (e.g., subcontractor, etc.)
   (20) Method of resolution.

   d) Did you file a(any claim(s) on the referenced project?  ☐ Yes or ☐ No  
      If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. **Responsible Performance on the Project Provided on the Project Data Sheet:**
   (Pass/Fail Section)
   a. Have you listed any negative references for the Project above?  
      YES ☐ NO ☐
   b. Have you provided any information that would conflict with a reference verification check?  
      YES ☐ NO ☐
   c. Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?  
      YES ☐ NO ☐

   **END OF PROJECT DATA SHEET NO. 5**
## PROJECT DATA SHEET NO. 6

### 1. Project Name: ____________________________

**Location:**

<table>
<thead>
<tr>
<th>(Street Address)</th>
<th>(City)</th>
<th>(State &amp; Zip)</th>
</tr>
</thead>
</table>

### 2. Owner:

**Contact Name:** ____________________________

**Contact Title:** ____________________________

**Tel:** ____________________________

**Cell:** ____________________________

**Email:** ____________________________

**Owner was**

- [ ] a private entity
- [ ] California State University
- [ ] University of California
- [ ] 4-Year Private College or University: ____________________________
- [ ] Other public entity: ____________________________

If "No," then provide the contact information for the entity that held your contract:

**Company Name:** ____________________________

**Contact Person:** ____________________________

**Tel:** ____________________________

**Cell:** ____________________________

**Email:** ____________________________

### 3. Design Professional of Record:

**Address:** ____________________________

<table>
<thead>
<tr>
<th>(Street Address)</th>
<th>(City)</th>
<th>(State &amp; Zip)</th>
</tr>
</thead>
</table>

**Email:** ____________________________

**Tel:** ____________________________

**Cell:** ____________________________

### 4. Inspector of Record:

**Address:** ____________________________

<table>
<thead>
<tr>
<th>(Street Address)</th>
<th>(City)</th>
<th>(State &amp; Zip)</th>
</tr>
</thead>
</table>

**Email:** ____________________________

**Tel:** ____________________________

**Cell:** ____________________________

### 5. Your Regional Office Information:

**State the license number and license classification(s) under which you completed the work:** ____________________________

**Provide the name of your superintendent assigned to the work:** ____________________________

Is this same person that you are proposing to be the superintendent on the University’s project?  [ ] Yes or [ ] No

**Provide the name of your project manager assigned to the work:** ____________________________

Is this same person that you are proposing to be the project manager on the University’s project?  [ ] Yes or [ ] No

**Provide the name of your LEED AP assigned to the work:** ____________________________

Is this same person that you are proposing to be the LEED AP on the University’s project?  [ ] Yes or [ ] No

**Provide the address for the office that directly managed the work:** ____________________________

<table>
<thead>
<tr>
<th>(Street Address)</th>
<th>(City)</th>
<th>(State &amp; Zip)</th>
</tr>
</thead>
</table>
6. **Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)**

Project Delivery Method: Check one:  
☐ CM at Risk  ☐ Design-Bid-Build  ☐ Design-Build
☐ Other, specify: 

7. **Schedule:**

Original Start Date: ________________  Actual Start Date: ________________
Original Completion Date: ________________  Actual Completion Date: ________________

# of Time Extensions: 

Number of calendar days extension due to **conflicts in construction documents:** ________________
Number of calendar days extension due to **unforeseen conditions:** ________________
Number of calendar days extension due to **design errors/omissions:** ________________
Number of calendar days extension due to **regulatory agency requirements:** ________________
Number of calendar days extension due to **owner-initiated changes:** ________________

☐ On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.

8. **Contract Amount:**

Original Contract Award $ ________________
Change Orders $ ________________  Number of Change Orders: ________
Final Contract Amount $ ________________

Amount of Change Orders due to **conflicts in construction documents:** $ ________________
Amount of Change Orders due to **unforeseen conditions:** $ ________________
Amount of Change Orders due to **design errors/omissions:** $ ________________
Amount of Change Orders due to **regulatory agency requirements:** $ ________________
Amount of Change Orders due to **owner-initiated changes:** $ ________________

9.a. **Project Description:**

(1) Did you complete the construction work acting as the general contractor? ☐ Yes or ☐ No
(2) Did you complete your construction work acting as the subcontractor? ☐ Yes or ☐ No
(3) Construction Type: 

(4) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b. **Construction Experience:** (Construction Experience Requirement 6.A.2.)

