

RECREATION CENTER BUILDING 516 LOCKER ROOM RENEWAL PROJECT NO. FM080446S/264-74 <u>REVISED PREQUALIFICATION QUESTIONNAIRE</u> (REVISED PER ADDENDUM TWO)

UNIVERSITY OF CALIFORNIA, SANTA BARBARA OFFICE OF DESIGN & CONSTRUCTION SERVICES and PHYSICAL FACILITIES FACILITIES MANAGEMENT, BUILDING 439 SANTA BARBARA, CALIFORNIA 93106-1030

SEPTEMBER 2008

Rev 3: 12-10-04



RECREATION CENTER BUILDING 516 LOCKER ROOM RENEWAL

PROJECT NO. FM080446S/264-74

REVISED PREQUALIFICATION QUESTIONNAIRE

Each prospective bidder must have a current and active California contractor's license at the time of the bid opening and must submit this Prequalification Questionnaire with all portions completed, including any required attachments. Submission of an incomplete and/or unclear Prequalification Questionnaire may result in the determination of the prospective Contractor as Non-Prequalified.

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
BMITTED BY:	(Date)
	(Name and Title) printed or typed
	(Signature)
	(Firm Name)
	(Address)
	(City, State, Zip Code)
(Telephone Number)	(Facsimile Number)
	(E-mail Address)

Each prospective bidder must answer all of the following questions and provide all requested information, when applicable. Any prospective bidder failing to do so may be deemed to be not responsive and not responsible with respect to this prequalification at the sole discretion of the University of California. All information submitted for prequalification evaluation will be considered official information acquired in confidence, and the University of California will maintain its confidentiality to the extent permitted by law. Any prospective bidder found to be not prequalified as a result of the bidder's answers to this Prequalification Questionnaire will receive written response from the University Facility explaining the Facility's decision. If the bidder can refute some of the facts upon which the decision was based, the bidder can request a hearing at the Facility to appeal the decision. The decision of the Facility is final and not appealable within the University of California.

NOTE: Where a time period is given, such as the last five (5 years, the period is to be measured backwards) from the date this prequalification questionnaire is required to be submitted.

Page 2 of 10



1. <u>LICENSE</u>:

a. Does your firm, including any partner if a joint venture, hold the following California contractor's license, which is current and in good standing with the California Contractor's State License Board?

В	
(License	Code)

General Building

(License Classification)

🗌 YES 🗌 NO

If YES, provide the following information about your firm's contractor's license.

- 1. Name of license holder <u>exactly</u> as on file with the California Contractor's State License Board.
- 2. License classification:
- 3. License code:
- 4. License number:
- 5. Date issued:
- 6. Expiration date:
- b. Has your firm's contractor's license ever been suspended or revoked by the California Contractor's State License Board?

☐ YES

c. Has a complaint ever been filed with the California Contractor's State License Board against your company that required a formal hearing or inquiry?

🗌 YES 🗌 NO

If YES what was the nature and resolution of that claim:

2. <u>CONSTRUCTION EXPERIENCE</u>:

Has your firm completed 2 or more comparable projects greater than \$300,000 in the last 3 years?

A comparable project is defined as the following building types:

- Locker Room
- Toilet Room in a Public Facility
- Recreation Building

YES	🗌 NO
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If YES, provide information for 2 projects.

Submit <u>Project Data Sheets – Exhibits A – B</u> located at the end of this Prequalification Questionnaire for the following:

- Exhibit A: For each project submitted as evidence of your firm's comparable projects as addressed in No. 2 Construction Experience.
- Exhibit B: For all Current Projects for the Regents of the University of California. If none, indicate none (do not leave blank).

Use the Project Data Sheets provided. Make additional copies as required for each project submitted. If you have not done work for the Regents of the University of California, indicate none on the Project Data Sheet (do not leave blank or submit an incomplete package).



