

**TALBOT COUNTY
PUBLIC SCHOOLS
EASTON, MD 21601**

**POLICY CODE
6.3
ADOPTED: 09/23/92
REVISED: 4/20/05
REVIEWED: 06/28/10**

CONSTRUCTION CONTRACTOR PRE-QUALIFICATIONS

All Contractors desiring to undertake construction work with a value in excess of \$100,000.00 under the jurisdiction of the Board of Education shall be pre-qualified as required by the Maryland Rules, Regulations, and Procedures for the Administration of the Public School Construction Program.

Interested construction contractors shall be solicited by placing an appropriate advertisement in at least two (2) newspapers or publications serving the Talbot County area. Additional solicitations may be made directly as determined necessary.

Interested contractors shall submit a **CONTRACTOR'S QUALIFICATION QUESTIONNAIRE FOR PUBLIC SCHOOL CONSTRUCTION** within the schedule provided in the solicitation described above. A copy of the **QUESTIONNAIRE** is attached and is a part of this policy.

Contractors shall be evaluated by the *Superintendent's designee responsible for the specific project to be bid*. Contractors submitting **QUESTIONNAIRES** shall be advised of their qualification status in writing. *Approvals shall be in effect for one (1) year.*

-END-

**TALBOT COUNTY PUBLIC SCHOOLS
CONTRACTOR'S QUALIFICATION QUESTIONNAIRE
FOR
PUBLIC SCHOOL CONSTRUCTION PROGRAM**

IMPORTANT

This questionnaire serves as a basis for establishing the qualifications of Contractors for undertaking Construction Work under the jurisdiction of the Board of Education of Talbot County.

If a Contractor has not submitted to the Board this form setting forth his/her qualifications to the satisfaction of the Superintendent of Schools, he/she (the Contractor) shall be ineligible to receive construction documents for bidding or for contract award for such work as may be handled through the Board of Education. Certification of Qualifications shall be valid for one (1) calendar year only.

I. General

(a) Legal Title and Address of Organization Telephone _____

(b) Maryland Representative's Name, Title and Address

(c) Corporation _____ Co-Partnership _____ Individual _____ (Check One)

(d) If a Corporation-- (State:)

Date of Incorporation _____ State in which Incorporated _____

Name and Title of Principle Officers	Date of Assuming Position
_____	_____
_____	_____

(e) If a Co-Partnership-- (State:)

Date of Organization 200__ Nature of Partnership (Gen.,Ltd.,Assoc.)

Name and Addresses of Partners

(f) If Individual-- (State:)

Full Name and Address of Owner _____

(g) List major items of equipment fully owned by organization, giving approximate value and age. (If not fully owned, so state. Use separate sheet if necessary)

<u>Item</u>	<u>Age</u>	<u>Value</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(h) Is any member of your organization employed by the County, related to an employee of the County, or in any way officially connected with the local Government? _____
If yes--Explain _____

(i) Give name and data concerning any construction projects you may have failed to complete

(use separate sheet if necessary)

(j) Has your organization ever been party to any litigation as a result of anything related to your construction projects. ____ If yes--Explain _____

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(k) Has any officer or partner in your organization ever been an owner, partner or officer of another organization when it failed to complete a contract or agreement? If yes--Explain (Use separate sheet if necessary) _

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(l) Has the organization or any partner or officer received a citation for non-compliance with any *federal, state or local* regulations. If yes--Explain _____

II. Financial

(a) Give value of all construction equipment owned by your organization

\$ _____

(b) Give value of total assets of organization (including equipment value in (IIa) above)

\$ _____

(c) Give value of total liabilities of organization \$ _____

(d) Give total contract value of work accomplished by your organization in each of the last three

(3) years.

\$ _____ 20__

\$ _____ 20__

\$ _____ 20__

(e) Give contract value of work presently being accomplished by, or pending award to your organization \$ _____ Date _____

(f) Give value of any judgments or liens outstanding against your organization \$ _____

(g) Has any Bonding Company refused to write you a bond on any construction work? _____

If yes--Explain _____

(h) Give maximum value of contract work for which you could obtain Bond \$ _____

(i) Name and address of Bonding Company

III. Experience

(a) Indicate type of contracting undertaken by your organization and year's experience:

General _____
YEARS

Sub _____
YEARS

Type _____
YEARS

Type _____
YEARS

Type _____
YEARS

(b) State construction experience of principal members of your organization:

Construction Experience

Name	Title (As Pres., Mgr., Etc.)	Const. Experience Years	Type of Work (Such as houses, apts., etc.)	In What Capacity (Foreman, Supt., etc.)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(c) Give any special qualifications of firm members (Registered Engineer, Surveyor, etc.)

(Use Extension Sheet if Necessary)

(d) List some principal projects completed by your organization:

Name of Work	General or Sub (If sub, what type of work)	Your Contract Amount
1) _____	_____	\$ _____
2) _____	_____	\$ _____
3) _____	_____	\$ _____
4) _____	_____	\$ _____
5) _____	_____	\$ _____

Year	Designing Architect or Engineer	Owner's Name and County
_____	_____	_____

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

(e) If General Contractor, list some sub-contractors in various fields who have worked under you:

(f) If Sub-contractor, list some General Contractors for whom you have worked:

(g) 1. What is the monetary value of the largest project accomplished by your organization?

\$ _____

2. Maximum value in last three (3) years \$ _____

3. Maximum value you prefer to undertake \$ _____

4. Price range of work your organization is deemed best adapted to undertake \$ _____

(h) Is your organization licensed in the State of Maryland for the current year? _____

Give date _____

The above statements are certified to be true and accurate.

Dated at _____ this ____ day of _____ 20__

By _____

(Title of Person Signing)

(Name of Organization)

State of _____

County of _____

_____ Being duly sworn states that he is _____

_____ of _____ and that the answers to the

(Office)

(Name of Organization)

Foregoing questions and all statements therein contained are true and correct.

Sworn to before me this _____ day of _____ 200__

(Notary Public)

My Commission expires _____

Do not fill in these spaces:

Year Filed: _____ Application: _____ Reviewed by: _____ Date: _____

