### STOCKTON UNIFIED SCHOOL DISTRICT PREQUALIFICATION QUESTIONNAIRE DESIGN-BUILD ENTITIES

This standard prequalification questionnaire should be completed by design-build entities or design-build teams seeking to prequalify for a Stockton Unified School District ("District") design-build project in accordance with Education Code section 17250.10 et seq.

As used herein:

- "Design/Builder" refers to both design-build entities and design-build teams.
- "Member" refers to individuals or entities identified as members of the design-build team, including the general contractor and, if utilized in the design of the project, all electrical, mechanical, and plumbing contractors.
- "Associates" refers to all current officers, owners, and/or partners of Design/Builder and of any Member.

Wherever additional space is needed to answer a question fully and accurately, attach additional pages and/or additional signed sheets as needed.

## I. BUSINESS INFORMATION

### A. <u>Contact Information</u>

1. Design/Builder Name:
2. Primary contact person:
3. Principal office address:
4. Phone:
5. Fax:
6. Email:
B. Form of Organization
1. If the Design/Builder or any Member is a <b>corporation</b> :
a. Date incorporated:

b. Under laws of what state: \_\_\_\_\_

c. If a privately held corporation, list all shareholders who will perform work on the project:

Name	Ownership Percentage

- d. Attach a copy of the articles of incorporation.
- 2. If the Design/Builder or any Member is a **limited liability company**:
  - a. Date formed: \_\_\_\_\_
  - b. Under laws of what state: \_\_\_\_\_
  - c. List all LLC members who will perform work on the project:

Name	Ownership Percentage

- d. Attach a copy of the articles of organization.
- 3. If the Design/Builder or any Member is a **partnership**:
  - a. Date formed: \_\_\_\_\_
  - b. Under laws of what state: \_\_\_\_\_

c. List all partners who will perform work on the project:

Name	Ownership Percentage

- d. Attach a copy of the partnership agreement.
- 4. If the Design/Builder or any Member is a **joint venture**:
  - a. Date formed: \_\_\_\_\_\_
  - b. Under laws of what state:
  - c. List all joint venture members who will perform work on the project:

Name	Ownership Percentage

- d. Attach a copy of the joint venture agreement.
- 5. If the Design/Builder or any Member is a **sole proprietorship**:
  - a. Date formed: \_\_\_\_\_
  - b. Under laws of what state: \_\_\_\_\_
  - c. List owner: \_\_\_\_\_\_
  - d. Attach a copy of organizational documents, if any.

## C. <u>Financial Capacity</u>

- 1. Attach an audited financial statement with accompanying notes and supplemental information for the past 2 full fiscal years for Design/Builder and each entity Member (not individual Members). A letter verifying availability of a line of credit may also be attached; however, it will be considered supplemental information only, and is not a substitute for the required financial statement.
- 2. Is Design/Builder or any Member currently, or has Design/Builder or any Member within the last 5 years been, the debtor in a bankruptcy case?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," please attach a copy of the bankruptcy petition and a copy of the bankruptcy court's discharge or any other document that ended the case, if any.

# II. LICENSING AND REGISTRATION

### A. <u>General Contractor</u>

- 1. Name of license holder exactly as on file with the Contractors State License Board ("CSLB"): \_\_\_\_\_\_
- 2. License classification(s): \_\_\_\_\_
- 3. License #: \_\_\_\_\_
- 4. Issue Date: \_\_\_\_\_
- 5. Expiration Date: \_\_\_\_\_
- 6. Public Works Contractor Registration # on file with the Department of Industrial Relations ("DIR"): \_\_\_\_\_\_
- 7. Has any CSLB license held by the general contractor, or its qualifying individual, been suspended or revoked within the last 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

8. Has the general contractor changed names or license numbers within the past 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

# B. <u>Architect of Record</u>

The architect of record is the architect whose stamp will appear on project documents.

- 1. Name of license holder exactly as on file with the California Architects Board ("CAB"):
- 2. License #: \_\_\_\_\_
- 3. Issue Date: \_\_\_\_\_
- 4. Expiration Date: \_\_\_\_\_
- 5. Has any CAB license held by the architect of record been suspended or revoked within the last 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

6. Has the architect of record changed names or license numbers within the past 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

### C. <u>Engineer(s)</u>

Engineering services will be dictated by the nature of the project. The Design/Builder should respond for all "in house" engineers that will provide services on the project. If relevant, use additional signed sheets to respond for multiple engineering disciplines.

