

UNIVERSITY OF CALIFORNIA, SANTA BARBARA

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SANTA BARBARA • SANTA CRUZ

OFFICE OF DESIGN & CONSTRUCTION SERVICES and PHYSICAL FACILITIES

CONTRACTING SERVICES  
Building 439  
Santa Barbara, California 93106-1030  
Telephone (805) 893-3356  
Fax (805) 893-8592

- SENT VIA:**  FAX ON THIS DATE  
 HAND DELIVERY ON THIS DATE  
 FEDERAL EXPRESS ON THIS DATE  
 UNITED PARCEL SERVICE ON THIS DATE

HOLDERS OF PLANS AND SPECIFICATIONS:

San Rafael E-Key System Expansion, Bldgs. 586 & 587  
Project No. FM130155S/986395  
**Addendum No. 1**

November 15, 2012

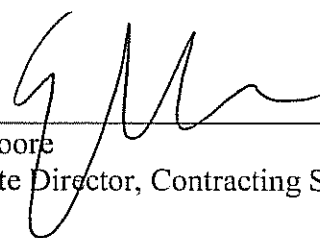
Enclosed is **ADDENDUM NO. 1** to the Construction Documents on the above-captioned project.

**The Bid date is hereby changed from Monday, November 19, 2012 at 2:30PM, to Wednesday, November 21, 2012 at 2:30PM to be held at:**

CONTRACTING SERVICES  
Facilities Management, Bldg. 439  
Door #E, Reception Counter  
University of California, Santa Barbara  
Santa Barbara, CA 93106-1030

Late arrivals shall be disqualified. Please allow time for unforeseen traffic delays, securing a parking permit and potential parking problems.

**Please Note:** A REVISED Bid Form has been included herein, any Bids not submitted on the required "Bid Form (Rev.-1)" may be rejected by the University as non-responsive.

  
\_\_\_\_\_  
Greg Moore  
Associate Director, Contracting Services

ADDENDUM NO. 1

to the

CONSTRUCTION DOCUMENTS

NOVEMBER 15, 2012

**GENERAL**

The following changes, additions or deletions shall be made to the following document(s) as Indicated; all other conditions shall remain the same.

**I. ADVERTISEMENT FOR BIDS**

Item No.

**1-1.** Replace Text: Page 2, sentence beginning with “Bid Deadline...”  
CHANGE to read as follows:

“Bid Deadline: Sealed Bids must be received on or before 2:30 P.M on  
Wednesday, November 21, 2012.”

**II. SUPPLEMENTARY INSTRUCTIONS TO BIDDERS**

Item No.

**2-1.** Replace Text: Page 1, Item 4, CHANGE to read as follows:

Bids will be received on or before the Bid Deadline: 2:30PM, November 21,  
2012, and only at:

Facilities Management, Bldg. 439  
Door #E, Reception Counter  
University of California, Santa Barbara  
Santa Barbara, CA 93106-1030

**III. BID FORM**

Item No.

**3-1** Bid Form. REPLACE the original Bid Form in its entirety with: Bid Form  
(Rev.-1) – See Attached, 20 pages. Please be advised that any bids not  
submitted on the required “Bid Form (Rev.-1)” may be rejected by the  
University as non-responsive.

**IV. SPECIFICATIONS**

Item No.

- 4-1            Section 13700 ACCESS CONTROL SYSTEM, ADD pages 7 & 8:  
(See Attached, 2 pages)

**V. DRAWINGS**

Item No.

- 5-1            Sheet SE2-10, REPLACE “(E)” symbol at ACP in Tower North  
MAID/JANITOR Room 4165 with an “(N)” symbol.
- 5-2            Sheet SE3-02, REPLACE “(E)” symbol at ACP in Tower North  
MAID/JANITOR Room 4165 to “(N)”.

**VI. GENERAL**

Item No.

- 6-1            Refer to Attachment A for list of submitted Requests for Information (RFI’s)  
and related responses.

END OF ADDENDUM NO. 1

**Attachment A****Clarification Memorandum, Set No. 1  
San Rafael E-Key System Expansion, Bldgs. 586 & 587**

The following questions and associated responses were either submitted to the University by potential bidders or are being offered by University staff to clarify the Bidding Documents. The University responses included in this Clarification Memorandum do not purport to contain all relevant information, and interested parties should conduct their own investigation and analysis regarding the accuracy, reliability and completeness of the information contained therein.