(1) Did the project involve construction work in an occupied facility surrounded by continuous pedestrian and vehicular traffic during normal business hours? (Pass/Fail)

- Yes, was in an occupied facility OR
- No

If “YES,” then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

10. **Staff Rating – Construction: (Must score at least 35 points to pass.)**

(1) The originally assigned project manager remained assigned and involved with the project for the following duration:

- More than 95% of the construction contract time (10 points)
- 75% - 95% of the construction contract time (5 points)
- Less than 75% of the construction contract time (0 points)

(2) The originally assigned superintendent remained assigned and involved with the project for the following duration:

- More than 95% of the construction contract time (10 points)
- 75% - 95% of the construction contract time (5 points)
- Less than 75% of the construction contract time (0 points)

(3) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?

   How many times did you submit your schedule update on time?

   - More than 90% of the time = More than satisfactory (10 points)
   - 75% - 90% of the time = Satisfactory (5 points)
   - Less than 75% of the time = Needs improvement (0 points)

(4) How many times did the Owner or Owner’s Representative approve your schedule update?

   - More than 90% of the time = More than satisfactory (10 points)
   - 75% - 90% of the time = Satisfactory (5 points)
   - Less than 75% of the time = Needs improvement (0 points)

(5) How many applications for payment did you submit?

   When were your applications for payment due?

   How many times did you submit your applications for payment on time in the form required by your contract?

   - More than 90% of the time = More than satisfactory (10 points)
   - 75% - 90% of the time = Satisfactory (5 points)
   - Less than 75% of the time = Needs improvement (0 points)

(6) When were you required to submit updated redlined as-builts?

   How many times did you submit your updated redlined as-builts on time in the form required by your contract?

   - More than 90% of the time = More than satisfactory (10 points)
   - 75% - 90% of the time = Satisfactory (5 points)
   - Less than 75% of the time = Needs improvement (0 points)

(7) How would the entity that held your contract describe your overall performance and compliance with the contract requirements?

   - More than satisfactory (10 points)
   - Satisfactory (5 points)
   - Needs improvement (0 points)
11. **Liquidated Damages and Claims:**
   a. Were liquidated damages assessed against you?  □ Yes or □ No  If “Yes,” then state amount:  $ __________
   b. Were actual damages assessed against you?  □ Yes or □ No  If “Yes,” then state amount:  $ __________
   c. Were back charges assessed against you?  □ Yes or □ No  If “Yes,” then state amount:  $ __________

   If you answered “Yes” to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:
   1. Amount of initial claim
   2. Resolution and amount of final claim
   3. Source of claim (e.g., subcontractor, etc.)

   d. Did you file any claim(s) on the referenced project?  □ Yes or □ No
      If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. **Responsible Performance on the Project Provided on the Project Data Sheet:**
    (Pass/Fail Section)
   a. Have you listed any negative references for the Project above?
      YES □ NO □
   b. Have you provided any information that would conflict with a reference verification check?
      YES □ NO □
   c. Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
      YES □ NO □

**END OF PROJECT DATA SHEET NO. 6**
**PROJECT DATA SHEET NO. 7**

1. **Project Name:**
   
   Location: 
   
   (Street Address)  ,  (City)  ,  (State & Zip)

2. **Owner:**
   
   Contact Name:  
   Tel:  
   Cell:  
   
   Contact Title:  
   Email:  
   
   Owner was  
   
   ☐ a private entity  
   ☐ California State University  
   ☐ University of California  
   ☐ 4-Year Private College or University:  
   ☐ Other public entity:

   Did the Owner hold your contract?  ☐ Yes or  ☐ No
   
   If “No,” then provide the contact information for the entity that held your contract:
   
   Company Name:  
   Contact Person:  
   Tel:  
   Cell:  
   Email:  

3. **Design Professional of Record:**
   
   Address: 
   
   (Street Address)  ,  (City)  ,  (State & Zip)
   
   Email:  
   Tel:  
   Cell:  

4. **Inspector of Record:**
   
   Address: 
   
   (Street Address)  ,  (City)  ,  (State & Zip)
   
   Email:  
   Tel:  
   Cell:  

5. **Your Regional Office Information:**
   
   State the license number and license classification(s) under which you completed the work:  
   
   Provide the name of your superintendent assigned to the work:  
   
   Is this same person that you are proposing to be the superintendent on the University’s project?  ☐ Yes or  ☐ No
   
   Provide the name of your project manager assigned to the work:  
   
   Is this same person that you are proposing to be the project manager on the University’s project?  ☐ Yes or  ☐ No
   
