**ATTACHMENT D**

**ID/IQ CONSTRUCTION SERVICES**

**QUALIFICATIONS QUESTIONNAIRE**

All Contractors submitting a Statement of Qualifications must complete in full and include the following Qualifications Questionnaire.

All Contractors completing this Qualification Questionnaire will need to provide, without limitation, information about the Contractor’s current and past experience, licenses, insurance, bonding capacity, and any accompanying supplemental information as required. It is essential that the Contractor’s background and construction experience be sufficiently and accurately demonstrated. The Judicial Council will use the provided information to evaluate Contractors in accordance with the RFQ.

The Judicial Council reserves the right to check other sources available. The Judicial Council reserves the right to adjust a Contractor’s evaluation based on subsequently learned information. While it is the intent of this Qualification Questionnaire to assist the Judicial Council in awarding Master Agreements under the RFQ, the Judicial Council’s review of a Contractor’s Qualification Questionnaires will not preclude the Judicial Council from considering and/or determining whether the Contractor has, to the Judicial Council’s satisfaction, the overall quality, fitness, capacity, and experience to satisfactorily perform the required Work with the requisite trustworthiness to be awarded a Master Agreement. The Judicial Council will make all final determinations and reserves the right to waive minor irregularities or omissions in submitted Qualification Questionnaires.

All portions of Parts I through V of this Qualification Questionnaire must be completed. Any requested or additional information must be attached where indicated and/or if more space is required to do so. Failure to include any requested information may result in the Contractor’s disqualification from the solicitation.

As indicated herein, Contractors must sign the Qualifications Questionnaire under penalty of perjury by an individual who has the legal authority to bind the Contractor. If any information provided by a Contractor becomes inaccurate, the Contractor must immediately notify the Judicial Council and provide updated, accurate information in writing, under penalty of perjury.

| **PART I. GENERAL CONTRACTOR INFORMATION and AFFIDAVIT** | | | | | |
| --- | --- | --- | --- | --- | --- |
| Contractor name:  (as it appears on license) |  | | | | |
| Contact Person: |  | | | | |
| Address: |  | | | | |
| Telephone: |  | | | | |
| Fax: |  | | | | |
| E-mail: |  | | | | |
| Indicate the form of Contractor business entity: | | | | Individual | |
|  | | | | Sole Proprietorship | |
|  | | | | Partnership | |
|  | | | | Limited Partnership | |
|  | | | | Corporation | |
|  | | | | Limited Liability Company | |
|  | | | | Joint Venture | |
|  | | | | Other: | |
| If Contractor is a sole proprietor or partnership, Owner(s) of Company: | |  | | | |
| Years in business under current company name: | | |  | | |
| Contractor’s License Number(s): | | |  | | |
| Department of Industrial Relations (“DIR”) registration number: | | | | |  |

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| **AFFIDAVIT** | |
| I, the undersigned, certify and declare that I have read all the foregoing questions and answers to this Qualifications Questionnaire and know their contents. The matters stated in the provided answers and information are true to the best of my knowledge and understanding, except as to those matters stated only on information and belief which as to those matters I believe them to be true. I declare under penalty of perjury under the laws of the State of California that the foregoing is correct. | |
| Date: |  |
| Signature: |  |
| Printed Name: |  |
| Title: |  |

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| **Contractor will be subject to disqualification**  **if it fails to meet essential qualifications.** |

