

1. Company and Overall Experience:

Legal Company Name: _____
 Federal Tax ID Number: _____
 Mailing Address: _____

Business Phone: _____
 Email: _____
 Website: _____

Form of Business: _____ Corporation
 _____ Sole Proprietorship
 _____ Partnership

Certifications: _____ MBE _____ WBE
 _____ DBE _____ EDGE

a) Indicate Bidder’s overall experience performing the trades bid, including the years in business performing the trade under present and former business names.

Additionally, list:

b) All principals of the firm. If a principal is to be involved in this project, identify what their involvement on this project will be.

c) Identify all other businesses the principals of this firm have ownership in.

d) Provide your Company’s annual sales: _____

e) Provide your uncompleted backlog: _____

f) Insurance information:
 a. Insurance Company name: _____
 b. Date of renewal: _____
 c. Automobile limits: _____
 d. Employers liability limits: _____
 e. General liability limits: _____
 f. Excess insurance limits: _____
 g. Bonding Company name: _____
 h. Bonding capacity: _____

2. Work Force: Please provide the following:

- a) Total number of craftsmen in your firm (This should be the total without double counting certain personnel who hold multiple positions): _____
 - b) Is your workforce OSHA 10 HR Certified? _____ YES _____ NO
 - a. If YES, positions that are trained: _____
 - c) Is your workforce OSHA 30 HR Certified? _____ YES _____ NO
 - a. If YES, positions that are trained: _____
 - d) Provide your current EMR, and for the previous two years:
 - a. Current: _____
 - b. Last: _____
 - c. Prior to last: _____
 - e) Provide your current OSHA Incident Rate, and for the previous two years:
 - a. Current: _____
 - b. Last: _____
 - c. Prior to last: _____
 - f) Workers Compensation through State of Ohio: _____ YES _____ NO
 - g) Approved Drug Free Workplace Program: _____ YES _____ NO
 - h) Company health insurance for all employees: _____ YES _____ NO
- Employer pays directly, or through an agent, a portion of the premium on behalf of their employees into a bona fide administer.*

3. Management. Identify individuals assigned to this Project. Provide detailed resume for each:

Principal: _____ Years with firm _____ Total Exp. _____

Project Manager: _____ Years with firm _____ Total Exp. _____

Field Superintendent(s) _____ Years with firm _____ Total Exp. _____

4. Current Workload: List all ongoing projects for which the Management individuals proposed in #3 above are responsible:

Project Name	Personnel	Role in Project	Start Date	Planned Completion Date	Percent Complete

5. **Financial.** The proposed Bidder shall submit, upon request of the Contracting Authority, either:

- a) An annual financial statement prepared within the 12 months prior to the bid opening by an independent licensed accounting firm; and the name, address, contact person and phone number of the bank normally used by the Bidder for its primary banking; or,
- b) A financial report generated within 30 days prior to the bid opening from Standard and Poors, Dun and Bradstreet or a similar company acceptable to the Contracting Authority documenting the financial condition of the Bidder; and the name, address, contact person and phone number of the bank normally used by the Bidder for its primary banking;

Additionally,

- c) Provide single project and aggregate bonding limits and associated rates. Clearly indicate your company's ability to provide a payment and performance bond for this specific project.
- d) To support the bond, a current and signed Certificate of Compliance issued by the Ohio Department of Insurance, showing the Surety is licensed to do business as a surety in Ohio

6. **Facilities & Equipment.** Indicate Bidder's relevant facilities and major equipment (leased or owned):

7. **Ongoing & Relevant Projects.** List (on a separate sheet if required) all ongoing projects and projects completed in the last 5 years, which are similar in cost and type to the Project. Include scope of Work, Contract value, a description of EDGE participation and performance, and project name/contact person/address/phone number for each owner and the architect or engineer for each project.

8. Regulatory / Contractual. Indicate all occurrences of the following in the last 5 years (indicate if none). If YES, provide verification, attach documentation, and/or provide sufficient and appropriate detail information such as: project name, owner, contact person and phone number, amount of contract, etc.

State or Federal Prevailing Wage violations or judgments :	YES	NO
Affirmative Action program violations:	YES	NO
EDGE program violations:	YES	NO
Contract abandonment, contract termination, as either a prime or sub-contractor, or Surety takeover:	YES	NO
Bond Claims or Lien Claims made against the Company, as either a prime or sub-contractor:	YES	NO
Debarment by state, federal, or local jurisdictions:		
EPA Violations:	YES	NO
OSHA Violations:	YES	NO
72-Hour Notices and/or 5-15 Letters (to include details regarding the nature of the notices and resolution/outcome)	YES	NO
Liquidated damages and Statutory Delay Forfeiture assessed:	YES	NO
Drug-Free Safety Program and Drug Free Workplace Program violations:	YES	NO
Complete list of judgements, claims, arbitration, court proceeding or suits pending or outstanding in the last five years:	YES	NO

a) Does your Company have the following:

Equal Employment Opportunity/Affirmative Action Policy	YES	NO
Sexual and Non-Sexual Harassment Policy	YES	NO
Disciplinary Policy	YES	NO
Company Safety Manual	YES	NO
Company Safety Officer	YES	NO
Substance Abuse Policy	YES	NO
Pre-hire substance testing	YES	NO
Random post-hire substance testing	YES	NO
Hazardous Communication Program	YES	NO
Safety orientation for new hires	YES	NO
Weekly safety meetings	YES	NO

9. Lawsuits, Claims or Demands on Public Contracts. List any lawsuits, claims, or demands, related to the company or organization’s participation on any public contract, whether the lawsuit, claim or demand was initiated by the public owner against the company or organization or initiated against the company or organization in its capacity as a subcontractor.

10. Return to a Project within 5 Years. In the past five years, has the company or organization ever been requested by a public owner to return to address construction workmanship, performance, or installation issues. If so, please state the project and type of contract, and describe the response to the request.

11. EDGE Participation. Identify EDGE-certified Business Enterprises proposed as Subcontractors and Material Suppliers for this Project. Attach a fully completed Document 00 45 39 - "EDGE Affidavit" for each EDGE certified Business Enterprise.

12. References. Provide a list of references for review. This list should include any letters of recommendations received from previous projects.

13. Required Submittals

- a. Provide Certificate of Compliance with Affirmative Action Programs and EOC, issued pursuant to Ohio Revised Code Section 9.47.
- b. Provide proof of current licenses to perform the associated Work as required by the Contracting Authority or by Applicable Law.

14. Certification. I hereby certify that the information in this entire Bidder's Qualifications form, including all attachments and referenced information, is factual and complete.

Company Name _____

Authorized Official (please print or type) _____

Signature of Authorized Official _____

Date _____