1. **QUESTION:** Can Consultant provide specific detail drawing regarding the acceptable wiring in the “terminal cabinets”? Please specify what type of terminal block is acceptable.  
**ANSWER:** Provide per Construction Documents.
2. **QUESTION:** Where are the Best locks being powered from, the Lenel Panel or a separate power supply? Please specify what lock power supply is desired.  
**ANSWER:** Refer to Section 13700 2.02B (pg. 8-10).
3. **QUESTION:** Is the security vendor to provide additional block of Lenel reader licenses?  
**ANSWER:** Refer to Section 13700 2.02A (pg. 7-8).
4. **QUESTION:** Can Consultant provide detail drawing regarding the preferred wiring in the “terminal cabinets”? Is the reader data cabling terminating in the ACP enclosures or other location? Please specify how the data cable should be terminated, it is our understanding that LNL-8000’s will not be used to accomplish this.  
**ANSWER:** Provide per Construction Documents.
5. **QUESTION:** Where are the Best locks being powered from, the Lenel Panel ACP? Please confirm that a max of 8 doors will be powered from each ACP with the addition of an approved Altronix PD4CB board.  
**ANSWER:** Refer to Section 13700 2.02B (pg. 8-10).
6. **QUESTION:** Should tampers be installed on all “existing” battery enclosures if they are not currently there?  
**ANSWER:** Provide per Construction Documents.
7. **QUESTION:** Is the security vendor to provide 2 years of support for the 2 64RUP only or for the entire housing dongle?  
**ANSWER:** Refer to Section 13700 2.02A (pg. 7-8). As part of this project the Contractor will include two (2) LNL-64-RUP reader license upgrades as well as the costs to extend the existing Direct Support agreement to cover these added software components.
8. **QUESTION:** Best integrated lock sets, please provide specific lock config that you wish the security vendor to provide, finish, handing, other options. See attached order sheet from Best that has to be completed with lock order.  
**ANSWER:** Stanley BEST Access IDH MAX 1300 Integrated Card Reader Locksets shall be Model #93KM7DDEU15SC26HB13 with the following options. Finish: 626 (US26D); Door thickness: 1-3/4”; Backset: 2-3/4”; Handing: specify RH or LH (these locks are handed); Function: DDEU (electrically unlocked); Core Housing: 7– 7 pin housing accepts all BEST cores; iClass card reader; 12VDC.
9. **QUESTION:** Is EMT conduit acceptable above the walkways at the Ocean and Mountain complexes?  
**ANSWER:** Yes, EMT is acceptable provided that all connectors, couplers and other fittings are steel compression components. No zinc/die cast fittings allowed.

BID FORM (Rev.-1)

FOR: San Rafael E-Key System Expansion, Bldg. 586 & 587

FM130155S/986395/150-92

UNIVERSITY OF CALIFORNIA  
SANTA BARBARA  
SANTA BARBARA, CALIFORNIA

October 2012

BID TO: University of California, Santa Barbara  
Facilities Management, Building 439  
Door E, Reception Counter  
Santa Barbara, CA 93106  
(805)893-3298

BID FROM:

\_\_\_\_\_  
(Name of Bidder)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City) (State) (Zip)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Fax Number)

\_\_\_\_\_  
(Email Address)

DATE BID SUBMITTED

\_\_\_\_\_  
(Date)

**Note:** All portions of this Bid Form must be completed and the Bid Form must be signed before the Bid is submitted. Failure to do so may result in the BID being rejected as non-responsive.

**1.0 BIDDER'S REPRESENTATIONS**

Bidder, represents that a) Bidder and all Subcontractors, regardless of tier, has the appropriate current and active Contractor's licenses required by the State of California and the Bidding Documents; b) it has carefully read and examined the Bidding Documents for the proposed Work on this Project; c) it has examined the site of the proposed Work and all Information Available to Bidders; d) it has become familiar with all the conditions related to the proposed Work, including the availability of labor, materials, and equipment. Bidder hereby offers to furnish all labor, materials, equipment, tools, transportation, and services necessary to complete the proposed Work on this Project in accordance with the Contract Documents for the sums quoted. Bidder further agrees that it will not withdraw its Bid within 60 days after the Bid Deadline, and that, if it is selected as the apparent lowest responsive and responsible Bidder, that it will, within 10 days after receipt of notice of selection, sign and deliver to University the Agreement in triplicate and furnish to University all items required by the Bidding Documents. If awarded the Contract, Bidder agrees to complete the proposed Work within One hundred twenty (120) calendar days after the date of commencement specified in the Notice to Proceed.