- 1. Name of license holder exactly as on file with the Board of Professional Engineers, Land Surveyors, and Geologists ("BPELSG"): \_\_\_\_\_\_
- 2. License Type:\_\_\_\_\_
- 3. Licenses #: \_\_\_\_\_
- 4. Issue Date: \_\_\_\_\_
- 5. Has any BPELSG license held by the engineer been suspended or revoked within the last 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

6. Has the engineer changed names or license numbers within the past 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

# D. <u>Mechanical, Electrical, or Plumbing Contractor(s)</u>

If utilized in the design of the project, respond for all Member electrical, or plumbing ("MEP") contractors. If relevant, use additional signed sheets to respond for multiple MEP contractors.

- 1. Name of license holder exactly as on file with the Contractors State License Board ("CSLB"): \_\_\_\_\_\_
- License classification(s): \_\_\_\_\_\_
- 3. License #: \_\_\_\_\_
- 4. Issue Date: \_\_\_\_\_
- 5. Expiration Date: \_\_\_\_\_
- 6. Public Works Contractor Registration # on file with the Department of Industrial Relations ("DIR"): \_\_\_\_\_\_
- 7. Has any CSLB license held by the MEP contractor, or its qualifying individual, been suspended or revoked within the last 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

8. Has the general contractor changed names or license numbers within the past 5 years?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet.

### III. PERFORMANCE HISTORY

1. Has Design/Builder or any Member or Associate ever been found liable in a civil suit, or found guilty in a criminal action, for making any false claim or material misrepresentation to any public agency or entity?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including identifying who was found liable or guilty, the court and case number, the name of the public entity, the civil or criminal verdict, the date, and the basis for the finding.

2. Has Design/Builder or any Member or Associate ever been convicted of a crime involving any federal, state, or local law related to construction or any crime involving fraud, theft, or any other act of dishonesty?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including identifying who was convicted, the name of the victim, the date of the conviction, the court and case number, the crimes, and the grounds for the conviction.

3. At any time in the last 5 years, has Design/Builder or any Member been assessed liquidated damages under a construction contract?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including the project, owner, owner's address, date of completion, and amount of liquidated damages.

4. At any time in the last 5 years, has Design/Builder or any Member or Associate been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any public works project?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including the project, the year of the event, owner, owner's address, and basis for the action.

5. At any time in the last 5 years, has a public agency found that Design/Builder or any Member was not a responsible bidder?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including the project, the year of the event, owner, owner's address, and basis for the finding.

6. In the past 5 years, has any claim exceeding \$50,000 been filed by or against Design/Builder or any Member in court or arbitration concerning work or payment on a construction project?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including the project name, court or arbitration case name and number, and a brief description of the status of the claim.

7. In the past 5 years, has there been more than one occasion in which Design/Builder, or any Design/Builder member, was required to pay either back wages or penalties for failure to comply with California prevailing wage laws or federal Davis-Bacon prevailing wage requirements?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, describing the nature of the violation(s), project, owner, and amount paid, if any.

8. At any time during the past 5 years, has Design/Builder or any Member been found to have violated any provision of California apprenticeship laws or regulations, or laws pertaining to use of apprentices on public works projects?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including date(s) of such findings and attaching the Division of Apprenticeship Standards' final decision(s).

#### IV. **BONDS AND INSURANCE**

#### Α. Bonds

- 1. Attach a notarized statement from an admitted surety insurer (approved by the California Department of Insurance and authorized to issue bonds in the State of California), which states the current bonding capacity of the Design/Builder (both single job limit and aggregate limit). Note: Design/Builder must have capacity to provide 100% payment bond and 100% performance bond, each issued by an admitted surety insurer, without bonding subcontractors.
- 2. Provide the name, address, and telephone number of the surety agent:
- 3. List all sureties that have written bonds to the Design/Builder or any Member during the last 5 years:

Name	Address	Date of Bond

4. In the last 5 years, has any surety paid on behalf of the Design/Builder or any Member a result of a default to satisfy any claims made against a payment or performance bond?

Yes No

If "yes," explain on a separate signed sheet, including the amount of each claim, name and telephone number of claimant, date of and grounds for the claim, and present status.

5. If Design/Builder or any Member was required to pay a premium of more than 1 percent for a performance and payment bond on any project in the last 5 years, state the percentage:

Explain on a separate signed sheet why Design/Builder or Member was required to pay the premium of more than 1 percent.

6. In the last 5 years, has Design/Builder or any Member been denied bond coverage by a surety company or had no surety bond in place when one was required?

\_\_\_\_ No Yes

If "yes," explain on a separate signed sheet, including the name of the surety company and/or period during which Design/Builder or Member had no bond in place.

## B. <u>Insurance</u>

1. Does Design/Builder have commercial general liability insurance with a policy limit of at least \$2,000,000 per occurrence and \$4,000,000 aggregate for a California admitted company?

