

**City of Charlotte**  
**Prequalification Form for First –Tier Subcontractors under CM at Risk**

Pursuant to the statute, this form gathers information about the contractors seeking to qualify for the work and provides a general format for the prequalification criteria. **Completing this questionnaire does not guarantee prequalification.** Evaluation of the submittal shall be performed by the prequalification committee in accordance with GS 143-128.1, 143-135.8 and the State of NC Prequalification Policy (attached).

**Contractors are not to use the blank template from the SCO website but to use the project specific form from the Prequalification Committee.**

**PREQUALIFICATION DUE DATE/TIME:**

(date)

(time)

**Submitted to:**

Contact Name receiving prequalifying packages

Agency/Institution

Address

Address

City/State Zip Code + 4

Phone number

Fax Number

E-mail address

**Project:**

Name of Project

Project Owner

Project Location/Address

Project Architect

Project Phase

Project Start Date (Approx.)

Project/Phase Duration

Anticipated Bid Date

Total Project Budget

Phase Budget

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**If your firm is interested in prequalifying for this project/phase, please check the box for your trade(s). This is a preliminary list of Bid Packages and may change based on response and qualified bidders.**

[illegible]

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**Project Description:** (An in-depth narrative of the details of the project, site, trades, LEED, etc.)

**SECTION 1. GENERAL COMPANY INFORMATION**

**1. a. Primary/Main office location**

Company Name

Physical Address

Mailing Address

City/State Zip Code + 4

(                      )

Phone number

(                      )

Fax number

Primary Contact Name

Secondary Contact Name

Primary Contact Email Address

Secondary Contact Email Address

**[Matrix: 0-1 points. If completely filled in give 1 point. If not, give 0 points.]**

**Organization**

**1. b. Business type** (check box)    Corporation    Partnership    Limited Liability Company    Sole Proprietor  
Joint Venture

Indicate your NC Statewide Uniform Certification (check box):    NC HUB    CBI    MWSBE    SBE

See website link for more information: <http://www.doa.nc.gov/hub/swuc.htm>

Other (specify)

Certifying Agency/State (specify)

Is your firm registered with the State of North Carolina to do business?    Yes    No

Is your firm registered with the Charlotte Business Inclusion Program as an SBE?    Yes    No

Is your firm owned or controlled by a parent or any other organization?    Yes    No

Describe Ownership if Yes:

List all other names your firm has operated as for the past five (5) years:

**[Matrix: 0-1 point. If completely filled in give 1 point. If not, give 0 points.]**

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**1. c. Licensing Information** (Please provide all North Carolina professional licenses required for you to perform your services.)

NC License number/name of licensee    License Limit/Level    State/County/City Privilege License (provide copy)

Has any license ever been denied or revoked?    Yes    No    If yes, please describe,

[Matrix: 0-1 point. If completely filled in give 1 point. If not, give 0 points.]

**1. d. Type of Work Performed on a regular basis**

Primary Scope of Work:

Secondary Scope of Work:

Other Scope of Work:

What type of work do you self perform?

[Matrix: 0-1 point. If completely filled in give 1 points If not, give 0 points.]

**Bonding**

**1. e. (1)** Attach a project specific bonding letter, dated within the last 30 days, from your surety company, signed by their Attorney In Fact, verifying their willingness to issue sufficient payment and performance bonds for this project, on behalf of your firm and the dollar limits of that bond commitment, both single and aggregate. Surety company bond rating shall be rated "A" or better under the A.M. Best rating system. A separate payment and performance bond are required on all bid packages of \$100,000.00 or greater. If scope of work includes the building exterior, separate payment and performance bonds are required regardless of the value of the scope of the bid package.

Have you attached a surety letter?    Yes    No

[Matrix: 0-10 points. If surety letter attached and the bonding amount meets or exceeds the estimated value of the notated bid package give 10 points. If no letter is provided, give 0 points. If no bonding letter is provided but the bid package is less than \$100,000 and does not include the building exterior, give 10 points.]

**1. e. (2)** Have any Funds been expended by a Surety Company on your firm's behalf?    Yes    No    If yes, explain

[Matrix: 0-3 points. If no funds expended by surety company give 3 points. If not, give 0 points.]