**2.0 ADDENDA**

Bidder acknowledges that it is Bidder's responsibility to ascertain whether any Addenda have been issued and if so, to obtain copies of such Addenda from University's facility at the appropriate address stated on Page 1 of this Bid Form. Bidder therefore agrees to be bound by all Addenda that has been issued for this Bid.

**3.0 NOT USED****4.0 LUMP SUM BASE BID**

\$   ,    ,    .

(Place Figures in appropriate boxes)

**5.0 SELECTION OF APPARENT LOW BIDDER**

Refer to the Instructions to Bidders for selection of apparent low bidder.

**6.0 NOT USED**

**7.0 DAILY RATE OF COMPENSATION FOR COMPENSABLE DELAYS (Used As Basis For Award)**

Bidder shall determine and provide below the daily rate of compensation for any Compensable Delay caused by University at any time during the performance of the Work:

\$  ,  .  x 10 **MULTIPLIER**  
(Place Amount in Figures in appropriate boxes)

University will perform the extension of the daily rate times the multiplier.

The daily rate shown above will be the total amount of Contractor entitlement for each day of Compensable Delay caused by University at any time during the performance of the Work and shall constitute payment in full for all delay costs, direct or indirect (including, without limitation, compensation for all extended home office overhead and extended general conditions), of the Contractor and all subcontractors, suppliers, persons, and entities under or claiming through Contractor on the Project. The number of days of Compensable Delay shown as a "multiplier" above is not intended as an estimate of the number of days of Compensable Delay anticipated by the University. The University will pay the daily rate of compensation only for the actual number of days of Compensable Delay, as defined in the General Conditions; the actual number of days of Compensable Delay may be greater or lesser than the "multiplier" shown above.

**8.0 NOT USED**

(Intentionally Left Blank)

**9.0 LIST OF SUBCONTRACTORS**

Bidder will use Subcontractors for the Work:

Yes \_\_\_\_\_

If yes, provide in the spaces below (a) the name and the location of the place of business of each subcontractor who will perform work or labor or render service to the prime contractor in or about the construction of the work or improvement, or a subcontractor licensed by the state of California who, under subcontract to the prime contractor, specifically fabricates and installs a portion of the work or improvement according to detailed drawings contained in the plans and specifications, in an amount in excess of 1/2 of 1 percent of the prime contractor's total bid, (b) the portion of the work which will be done by each subcontractor. The prime contractor shall list only one subcontractor for each such portion as is defined by the prime contractor in its bid.

Portion of the Work	SUBCONTRACTOR		
	Name	License No.	Location (City)

(Note: Add additional pages if required.)



**10.0 NOT UDED**

**11.0 BIDDER INFORMATION**

TYPE OF ORGANIZATION:

\_\_\_\_\_  
(Corporation, Partnership, Individual, Joint Venture, etc.)

- IF A CORPORATION, THE CORPORATION IS ORGANIZED UNDER THE LAWS OF THE STATE OF \_\_\_\_\_  
\_\_\_\_\_.

NAME OF PRESIDENT OF THE CORPORATION:

\_\_\_\_\_  
(Insert Name)

NAME OF SECRETARY OF THE CORPORATION:

\_\_\_\_\_  
(Insert Name)

- IF A PARTNERSHIP, NAMES OF ALL GENERAL PARTNERS:

\_\_\_\_\_  
(Insert Names)

CALIFORNIA CONTRACTORS LICENSE(S):

\_\_\_\_\_  
(Classification)                      (License Number)                      (Expiration Date)

(For Joint Venture, list Joint Venture's license and licenses for all Joint Venture partners.)