\_\_\_\_ Yes \_\_\_\_ No

If "no," provide on a separate signed sheet what policy limits are available to Design/Builder.

2. Does Design/Builder have current workers' compensation insurance as required by the California Labor Code?

\_\_\_\_ Yes \_\_\_\_ No

3. Does Design/Builder have professional liability (errors and omissions) insurance with a policy limit of at least \$1,000,000 aggregate from a California admitted company?

\_\_\_\_ Yes \_\_\_\_ No

If "no," provide on a separate signed sheet what policy limits are available to Design/Builder.

4. In the last 5 years, has any insurance carrier, for any form of insurance, refused to renew an insurance policy for Design/Builder or any Member?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, including the name of the insurance carrier, form of insurance, and year of the refusal.

### V. <u>SAFETY</u>

- 1. Attach a description not to exceed 1 page of Design/Builder's worker safety program as applicable to this project.
- 2. Within the past 5 years, has the California or federal Occupation Safety and Health Administration ("OSHA") cited and assessed penalties against Design/Builder or any Member, for "serious," "willful," or "repeat" violations of its safety or health regulations?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, identifying the citation(s), nature of the violation(s), project, and amount of penalty paid, if any.

3. Within the past 5 years, has the Environmental Protection Agency ("EPA") or any Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against Design/Builder or any Member or the owner of the project

on which Design/Builder/Member was the contractor?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on a separate signed sheet, identifying the citation(s), nature of the violation(s), project, and amount of penalty paid, if any.

4. State the Workers' Compensation Experience Modification Rate ("EMR") for Design/Builder and each Member for the past 3 premium years:

Year	EMR

If EMR was 1.00 or higher in any of 3 years, attach a letter of explanation.

5. State the total recordable injury or illness rate and the lost work rate for Design/Builder and each Member for the past 3 years:

Year	Incident Rate	Lost Work Rate

6. Within the past 5 years, has there ever been a period when Design/Builder or any Member had employees but was without workers' compensation insurance or State-approved self-insurance?

\_\_\_\_ Yes \_\_\_\_ No

If "yes," explain on separate signed sheet, including the date(s) and reason(s) for the absence of workers' compensation insurance.

### VI. PROJECT EXPERIENCE AND REFERENCES

- 1. How many design-build projects have the general contractor and architect of record involved in this Design/Builder completed together?
- 2. For the completed design-build projects identified in the preceding answer, state:
  - a. Total dollar value of all contracts: \_\_\_\_\_

- 3. Complete the project reference form attached hereto as **Exhibits A-1**. District may, in its discretion, contact project references.
- 4. Attach resumes or similar documents, not to exceed 1 page each, showing the experience, training, and qualifications for up to 6 proposed key personnel of the Design/Builder.

### VII. SKILLED AND TRAINED WORKFORCE COMPLIANCE

1. By this submittal, Design/Builder hereby acknowledges, agrees, and provides an enforceable commitment to District that:

Design/Builder has agreed to by bound by: (i) a project labor agreement ("PLA") or project stabilization agreement ("PSA") entered into by the District that will bind all contractors and subcontractors performing work on the project to use a skilled and trained workforce; (ii) the extension or renewal of a PLA or PSA that was entered into by the District prior to January 1, 2017; or (iii) a PLA or PSA entered into by the Design/Builder that will bind the Design/Builder and all its subcontractors at every tier performing work on the project to use a skilled and trained workforce.

[CERTIFICATION ON NEXT PAGE]

## VIII. <u>CERTIFICATION</u>

Design/Builder and all Members must sign. Copy this certification page as needed for each Member.

I certify and declare that I have read all the foregoing answers to this prequalification questionnaire and that all answers are correct and complete of my own knowledge and belief. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_, 20\_\_\_

Name of Design/Builder or Member: \_\_\_\_\_

Signature by authorized individual:

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_\_

## EXHIBIT A-1

# **Design-Build Project References**

List the three most recent design-build projects, each with a contract price over \$5 million, completed by the general contractor for the Design/Builder. The projects may be public or private. Contact information must be current and viable. (Copy additional sheets.)

1.	Project Name:
	Project Address:
3.	Owner (name and tel. #):
4.	Architect (name and tel. #):
5.	Construction Manager (name and tel. #):
6	Scope of Work:
01	
7.	Original Completion Date:
8.	Actual Complete Date:
9.	Time Extensions Granted (# of days):
10	. Initial Contract Value:
11.	. Final Contract Value:
Date:	, 20
Signat	ure by authorized individual:
Print N	lame:
Title:	