3. STAFF EXPERIENCE:

- a. Provide the following information on the Project Manager (to oversee, manage and coordinate the overall project as a whole) who will be in charge of this project:
 - 1. Name: _____
 - 2. Years employed by your firm: _____
 - 3. Present position/job function within your firm:
 - 4. Years in present position/job function: _____year(s)
- b. Provide the following information on the Project Superintendent (in addition to the normal superintendent's daily workload, subcontractor interaction and production, and various field related coordination issues will manage, coordinate and facilitate the field supervision staff for each of the various components of the project construction process) in charge of this project:
 - 1. Name: _____
 - 2. Years employed by your firm:
 - 3. Present position/job function within your firm:
 - 4. Years in present position/job function: _____year(s)

4. CONTRACTOR'S COMMENTS:

The following page is provided for further explanations of the answers to any questions asked in this Prequalification Questionnaire.

Every effort will be made to ensure that all persons, regardless of race, religion, sex, color, ethnicity and national origin have equal access to contracts and other business opportunities with the University.



CONTRACTOR'S COMMENTS



EXHIBIT – A

PROJECT DATA SHEET

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

1. Project Name:_____ 2. Project Location: 3. Project Description: 4. Construction Type: 5. Size (gross square feet): 6. How is this project comparable to the Recreation Center Building 516 Locker Room Renewal project? 7. Did the project include mechanical renovation and/or locker installation? Describe the comparable features: 8. Was the project for a university or public institution? ☐ YES 9. Was the project completed within budget? Initial Contract amount:\$ Final Contract Amount:\$ Explanation: 10. Date construction contract was completed: 11. Contract time: days Was the project completed within the original contract time or adjusted contract time? ☐ YES If NO and completion did not occur within the original or the adjusted contract time, indicate elapsed time in whole calendar days between original or adjusted contract time and actual final completion. For projects that have not reached final completion, indicate current status with respect to contract time: 12. Did your firm self-perform any of the work? ☐ YES

Page 7 of 10



	If YES, please specify the trades you self-performed or have the capability to self perform:				
13.	13. Client's Project Team and References:				
a.	Client Firm Name:				
b.	Client Contact:	Title:			
c.	Client Address:				
d.	Client City:	_State & Zip Code:			
e.	Client Telephone:	Fax:			
f.	Client E-mail Address:				
g.	Client's Project Manager:				
h.	Client's Project Superintendent:				
i.	Design Professional (A&E) Firm Name:				

j. A&E Contact Name:_____

k. A&E Telephone:_____Fax:____

I. A&E E-mail Address:

(Attach additional pages with other pertinent information as necessary)

Rev 3: 12-10-04



EXHIBIT B

CURRENT PROJECTS FOR THE REGENTS OF THE UNIVERSITY OF CALIFORNIA

Submit the following <u>Current Projects for The Regents of the University of California Project</u> <u>Data Sheet</u> for each current project (regardless of project delivery stage) between your firm and The Regents of the University of California. If none, indicate none (do not leave blank).

PROJECT DATA SHEET

(A separate sheet must be prepared for each project submitted)		
1. Project Name:		
2. Project Location (Campus):		
3. Project Description:		
4. Construction Type:		
5. Size (gross square feet):		
 6. Is this project comparable to the Recreation Center Building 516 Locker Room Renewal project? YES NO 		
If YES, explain:		
7. Current Project status:		
8. Anticipated Completion Date:		
9. Description of Firm's Performance on Project thus far:		
a. With respect to time:		
b. With respect to budget:		
10. Business name of entity that is performing this project:		
 11. If the entity submitting this prequalification questionnaire is a Joint Venture, is the Joint Venture entity itself performing this project? YES NO Not Applicable 		
12. UC Client Information		
a. UC Client Contact:Title:		
b. Client Telephone:Fax:		
c. Client E-mail Address:		
d. Design Professional (A&E) Firm Name:		
e. A&E Contact Name:		
Rev 3: 12-10-04 Page 9 of 10 Recreation Center Building 516 Locker Room Renewa		

FM080446S/264/74



f. A&E Telephone:	Fax:
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g. A&E E-mail Address:_____

(Attach additional pages with other pertinent information as necessary)

Rev 3: 12-10-04