EMPLOYER IDENTIFICATION NUMBER (EIN):

\_\_\_\_\_

**12.0 REQUIRED COMPLETED ATTACHMENTS**

The following documents are submitted with and made a condition of this Bid:

1. Bid Security in the form of \_\_\_\_\_  
(Bid Bond or Certified Check)
2. Qualification Questionnaire

**13.0 DECLARATION**

I, \_\_\_\_\_, hereby declare that I am  
(Printed Name)

the \_\_\_\_\_ of \_\_\_\_\_  
(Title) (Name of Bidder)

submitting this Bid Form; that I am duly authorized to execute this Bid Form on behalf of Bidder; and that all information set forth in this Bid Form and all attachments hereto are, to the best of my knowledge, true, accurate, and complete as of its submission date.

I further declare that this bid is not made in the interest of, or on behalf of, any undisclosed person, partnership, company, association, organization, or corporation; that the bid is genuine and not collusive or sham; that the bidder has not directly or indirectly induced or solicited any other bidder to put in a false or sham bid, and has not directly or indirectly colluded, conspired, connived, or agreed with any bidder or anyone else to put in a sham bid, or that anyone shall refrain from bidding; that the bidder has not in any manner, directly or indirectly, sought by agreement, communication, or conference with anyone to fix the bid price of the bidder or any other bidder, or to fix any overhead, profit, or cost element of the bid price, or of that of any other bidder, or to secure any advantage against the public body awarding the contract of anyone interested in the proposed contract; that all statements contained in the bid are true; and, further, that the bidder has not, directly or indirectly, submitted his or her bid price or any breakdown thereof, or the contents thereof, or divulged information or data relative thereto, or paid, and will not pay, any fee to any corporation, partnership, company association, organization, bid depository, or to any member or agent thereof to effectuate a collusive or sham bid.

I declare, under penalty of perjury, that the foregoing is true and correct and that this declaration was

executed at: \_\_\_\_\_  
(Name of City if within a City, otherwise Name of County)

in the State of \_\_\_\_\_,

on \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

BID BOND

KNOW ALL PERSONS BY THESE PRESENTS:

That we, \_\_\_\_\_,  
as Principal, and \_\_\_\_\_, as Surety, are held and firmly bound unto THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, hereinafter called THE REGENTS, in the sum of ten percent (10%) of the Lump Sum Base Bid amount for payment of which in lawful money of the United States, well and truly to be made, we bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH THAT, WHEREAS, Principal has submitted a Bid for the work described as follows:

San Rafael E-Key System Expansion, Bldg. 586 & 587

FM130155S/986395/150-92

NOW, THEREFORE, if Principal shall not withdraw said Bid within the time period specified after the Bid Deadline, as defined in the Bidding Documents, or within sixty (60) days after the Bid Deadline if no time period be specified, and, if selected as the apparent lowest responsible Bidder, Principal shall, within the time period specified in the Bidding Documents, do the following:

- (1) Enter into a written agreement, in the prescribed form, in accordance with the Bid.
- (2) File two bonds with THE REGENTS, one to guarantee faithful performance and the other to guarantee payment for labor and materials, as required by the Bidding Documents.
- (3) Furnish certificates of insurance and all other items as required by the Bidding Documents.

In the event of the withdrawal of said Bid within the time period specified, or within sixty (60) days if no time period be specified, or the disqualification of said Bid due to failure of Principal to enter into such agreement and furnish such bonds, certificates of insurance, and all other items as required by the Bidding Documents, if Principal shall pay to THE REGENTS an amount equal to the difference, not to exceed the amount hereof, between the amount specified in said Bid and such larger amount for which THE REGENTS procure the required work covered by said Bid, if the latter be in excess of the former, then this obligation shall be null and void, otherwise to remain in full force and effect.

In the event suit is brought upon this bond by THE REGENTS, Surety shall pay reasonable attorneys' fees and costs incurred by THE REGENTS in such suit.

IN WITNESS WHEREOF, we have hereunto set our hands this \_\_\_\_ day of \_\_\_\_\_, 20

Principal

Surety

\_\_\_\_\_  
By: \_\_\_\_\_

\_\_\_\_\_  
By: \_\_\_\_\_

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

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

Address for Notices:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

NOTE: Notary acknowledgement for Surety and Surety's Power of Attorney must be attached.