| **PART II. ESSENTIAL REQUIREMENTS FOR QUALIFICATION** | | | | |
| --- | --- | --- | --- | --- |
| 1. | Did a representative of the firm noted in the Contractor Information section above attend the mandatory Pre-Proposal Conference as required in the RFQ section 4.3? | | | Yes  No = cannot qualify |
| 2. | Contractor possesses a valid and current California Contractor’s “Class B General Building Contractor” license for the project or projects for which it intends to submit a bid. | | | Yes  No = cannot qualify |
| 3. | Contractor maintains commercial general liability insurance with a policy limit of at not less than: | | | Yes  No = Cannot Qualify |
| Each Occurrence Limit | | $2,000,000 |
| Personal and Advertising Liability Limit | | $2,000,000 |
| General Aggregate Limit | | $4,000,000 |
| Per Project Products - Completed Operations Aggregate | | $2,000,000 |
| The products completed operations liability insurance shall extend for three years after final completion of the work. | | | Yes  No = Cannot Qualify |
| 4. | Contractor has current workers’ compensation insurance policy as required by the Labor Code or is legally self-insured pursuant to Labor Code section 3700 et. seq. | | | Yes  No = Cannot Qualify |
| 5. | Contractor maintains business automobile liability insurance with a policy limit of at least $1,000,000.00 per accident. | | | Yes  No = Cannot Qualify |
| 6. | Contractor can provide builders risk or installation insurance. | | | Yes  No = Cannot Qualify |
| 7. | Has your contractor’s license been revoked at any time in the last five years? | | | Yes = Cannot Qualify  No |
| 8. | Has Contractor been terminated from a project (or otherwise failed to complete a project) which then required a surety to either complete the project on your behalf or pay for completion of the project within the last five (5) years? | | | Yes = Cannot Qualify  No |
| 9. | At the time of submitting this qualification form, is Contractor ineligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code section 1777.1 or Labor Code section 1777.7? If the answer is “Yes,” state the beginning and ending dates of the period of debarment: | | | Yes = Cannot Qualify  No |
| Beginning date: |  | |
| Ending date: |  | |
| 10.. | At any time during the last five years, has Contractor or any of its owners or officers been convicted of a crime involving a government contract or a government construction project, including but not limited to, fraud, false claims, kickback schemes. wage theft, etc. | | | Yes = Cannot Qualify  No |
| [Product image](http://images.google.com/aclk?sa=l&ai=CqqL_zkzKSpe8Ko22tQP11vDjDpmfp33L0OiCCYbIupEBCAAQAiCTrPsFKANQlbnowPz_____AWDJvvOGyKOgGaAB5Yqz7QPIAQGqBBlP0OX6P9_S7sP34Pb9Ov4WmnXqpIRjWmAI&sig=AGiWqtxBgF78CUxMlB0OOsm1PIcvyhT0cA&q=http://www.stopsignxpress.com/stop_signs.asp?engine%3Dadwords%26keyword%3DStop%2BSign)**If Contractor answered:**   * + - **“NO” to questions 1-6, or**     - **“YES” to questions 7-10,**   **then STOP because Contractor is not eligible to perform the Services at this time. Otherwise, continue to the Scored Questions section.** | | | | |

| **PART III. ORGANIZATION, HISTORY, ORGANIZATIONAL PERFORMANCE, COMPLIANCE WITH CIVIL AND CRIMINAL LAWS** | | | | | | | | | | |
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| **Organization and Structure of Business** | | | | | | | | | | |
| 1. | State the following: | | | | | | | | | |
| a. | Contractor name: (as it appears on license) |  | | | | | | | | |
| b. | Type of business entity: | | | Individual | | | | | | |
| Sole Proprietorship | | | | | | |
| Partnership | | | | | | |
| Limited Partnership | | | | | | |
| Corporation, State: | | |  | | | |
| Limited Liability Company | | | | | | |
| Joint Venture | | | | | | |
| Other: | |  | | | | |
| c. | Date of formation or incorporation: | | |  | | | | | | |
| d. | List the following for each corporation officer, general partner, limited partner, owner, etc. (as applicable) with more than 10% ownership interest for the Contractor’s type of entity. For joint ventures, include this information for each entity in the joint venture and the percent ownership of each joint venture. Attach all additional information on separate signed sheets as needed. | | | | | | | | | |
| **Name** | | **Position** | | | | | | **Years with Co.** | **% Ownership** |
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| e. | Identify every firm that the Contractor or any person listed above has been associated with (as officer, general partner, limited partner, owner, RMO, RME etc.) at any time during the **past five (5) years** (“Associated Contractor”). Include all additional references and/or information on separate signed sheets. NOTE: For this question, “owner” and “partner” refers to ownership of ten percent (10%) or more of the business, or ten percent (10%) or more of its stock if the business is a corporation. Include all additional information on separate signed sheets as needed. | | | | | | | | | |
| **Name of Person at Associated Contractor** | | **Name of Associated Contractor** | | | | | | **Contractor’s License No. of Associated Contractor** | **Dates of Person’s Participation with Associated Contractor** |
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| f. | List any related business names, such as dba(s), or subsidiaries, etc.: | | |  | | | | | | |
| 2. | How many years has your organization been in business in California as a Contractor under your present business name and license number? | | | | | | |  | | |
| 3. | Gross revenue of the Contractor for the past three (3) years: | | | | 20\_\_ | | |  | | |
| 20\_\_ | | |  | | |
| 20\_\_ | | |  | | |
| 4. | Has Contractor been in bankruptcy at any time during the last five (5) years? | | | | | | | | | Yes  No |