**Insurance**

**1. f.** Firms must indicate that they can provide evidence of insurance coverage, should they be the successful bidder by attaching a copy of their insurance certificate. Have you attached a copy of your insurance certificate?    Yes    No

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Minimum required limits:

- Workers Compensation Insurance: Statutory Limits
- Employer's Liability Insurance: \$500,000/\$500,000/\$500,000
- Comprehensive general liability: \$1,000,000/\$1,000,000 per project limits
- Auto Liability: \$1,000,000 CSL
- Umbrella/Excess: \$3,000,000

[Matrix: 0-2 points. If insurance certificate attached give 2 points. If not, give 0 points.]

## Financials

**1. g. Attach latest Balance Sheet and Income Statement. Audited statements preferred. Have you attached a balance sheet and Income Statement?**    Yes    No

[Matrix: 0-10 points. Firms are required to submit their most recent financial statements to include Balance Sheet and Income Statement. Firms must have sufficient Working Capital to be able to payoff short-term debt. We also examine the firm's Net Worth. Firms with sufficient Working Capital, Net Worth or Shareholders Equity give 10 points. Firms with insufficient Working Capital, Net Worth or Shareholders Equity give 0 points.]

## SECTION 2. GENERAL REQUIREMENTS

### Experience - Size/Capacity/Workload

**2. a. (1)** List the annual dollar value of construction work the company has performed for each year over the last (3) three calendar years (if applicable).

1	(yr)	2	(yr)	3	(yr)
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[Matrix: 0-3 points. For each year completed give 1 point each.]

**2. a. (2)** How many projects do you currently have under contract or in progress and what is their total dollar value?

- (# of projects) ;
- \$ (Current projects contract amount);
- \$ (Projects current amount remaining to bill)

[Matrix: 0-3 points. If section completed give 3 points. If not, give 0 points.]

<b>2. a. (3) What was your largest job completed?</b>	Sq. Ft.	\$	( Dollar Amount)
Location			Year Completed

[Matrix: 0-3 points. Take the “dollar amount of largest job completed” and multiply by 1.5. If the result is larger than the estimated package cost then give 3 points. If the result is smaller then give 0 points.]

**2. a. (4) Current Backlog \$** (Dollar Amount)

[Matrix: 0-3 points. Take “current backlog” dollar amount and add “largest job completed (2.a.(3)) multiplied by 1.5”. If the result is smaller than the average of the “annual dollar amounts” listed in (2.a.(1)) multiplied by 1.5, then give 3 points. If the result is larger then give 0 points.]

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**2. a. (5)** List the three largest contracts currently under contract or in progress, including for each, the name of the project, owner, architect and/or GC/CMR and contact information below.

<b>#1 –Project Name</b>	
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
<b>#2 –Project Name</b>	
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
<b>#3 –Project Name</b>	
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	

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Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	

**[Matrix: 0-3 points for each project listed. For each project above, give 2 points. In addition, give 1 point for each positive reference from the owner, architect and GC/CMR.]**

**Office Locations**

**2. b.** Will this project be managed and directed from an office in NC? An office in NC is defined as “The principal place from which the trade or business of the bidder is directed or managed,” per GS 143-59 (c).    Yes    No

**[Matrix: 0-3 points. If office location is managed and directed from NC office give 3 points. If not, give 0 points.]**

**Litigation/Claims**

**2. c. (1)** Has your company been involved in any judgments, claims, arbitration or mediation proceedings, or suits within the last five years, whether resolved or still pending resolution?    Yes    No    If yes, state the project name(s), year(s), case number and reason why:

**[Matrix: 0-2 points. If company has not been involved in any of the above give 2 points. If they have, give 0 points.]**

**2. c. (2)** Are there currently any judgments, claims, arbitration or mediation proceedings or suits pending or outstanding against your company, its officers, owners, or agents?    Yes    ☐ No    If yes, state the project name(s), year(s), case number and reason why:

**[Matrix: 0-2 points. If there are no current judgments, claims, arbitration, suits or mediation pending give 2 points. If there is, give 0 points.]**

**2. c. (3)** Has your company ever failed to complete work awarded to it?    Yes    No    If yes, please provide project name(s), year(s), and reason why:

**[Matrix: 0-2 points. If company has never failed to complete work it has been awarded then given 2 points. If they have failed to complete work then, give 0 points.]**

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**2. c. (4)** Have you ever paid liquidated damages on any project?    Yes    No    If yes, state the project name(s), year(s), and reason why.