   Provide the name of your LEED AP assigned to the work:  
   
   Is this same person that you are proposing to be the LEED AP on the University’s project?  ☐ Yes or  ☐ No
   
   Provide the address for the office that directly managed the work:
   
   (Street Address)  ,  (City)  ,  (State & Zip)
6. **Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)**
   Project Delivery Method: Check one:  
   - [ ] CM at Risk  
   - [ ] Design-Bid-Build  
   - [ ] Design-Build  
   - [ ] Other, specify: __________________________________________________________

7. **Schedule:**
   - Original Start Date: ____________________________  
   - Actual Start Date: ____________________________  
   - Original Completion Date: ________________________  
   - Actual Completion Date: _________________________  
   - # of Time Extensions: ____________________________

   Number of calendar days extension due to **conflicts in construction documents:** ____________________________
   Number of calendar days extension due to **unforeseen conditions:** ____________________________
   Number of calendar days extension due to **design errors/omissions:** ____________________________
   Number of calendar days extension due to **regulatory agency requirements:** ____________________________
   Number of calendar days extension due to **owner-initiated changes:** ____________________________

   [ ] On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.

8. **Contract Amount:**
   - Original Contract Award $ ________________________
   - Change Orders $ ____________________________
   - Final Contract Amount $ ________________________
   - Number of Change Orders: _______

   Amount of Change Orders due to **conflicts in construction documents:** $ ____________________________
   Amount of Change Orders due to **unforeseen conditions:** $ ____________________________
   Amount of Change Orders due to **design errors/omissions:** $ ____________________________
   Amount of Change Orders due to **regulatory agency requirements:** $ ____________________________
   Amount of Change Orders due to **owner-initiated changes:** $ ____________________________

9.a. **Project Description:**
   (1) Did you complete the construction work acting as the general contractor?  [ ] Yes or  [ ] No
   (2) Did you complete your construction work acting as the subcontractor?  [ ] Yes or  [ ] No
   (3) Construction Type: ____________________________
   (4) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b. **Construction Experience:** (Construction Experience Requirement 6.A.2.)

(1) Did the project involve construction work in an occupied facility surrounded by continuous pedestrian and vehicular traffic during normal business hours? **(Pass/Fail)**

- [ ] Yes, was in an occupied facility OR [ ] No

If “YES,” then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.

10. **Staff Rating – Construction:** (Must score at least 35 points to pass.)

(1) The originally assigned project manager remained assigned and involved with the project for the following duration:

- [ ] More than 95% of the construction contract time (10 points)
- [ ] 75% - 95% of the construction contract time (5 points)
- [ ] Less than 75% of the construction contract time (0 points)

(2) The originally assigned superintendent remained assigned and involved with the project for the following duration:

- [ ] More than 95% of the construction contract time (10 points)
- [ ] 75% - 95% of the construction contract time (5 points)
- [ ] Less than 75% of the construction contract time (0 points)

(3) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?

- [ ] More than 90% of the time = More than satisfactory (10 points)
- [ ] 75% - 90% of the time = Satisfactory (5 points)
- [ ] Less than 75% of the time = Needs improvement (0 points)

(4) How many times did the Owner or Owner’s Representative approve your schedule update?

- [ ] More than 90% of the time = More than satisfactory (10 points)
- [ ] 75% - 90% of the time = Satisfactory (5 points)
- [ ] Less than 75% of the time = Needs improvement (0 points)

(5) How many applications for payment did you submit?

When were your applications for payment due?

- [ ] More than 90% of the time = More than satisfactory (10 points)
- [ ] 75% - 90% of the time = Satisfactory (5 points)
- [ ] Less than 75% of the time = Needs improvement (0 points)

(6) When were you required to submit updated redlined as-builts?

- [ ] More than 90% of the time = More than satisfactory (10 points)
- [ ] 75% - 90% of the time = Satisfactory (5 points)
- [ ] Less than 75% of the time = Needs improvement (0 points)

(7) How would the entity that held your contract describe your overall performance and compliance with the contract requirements?

- [ ] More than satisfactory (10 points)
- [ ] Satisfactory (5 points)
- [ ] Needs improvement (0 points)
11. **Liquidated Damages and Claims:**
   a. Were liquidated damages assessed against you? □ Yes or □ No If “Yes,” then state amount: $ __________
   b. Were actual damages assessed against you? □ Yes or □ No If “Yes,” then state amount: $ __________
   c. Were back charges assessed against you? □ Yes or □ No If “Yes,” then state amount: $ __________

   If you answered “Yes” to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:
   1. Amount of initial claim
   2. Resolution and amount of final claim
   3. Source of claim (e.g., subcontractor, etc.)

   d. Did you file a/any claim(s) on the referenced project? □ Yes or □ No

   If “Yes,” complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.