**QUALIFICATION QUESTIONNAIRE (Rev.-1)**

For

San Rafael E-Key System Expansion

**Project Description**

San Rafael Hall is a residential complex comprised of three separate buildings. The "Tower" (Building 586) is a 7-story, concrete frame building; and the other two buildings, the "Mountain Cluster and the "Ocean Cluster" (both together comprise Building 587) are 3-story, concrete frame buildings. The San Rafael E-Key System Expansion Project will provide access control hardware and software for 105 doors in the complex; 51 doors in the Tower and 27 doors in each of the clusters.

As used herein, the term "entity" means the prospective Bidder submitting this Qualification Questionnaire regardless of whether the entity is an individual company, joint venture, or partnership. Please note that the term "prospective Bidder" may sometimes be used interchangeably with the term "entity."

SUBMITTED BY:

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

\_\_\_\_\_  
(Contact Name)

\_\_\_\_\_  
(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, where applicable. Any prospective Bidder failing to do so will be deemed to be non-responsive and not responsible with respect to this Qualification at the sole discretion of the University of California. All Bidders that have submitted a Qualification Questionnaire will be notified in writing of whether or not they have successfully achieved Qualification status. Prospective Bidders that affirmatively respond (i.e. answer YES) to all questions or provide an acceptable justification for a "NO" response, submit all required information and supporting data, and are determined to have accurately responded to the questions will be prequalified. The acceptability of "NO" responses will be made at the sole discretion of the University. Only those Bidders that have been determined to be prequalified will be eligible to submit a bid for this Project.

All information submitted for qualification evaluation in response to section 8 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

October 9, 2012

Qualification Questionnaire (Rev.-1)

Contractor: PQ

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 Qualification evaluation will be considered official information acquired in confidence, and the University will maintain its confidentiality to the extent permitted by law.

WHERE NECESSARY, COPY THE FORMS IN THIS PACKAGE. USE ONLY THESE FORMS.

October 9, 2012

Qualification Questionnaire (Rev.-1)

Contractor: PQ

1. LICENSE(S) / CERTIFICATION(S)

A. Does the entity hold the following California contractor's license(s), which is(are) current active, and in good standing with the California Contractor's State License Board?

License Classification: Electrical Contractor's License

License Code: C-10

YES  NO

(NOTE -The entity submitting this qualification questionnaire must be the holder of the requisite license. If the entity submitting is a Joint Venture, the joint venture must hold the license or have applied for the license(s).

B. If yes, provide the following information about the entity's contractor's license:

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

\_\_\_\_\_

2. License Classification(s): \_\_\_\_\_

3. License Code(s): \_\_\_\_\_

4. License Number(s): \_\_\_\_\_

5. Date(s) Issued: \_\_\_\_\_

6. Expiration Date(s): \_\_\_\_\_

C. Can you truthfully state that the entity's contractor's license has not been suspended or revoked by the California Contractor's State License Board within the last 5 years?

YES  NO

D. Is at least 1 member of the staff to be assigned to this project on a full-time basis BICSI-RCDD Certified?

YES  NO

2. SURETY

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 for this project 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 entity able to obtain bonding for \$666,500.00?

YES  NO

C. Can the entity truthfully state that no surety has paid out any monies on claims on the performance bond issued by a surety for the benefit of the Owner arising out of the construction activities of the entity within the last 5 years?

YES  NO

- D. Can the entity truthfully state that no surety has 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 entity within the last 5 years?

YES

NO

D. Surety Declaration:

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

The undersigned declares under penalty of perjury that the bonding capacity indicated above is true and correct and that this declaration was executed in

\_\_\_\_\_ (County), \_\_\_\_\_, (State)

on \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name and Title - Printed or Typed)

\_\_\_\_\_  
(Representing [Surety Name])

\_\_\_\_\_  
(Entity Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Facsimile Number)

\_\_\_\_\_  
(E-mail)

*(ATTACH NOTARIZATION of SURETY REPRESENTATIVE'S SIGNATURE)*



**3. INSURER**

Prospective Bidder shall obtain and submit the Insurance Declaration in the form shown below, signed by an authorized representative of its insurer and notarized. (If more than one insurer, submit a completed form for each insurer).

