

PREQUALIFICATION QUESTIONNAIRE

FOR

**HSSB EXTERIOR PAINTING, EIFS REPAIR AND CAULKING, BLDG. 515
PROJECT NO. FM120501SR/980835**

**UNIVERSITY OF CALIFORNIA, SANTA BARBARA
CAMPUS DESIGN & FACILITIES
FACILITIES MANAGEMENT, BUILDING 439
SANTA BARBARA, CALIFORNIA 93106-1030**

JUNE 2012



HSSB EXTERIOR PAINTING, EIFS REPAIR AND CAULKING, BLDG. 515

PREQUALIFICATION QUESTIONNAIRE

As used herein, the term “entity” means the prospective Subcontractor submitting this Prequalification Questionnaire. Please note that the term “prospective subcontractor” may sometimes be used interchangeably with the term “entity.”

If there is any change to the information provided in this questionnaire after it has been submitted by the entity completing the form, it is the sole responsibility of that entity to submit a written document advising the UCSB Associate Director of Contracting Services of the change within ten (10) working days of the occurrence of the change.

Each prospective Subcontractor must have a current and active California contractor’s license at the time of the qualification and must submit this Prequalification Questionnaire with all portions completed, including any required attachments.

(Entity Name. If a Joint Venture state name of JV entity) printed or typed

(Name of Company Owner/Officer)

(Address)

(City, State, Zip Code)

(Telephone Number)

(Facsimile Number)

(E-mail Address)



Each prospective Subcontractor must answer all of the following questions and provide all requested information, where applicable. Any prospective subcontractor failing to do so will be deemed to be not responsive and not responsible with respect to this Prequalification at the sole discretion of the University of California. All subcontractors that have submitted a Prequalification Questionnaire will be notified in writing of whether or not they have successfully achieved Prequalification status.

If there is a question that does not apply, enter "Not Applicable" or "N/A." If additional space is required to complete an answer, use additional pages and securely attach them to the questionnaire. If information is provided on added sheets, they must include all of the requested information, be properly referenced, and securely attached to the questionnaire.

The Exhibits must be fully completed, but answering "NO" to a question contained solely in an Exhibit shall not necessarily result in failure to achieve Prequalification status. Only those Subcontractors that have been determined to be prequalified and to have been determined to be responsible firms will be eligible to submit a bid to the Bidder or, with the appropriate licensing, bid directly as a General Contractor for this project.

If the prospective subcontractor is determined by the University not to be prequalified, the prospective Subcontractor may request a review by the Facility. Any such request must be received by the Facility within 3 calendar days after receipt by the entity of the determination. The decision resulting from such review is final and is not appealable within the University of California. Any person or entity not satisfied with the outcome of the prequalification must file a writ challenging the outcome within 10 calendar days from the date of the University's written notice regarding prequalification determination. Any assertion that the outcome of the prequalification process was improper will not be a ground for a bid protest.

All other information submitted for Prequalification 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 THE FORMS PROVIDED HEREIN.



1. **LICENSE**

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

C-35

(License Code)

Lathing and Plastering

(License Classification)

YES NO

NOTE: The entity submitting this prequalification questionnaire must be the holder of the requisite license.

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 five years?

YES NO



2. CONSTRUCTION EXPERIENCE (IN COMPARABLE PROJECTS)

Has the entity successfully **completed** at least three comparable projects within the last five years?

YES NO

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

1. A subcontractors’ cost at the bid date of at least \$200,000 for EIFS repair and/or EIFS installation; AND
2. The scope of work consisted, in substantial part, of EIFS installation and/or EIFS Repair work performed by the entity submitting this Prequalification Questionnaire. (Note: Projects completed by present employees of the subcontractor for former employers are **not acceptable**.)

B. Provide Project Data Sheets – Exhibit A located at the end of this Prequalification Questionnaire for each comparable project submitted as evidence of the entity’s experience. Use the Project Data Sheets provided. Make additional copies as required for each project submitted. Submit not more or less than the number Project Data Sheets corresponding to the required number of comparable projects listed above.

3. DISCIPLINARY MEASURES HISTORY

A. Can you truthfully state that the entity 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 five years?

YES NO

4. FALSE CLAIMS HISTORY

A. Can you truthfully state that the entity 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 five years?

YES NO



5. **TERMINATION**

A. Can you truthfully state that the entity HAS NOT been terminated for cause by an Owner after construction commenced within the last five years?

YES NO

6. **PREQUALIFICATION DECLARATION**

I, _____ (Printed Name)
hereby declare that I am the _____ (Title)
of _____ (Name of Entity)

submitting this Prequalification Questionnaire; that I am duly authorized to sign this Prequalification Questionnaire on behalf of the above named entity; and that all information set forth in this Prequalification 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 prequalification information submitted with this form is true and correct and that this declaration was executed in:

_____ (County), California, on _____ (Date).

(Signature)

(Printed Name)

(Address)

(City, State, Zip Code)

(Telephone Number)

(Facsimile Number)

(E-mail Address)



EXHIBIT – A

PROJECT DATA SHEET

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

Complete and submit the following Project Data Sheet for each comparable project submitted as evidence of the entity's experience. Do not use any other form other than this Exhibit.

- 1. Project Name: _____
- 2. Project Location (including full address, if any):

City: _____ State: _____ Zip _____
- 3. Project Description: _____
- 4. Construction or Project Type: _____
- 5. Size (gross square feet): _____
- 6. Business name of entity which constructed this project:

- 7a. Total project cost at the time of bid: \$ _____
- 7b. Subcontractor cost at bid for EIFS repair and/or EIFS Installation: \$ _____
- 8. Was construction of the project completed within the last five years?
 YES NO
- 9. Project Owner Name: _____
- 10. Project Owner Address: _____
City: _____ State & Zip code: _____
Telephone: _____ Fax: _____
E-mail Address: _____
- 11. Design Professional (e.g. the name of the Architect or Engineer of Record)

Contact Name: _____
Telephone: _____ Fax: _____
A&E E-mail Address: _____

(Attach additional pages with other pertinent information as necessary)