12. **Responsible Performance on the Project Provided on the Project Data Sheet:**
   (Pass/Fail Section)
   a. Have you listed any negative references for the Project above?
      YES □ NO □
   b. Have you provided any information that would conflict with a reference verification check?
      YES □ NO □
   c. Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
      YES □ NO □

   END OF PROJECT DATA SHEET NO. 7
7. RESPONSIBLE PERFORMANCE ON ALL COMPLETED PROJECTS (Points Section)

Each “NO” is worth 10 points. Must score 70 or more points to pass. At its sole discretion, the University may award 5 points due to mitigating circumstances.

If you answer “YES” to any question, provide an explanation on a separate page and attach it to this Prequalification Questionnaire.

A. Has bidder provided any inaccurate or incorrect information required during prequalification, qualification, bidding, or required by contract documents?
   YES ☐ NO ☐

B. Is bidder currently debarred from work by a public entity in California?
   YES ☐ NO ☐ If “YES,” provide name of public entity: ______________________

C. Has bidder performed any work without the required contractor's license?
   YES ☐ NO ☐

D. Is bidder currently the debtor in a bankruptcy case?
   YES ☐ NO ☐

E. Has bidder used unlicensed or improperly licensed subcontractors?
   YES ☐ NO ☐

F. Has bidder substituted a subcontractor without an owner’s written consent?
   YES ☐ NO ☐

G. Has bidder failed to adhere to contractually required and agreed-upon schedules?
   YES ☐ NO ☐

H. Has bidder ever been convicted of a criminal offense in connection with current or past contracts for projects?
   YES ☐ NO ☐

I. Does bidder have a history of poor past performance of work as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, termination for cause, or repeated failure to provide proper supervision required by the contract documents?
   YES ☐ NO ☐

J. Has a public entity ever had to issue bidder a unilateral change order because bidder refused to execute a change order and perform the change order work?
   YES ☐ NO ☐
8. **STAFFING (Pass/Fail Section)**

A. The University requires the prospective bidder to assign a **full-time** superintendent to the Project.

   Name of Superintendent: ____________________________ Tel: __________________
   Email: ____________________________ Cell: __________________

   (1) You must complete and submit detailed resume that demonstrates that the above-named individual has construction experience substantially similar to that specified in Section 6.A. of this Prequalification Questionnaire.

   (2) By signing the Prequalification Declaration of this Questionnaire, you agree that the above-named individual is subject to the University’s approval, and is subject to replacement by you at University’s sole request during the Prequalification and Bidding periods for this Project, and if awarded the Contract for the Project, after award. Any individual approved by the University cannot be replaced by you without University’s written consent.

B. The University requires the prospective bidder to assign a **full-time** project manager to the Project.

   Name of Project Manager: ____________________________ Tel: __________________
   Email: ____________________________ Cell: __________________

   (1) You must complete and submit detailed resume that demonstrates that the above-named individual has construction experience substantially similar to that specified in Section 6.A. of this Prequalification Questionnaire.

   (2) By signing the Prequalification Declaration of this Questionnaire, you agree that the above-named individual is subject to the University’s approval, and is subject to replacement by you at University’s sole request during the Prequalification and Bidding periods for this Project, and if awarded the Contract for the Project, after award. Any individual approved by the University cannot be replaced by you without University’s written consent.

C. **NOT USED**

D. The individual(s) named above must be assigned to the office that will be assigned to the Project by Contractor. Provide the address of your office to be assigned to this Project:

   ____________________________________________  
   ____________________________, ____________________________  
   (Street Address)  (City)  (State & Zip)

   The above office must be within **90 miles** of the UCR Planning, Design & Construction office at 1223 University Avenue, Suite 240, Riverside, CA 92507.

   **Any change in the office assigned must be approved by the University and cannot be replaced without University’s written consent.**
9. SAFETY PROGRAM (Pass/Fail Section)
   A. Has bidder instituted an injury and illness prevention program (IIPP) pursuant to Section 3201.5 or 6401.7 of the Labor Code?
      YES ☐    NO ☐
      If “YES,” then ☐ attach a copy of the Table of Contents from bidder’s IIPP.