A. Is the entity able to obtain insurance in the following limits for this construction contract?

YES  NO

{Ensure the required insurance listed here is the same as that in the Supplementary Conditions.}

<u>Commercial Form General Liability Insurance* - Limits of Liability</u>	<u>Minimum Requirement</u>
Each Occurrence - Combined Single Limit for Bodily Injury and Property Damage	\$1 million
Products - Completed Operations Aggregate	\$ 2 million
Personal and Advertising Injury	\$ 1 million
General Aggregate	\$ 2 million

<u>Business Automobile Liability Insurance* - Limits of Liability</u>	<u>Minimum Requirement</u>
Each Accident - Combined Single Limit for Bodily Injury and Property Damage	\$ 1 million

<u>Workers Compensation and Employer's Liability Insurance**</u>	<u>Minimum Requirement</u>
Workers Compensation:	(as required by Federal and State of California law)
Employer's Liability:	
Each Employee	\$1,000,000
Each Accident	\$1,000,000
Each Policy	\$1,000,000

\*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 State Fund or 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

Insurance Declaration:

PROVIDE THIS DECLARATION TO YOUR INSURANCE CARRIER FOR COMPLETION. DO NOT HAVE THE CARRIER SUBMIT THIS DECLARATION DIRECTLY TO THE UNIVERSITY.

The undersigned declares under penalty of perjury that below named insurer is currently willing to provide the insurance listed above and that this declaration was executed in

\_\_\_\_\_ (County), \_\_\_\_\_, (State)

on \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Name and Title - Printed or Typed)

\_\_\_\_\_  
(Representing [Insurer Name])

\_\_\_\_\_  
(Entity Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Facsimile Number)

\_\_\_\_\_  
(E-mail)

*(ATTACH NOTARIZATION of INSURER REPRESENTATIVE'S SIGNATURE)*

4. CONSTRUCTION EXPERIENCE (IN COMPARABLE PROJECTS)

Has the entity successfully **completed** at least one (1) comparable project within the last 5 years, that was constructed in the United States of America?

YES  NO

A. Subject to the above qualifications, a "comparable project" is defined as having ALL of the following:

1. A construction cost at the bid date of at least \$100,000.00.
2. Delivery method: Competitive bid, e.g. Lump Sum.
3. Constructed by the entity submitting this Qualification Questionnaire. (Note: Projects completed by present employees of the Bidder for former employers are **not acceptable**.)
4. Has constructed an expansion or the integration into an existing "BoschReady Key Pro", "Best Basis", "Lenel On-Guard Access Control System" or other compatible systems.
5. Completed all work, punch list and submitted all close out documentation as a sub-contractor or a general contractor?
6. Construction included the restoration of building finishes after construction.
7. Construction included the restoration of all fire rated assemblies after construction.
8. Work was performed in fully occupied residential building with Group R-2 type of occupancy.

B. An entity wishing to use a predecessor business to satisfy qualification requirements must demonstrate with written information submitted with this Qualification Questionnaire that it is substantially the same organization (in terms of who is managing Bidder) as the predecessor business. An entity 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 Bidder which shall be the same type as 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.

COMPLETE AND SUBMIT THE FOLLOWING PROJECT DATA SHEET FOR EACH COMPARABLE PROJECT SUBMITTED AS EVIDENCE OF THE ENTITY'S EXPERIENCE. SUBMIT NOT MORE OR LESS THAN THE NUMBER PROJECT DATA SHEETS CORRESPONDING TO THE REQUIRED NUMBER OF COMPARABLE PROJECTS LISTED ABOVE.

PROJECT DATA SHEET

(A separate sheet must be prepared for each project submitted.)

1. Project Name: \_\_\_\_\_

2. Project Location (including full address, if any):  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Project Description: \_\_\_\_\_

4. Construction Type: \_\_\_\_\_

5. Size (gross sq. ft.): \_\_\_\_\_

6. Business name of entity which constructed this project:  
\_\_\_\_\_

7. Did your entity act as a General Contractor during the entire project?

YES  NO

8. Cost at Bid: \$ \_\_\_\_\_

9. Was construction of the project begun and completed within the last 5 years?

YES  NO

10. Project Owner Name: \_\_\_\_\_

11. Project Owner Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Telephone Number) \_\_\_\_\_ (Facsimile Number) \_\_\_\_\_