**[Matrix: 0-2 points. If “Yes” without sufficient explanation, give 0 points. If “No,” give 2 points.]**

**2. c. (5)** Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging?    Yes    No    If yes, state the project name(s), year(s), and reason why.

**[Matrix: 0 -3 points. If “Yes,” give 0 points. If “No,” 3 points.]**

**2. c. (6)** Has your present company, its officers, owners, or agents ever been barred from bidding public work in North Carolina?    Yes    No    If yes, state the project name(s), year(s), case number and reason why.

**[Matrix: 0 - 3 points. If “Yes,” give 0 points. If “No,” 3 points.]**

**Safety Record**

**2. d.** List your company’s Experience Modification Rate (EMR) for past three years. (Attach OSHA 300 Log for the last 3 years.) Have you attached OSHA 300 log?    Yes    No

Present Rate	Last Rate	Year before rate
If these rates reflect corporate performance over a number of locations, please explain, to the extent possible, the performance experience of the location serving this project:		

List any OSHA fines and Jobsite fatalities in the past 3 years with an explanation:

**[Matrix: 0-5 points. If EMR rate is less than or equal to 1 then give 5 points. If not, give 0 points.]**

**Historically Underutilized Business (HUB) Plan**

**2. e.** Does the company currently have a documented plan for engaging subcontractor participation from Historically Underutilized Businesses?    Yes    No    If yes, please attach your company’s HUB plan.

**[Matrix: 0-3 points. If company has a current documented plan give 3 points. If not, give 0 points.]**

**SECTION 3. PROJECT SPECIFICS**

**3.a.** The assigned project superintendent for this project shall be:  
Include a resume. Have you included a resume?    Yes    No

**[Matrix: 0-2 points. If resume included, give 2 points. If not, give 0 points.]**

**3.b.** The experience this superintendent has on this specific type of project is:    0-2    3-4    5-10    >10 years.

**[Matrix: 0-5 points. If 0-2 years give 1 pt, 3-4 years give 2 pts, 5-10 years give 4 pts, >10 years give 5 pts.]**



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**3.c.** The assigned project manager for this project shall be  
 Include a resume. Have you included a resume?      Yes      No

**[Matrix: 0-2 points. If resume included, give 2 points. If not, give 0 points.]**

**3.d.** The experience this project manager has on this specific type of project is:      0-2      3-4      5-10      >10  
 years.

**[Matrix: 0-5 points. If 0-2 years give 1 pt, 3-4 years give 2 pts, 5-10 years give 4 pts, >10 years give 5 pts.]**

**Similar Projects**

**3.e.** List three (3) current or completed projects of similar type which most closely reflects the size and complexity of the type of work being requested for the currently proposed project within the last 10 years.

<b>#1 –Similar - Project Name</b>	
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
<b>#2 –Similar - Project Name</b>	
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	

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Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
<b>#3 –Similar - Project Name</b>	
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	

**[Matrix: 0-3 points. For each similar project listed above give 2 points. In addition, for each project above, give 1 point for each positive reference from the owner, architect and GC/CMR.]**

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**SECTION 4. SIGNATURE**

By signing this document, you are acknowledging that all answers are true to the best of your knowledge. **Any answers found to be falsified will bar you from being prequalified on this project.**

Company Name (as licensed in NC)

Physical Address

Mailing Address

a. Dated this day of:

Submitted by:

\_\_\_\_\_  
Signature By Authorized Officer

\_\_\_\_\_  
Print Title of Authorized Officer

Phone:

\_\_\_\_\_  
Contact person's phone number

E-mail:

\_\_\_\_\_  
Contact person's E-mail address

b. Notary Certification:

North Carolina

County

I, a Notary Public of the County and State aforesaid, certify that \_\_\_\_\_, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official seal, this the \_\_\_\_\_ day of \_\_\_\_\_, 20

(Official Notary Seal or Stamp)

\_\_\_\_\_  
Signature of Notary Public

My commission expires \_\_\_\_\_, 20

**[Matrix: 0-2 points. If signature section fully executed with notary give 2 points. If not, 0 points.]**