   B. Will bidder have personnel permanently assigned and dedicated part-time to Safety on this Project? May be the listed Project Manager or Superintendent.
      YES ☐    NO ☐
      If “YES”, provide the name(s) and title(s) of the person(s):
      Name and Title: ____________________________________________________________
      If necessary, include additional information on a separate page and attach it to this Prequalification Questionnaire.

   C. Has bidder had a serious and willful violation of Part 1 (commencing with Section 6300) of Division 5 of the Labor Code within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
      YES ☐    NO ☐

NOT USED

10. LABOR COMPLIANCE (Pass/Fail Section)
   A. Has the prospective bidder committed a prevailing wage violation* within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
      YES ☐    NO ☐
      *Does not include a violation determined to be due to inadvertent or unintentional error by the California Department of Industrial Relations. If a violation due to inadvertent or unintentional error, then on a separate page attached to this Prequalification Questionnaire, identify the violation by providing the project name, date of the violation, name of the entity (or entities), a brief description of the nature of the violation, and a brief description of the status of the violation (e.g., pending, or if resolved, a brief description of the resolution, etc.) for the University’s verification.

   B. At any time within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire, has the prospective bidder been found to have violated any provision of California apprenticeship laws or regulations, or the laws pertaining to use of apprentices on public works?
      YES ☐    NO ☐
11. **QUALITY ASSURANCE/QUALITY CONTROL (QA/QC) PROGRAM (Pass/Fail Section)**

   **A.** Does bidder have a written quality assurance/quality control program?
   
   YES ☐          NO ☐
   
   If “YES,” ☐ attach a copy of bidder’s QA/QC program.

   **B.** Will bidder have personnel permanently assigned and dedicated part-time to QA/QC on this Project? May be the listed Project Manager or Superintendent.
   
   YES ☐          NO ☐
   
   If “YES”, provide the name(s) and title(s) of the person(s):

   Name and Title: ____________________________________________
   
   If necessary, include additional information on a separate page and attach it to this Prequalification Questionnaire.

12. **DISCIPLINARY MEASURES HISTORY (Pass/Fail Section)**

   Has bidder (or any member of the entity if a joint venture or partnership) been disqualified or otherwise barred from doing business with a public agency (e.g., federal, state, county, city, University of California System, California State University System, school district,) within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
   
   YES ☐          NO ☐

13. **FALSE CLAIMS HISTORY (Pass/Fail Section)**

   Has bidder (or any member of the entity if a joint venture or partnership) been found in a final decision of a court to have submitted a false claim to a public agency (e.g., federal, state, county, city, University of California System, California State University System,) within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
   
   YES ☐          NO ☐

14. **TERMINATION HISTORY (Pass/Fail Section)**

   Has bidder (or any member of the entity if a joint venture or partnership) been terminated for cause by an owner after construction commenced within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
   
   YES ☐          NO ☐

15. **LIQUIDATED DAMAGES (Pass/Fail Section)**

   Has bidder (or any member of the entity if a joint venture or partnership) been assessed liquidated damages of more than $50,000 on a construction contract with either a public or private owner within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
   
   YES ☐          NO ☐
16. CLAIMS HISTORY (Points Section)

Each prospective bidder will be evaluated to determine if the bidder and/or persons or entities associated with the bidder have a history of having unmeritorious claims asserted by or on their behalf in litigation or arbitration and/or of having had meritorious design or construction claims asserted against them in litigation or arbitration.

In order to be evaluated, each prospective bidder must complete the Claims History portion of this Prequalification Questionnaire. Based on the information provided, each prospective bidder will be assigned a Claims History score. The maximum possible score is 15. Must score 10 or more points to pass this Section.

Two (2) points will be deducted from the total available points for this Section for each qualifying lawsuit or arbitration, commenced within five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire, in which the prospective bidder and/or persons or entities associated with the bidder, had design or construction claims asserted by or on their behalf that were resolved by trial court judgment, arbitration award or settlement calling for receipt of less than 50% of the total amount of claims asserted in the lawsuit or arbitration.

Additionally, two (2) points will be deducted from the total available points for this Section for each qualifying lawsuit or arbitration, commenced within five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire, in which the prospective bidder and/or persons or entities associated with the bidder, had design or construction claims asserted against them, that were resolved by trial court judgment, arbitration award or settlement calling for receipt of more than 50% of the total amount of claims asserted in the lawsuit or arbitration.