E-mail Address-optional: \_\_\_\_\_

12. Design Professional (e.g. the name of the Architect or Engineer of record)  
\_\_\_\_\_

Subconsultants (including structural engineer and mechanical engineer, if any):

Structural Engineer

Contact Name: \_\_\_\_\_ (Telephone Number) \_\_\_\_\_

Design Professional \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

Mechanical Engineer

Contact Name: \_\_\_\_\_ (Telephone Number) \_\_\_\_\_

Design Professional: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

13. Delivery method: Did the project use one of the delivery method(s) listed in Question 4(A) (2)?

YES  NO

14. Type of construction information: Did the project require the type(s) of construction listed in Question 4(A) (5-9)?

YES  NO

15. Was the project characterized by the item(s) listed in Question 4(A)(4)

YES  NO

*(Attach additional pages with other pertinent project information as necessary.)*

**5. STAFF EXPERIENCE**

Have the Project Manager/Project Superintendent successfully *completed* at least 1 comparable projects, as defined in Question 5.

**A. PROJECT MANAGER/PROJECT SUPERINTENDANT:**

- 1. The name of the Project Manager to be committed to this project on at least a half time basis and continuously retained throughout this project is:

\_\_\_\_\_ (Attach resume)

- 2. Present position/job function within entity: \_\_\_\_\_

- 3. The Project Manager named above was assigned to the following comparable projects:

<u>Project:</u>	<u>Construction Cost:</u>
a. _____	_____

**6. SAFETY PROGRAM**

- A. Does the entity have a written safety program that meets CAL/OSHA requirements?

YES  NO

- B. Is the entity's Experience Modification Rate (EMR) less than 1.5 average for the past 3 premium years?

YES  NO

Year: _____	EMR: _____	
Year: _____	EMR: _____	<b>Average</b> _____
Year: _____	EMR: _____	

Attach verification of EMR from State of California or from insurance company.

- C. The entity HAS NOT had any Cal-OSHA fines in the Serious, Repeat or Willful categories within the past 3 years?

YES  NO

**7. QUALITY CONTROL/QUALITY ASSURANCE PROGRAM (QC/QA)**

- A. Does the entity have a written quality control/quality assurance program?

YES  NO

**8. BUSINESS CONSTRUCTION REVENUE**

- A. For the purposes of this Qualification Questionnaire, "business construction revenue" shall be defined as payments to entity for construction services.

Can you truthfully state that the entity has had an annual business construction revenue of at least \$5,000,000.00 for each and every one of the last 5 consecutive calendar years?

YES  NO

**9. LIQUIDATED DAMAGES**

A. In the last five years, has the entity been assessed liquidated damages of more than \$5,000.00 on a construction contract with either a public or private owner?

Yes  No

If yes, please provide a detailed explanation of circumstances surrounding the assessments.

**10. DISCIPLINARY MEASURES HISTORY**

A. Can you truthfully state that the entity (nor any member of the entity if a joint venture or partnership) has (under its current name or under any other alias) not 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 10 years?

YES  NO

**11. FALSE CLAIMS HISTORY**

Can you truthfully state that the entity (nor any member of the entity if a joint venture or partnership) has not 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 10 years?

YES  NO

**12. TERMINATION**

Can you truthfully state that the entity (nor any member of the entity if a joint venture or partnership) HAS NOT been terminated for cause by an Owner after construction commenced within the last 5 years?

YES  NO

**QUALIFICATION DECLARATION**

I, \_\_\_\_\_ (Printed Name),  
hereby declare that I am the \_\_\_\_\_ (Title)  
of \_\_\_\_\_ (Name of Entity)  
submitting this Qualification Questionnaire; that I am duly authorized to sign this  
Qualification Questionnaire on behalf of the above named entity; and that all information  
set forth in this Qualification Questionnaire and all attachments hereto are, to the best of  
my knowledge, true, accurate and complete as of its submission date.

The undersigned declares under penalty of perjury that all of the qualification information  
submitted with this form is true and correct and that this declaration was executed in  
\_\_\_\_\_ (County), \_\_\_\_\_ (State) on \_\_\_\_\_ (Date).

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_ (Telephone Number)      \_\_\_\_\_ (Facsimile Number)

\_\_\_\_\_  
(E-mail - optional)