Any prospective bidder with a score deduction of 6 or more points will presumptively be considered not prequalified because the prospective bidder and/or persons or entities associated with the bidder have been a party to three (3) or more lawsuits or arbitrations in which they either asserted, or had asserted on their behalf, unmeritorious design or construction claims or they had meritorious design or construction claims asserted against them.

The presumption may be rebutted if the University determines, after investigating any explanation offered in providing the Claims History, that the prospective bidder and/or persons or entities associated with the bidder have not been a party to three (3) or more lawsuits or arbitrations in which they either asserted, or had asserted on their behalf, unmeritorious design or construction claims or they had meritorious design or construction claims asserted against them.

If the presumption is not rebutted, the prospective bidder will be deemed to have an unacceptable Claims History, and will not be prequalified for the Project that is the subject of this prequalification process.

As used herein:

“Lawsuit” means any lawsuit commenced within five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire.

“Arbitration” means any binding arbitration commenced within five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire.

“Claim” means a claim (excluding claims solely for the enforcement of stop notices) arising from design and/or construction work and includes, without limitation, claims for extra compensation and damages (including delay, disruption and acceleration damages, but excluding claims for personal injury or death), and claims for defective design or construction work.

“Pass-Through Claim” has the meaning commonly ascribed to it in the construction industry and also includes (i) any claim that was or is asserted by the prospective bidder, in whole or in part, against an Owner on behalf of a different person or entity; and (ii) any claim that was or is asserted
by an Owner against the prospective bidder, and that was subsequently reasserted, in whole or in part, against a different person or entity.

A. Has bidder failed to be prequalified, in part or in whole, within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire, for failure to provide requested information regarding past litigation or arbitration history?

YES ☐    NO ☐ (5 Points)

B. Has bidder been a party to any lawsuits or arbitrations, within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire, where the total amount of Claims (including Pass-Through Claims) asserted by or on behalf of the entity exceeded $50,000?

YES ☐    NO ☐ (5 Points)

If “YES,” then how many? _________________

For each such claim, complete a Claim Data Sheet and attach it to this Prequalification Questionnaire. Make Copies of the Claim Data Sheet as needed.

C. Has bidder been a party to any lawsuits or arbitrations, within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire, where the total amount of Claims (including Pass-Through Claims, and claims for indemnity or contribution) against the entity exceeded $50,000?

YES ☐    NO ☐ (5 Points)

If “YES,” then how many? _________________

For each such claim, complete a Claim Data Sheet and attach it to this Prequalification Questionnaire. Make Copies of the Claim Data Sheet as needed.
CLAIM DATA SHEET No. __

A separate Claim Data Sheet must be prepared for each Lawsuit or Arbitration as required above. If the claims were made against the entity and were resolved for more than 50% of the highest amount sought, state why the claims should not be considered meritorious design or construction claims asserted against the prospective bidder and/or persons or entities associated with the prospective bidder.

1. Case Name and Number:

Was GC attempting to prequalify the party who initiated this claim? ☐ Yes or ☐ No
Date Arbitration or Litigation Commenced:
Name of Court or Arbitration Service:
Location of Court or Arbitration Service:

Address:  ,  ,  (Street Address)  ,  (City)  ,  (State & Zip)

2. Project Name:

Project or Contract Number:
Location:  ,  ,  (Street Address)  ,  (City)  ,  (State & Zip)

3. Owner:

Contact Name:  Tel:  Cell:
Contact Title:  Email:

Did the Owner hold your contract? ☐ Yes or ☐ No
If “No,” then provide the contact information for the entity that held your contract:
Company Name:
Contact Person:  Tel:  Cell:
Email:

4. Description of Claims: (Attach a separate page if necessary.)

Highest Amount Sought For All Claims: $  
Amount Recovered: $  
Date of Claim Resolution:
Method of Resolution: (Check one.)
☐ Judgment ☐ Arbitration Award ☐ Settlement
☐ Other, describe:
PREQUALIFICATION DECLARATION

I, ________________________________, hereby declare that I am the ________________________________ of ________________________________ submitting this Prequalification Questionnaire; that I am duly authorized to sign this Prequalification Questionnaire on behalf of the above named bidder; and that all information set forth in this Prequalification Questionnaire and all attachments hereto are, to the best of my knowledge, true, accurate, and complete as of its submission date.

I declare, under penalty of perjury, that the foregoing is true and correct and that this Declaration was executed in:

___________________________, in the State of ________________________________

on ________________________ .

________________________________

(Signature)

END OF PREQUALIFICATION QUESTIONNAIRE