| **Licenses** | | | | |
| --- | --- | --- | --- | --- |
| 5. | List all California construction license numbers, classifications and expiration dates of the California contractor licenses held by Contractor. Include all additional information on separate signed sheets as needed. | | | |
| **Contractor License #** | **License Classifications** | **License Expiration Date** | |
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| 6. | If any of Contractor’s license(s) are held in the name of a corporation or partnership, list below the names and titles of the qualifying individual(s) listed on the Contractors State Licensing Board (CSLB) records who meet(s) the experience and examination requirements for each license. Include all additional information on separate signed sheets as needed. | | | |
| **Contractor License #** | **Qualifying Individual Name** | **Individual’s Title** | |
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| 7. | Has any Contractor State License Board (CSLB) license held by Contractor, its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years?  \* If “yes,” please explain on a separate signed sheet. | | | Yes\*  No |

| **Disputes** | | |
| --- | --- | --- |
| 8. | At any time in the last five years has Contractor been assessed and paid liquidated damages after completion of a project under a construction contract with either a public or private owner?  \* If yes, explain on a separate signed page, identifying all such projects by owner, owner’s address, and the date of completion of the project, amount of liquidated damages assessed and all other information necessary to fully explain the assessment of liquidated damages. | Yes\*  No |
| 9. | In the last five years has Contractor, or any company with which any of Contractor’s owners, officers or partners was associated, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?  **NOTE:** “Associated with” refers to another construction firm in which an owner, partner or officer of your firm held a similar position, and which is listed in response to question 1c or 1d on this form.  \* If “yes,” explain on a separate signed page. State whether the firm involved was the firm applying for pre-qualification here or another firm. Identify by name of the company, the name of the person within your firm who was associated with that company, the year of the event, the owner of the project, the project and the basis for the action. | Yes\*  No |
| 10. | At any time during the past five years, has any surety company made any payments on Contractor’s behalf as a result of a default, to satisfy any claims made against a performance or payment bond issued on your firm’s behalf, in connection with a construction project, either public or private?  \* If “yes,” explain on a separate signed page the amount of each such claim, the name and telephone number of the claimant, the date of the claim, the grounds for the claim, the present status of the claim, the date of resolution of such claim if resolved, the method by which such was resolved if resolved, the nature of the resolution and the amount, if any, at which the claim was resolved. | Yes\*  No |
| 11. | Has Contractor or any of its owners, officers or partners ever been found liable in a civil suit, administrative proceeding, or any other forum, for making any false claim, material misrepresentation, or any other fraudulent activity to any public agency or entity?  \* If “yes,” explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding. | Yes\*  No |
| 12. | In the last five years has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?  \* If “yes,” explain on a separate signed page. Identify the year of the event, the owner, the project and the basis for the finding by the public agency. | Yes\*  No |

| **Compliance with Occupational Safety and Health Laws and with Other Labor Legislation Safety** | | |
| --- | --- | --- |
| 13. | Has a state or federal Occupational Safety and Health Administration (OSHA) cited and assessed penalties against Contractor for any “serious,” “willful” or “repeat” violations of its safety or health regulations in the past five years?  **NOTE:** If you have filed an appeal of a citation, and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.  \* If “yes,” attach a separate signed page describing the citations, including information about the dates of the citations, the nature of the violation, the project on which the citation(s) was or were issued, the amount of penalty paid, if any. If the citation was appealed to the Occupational Safety and Health Appeals Board and a decision has been issued, state the case number and the date of the decision. | Yes\*  No |
| 14. | Has a state or federal Environmental Protection Agency (EPA) or any local/regional Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against either Contractor or the owner of a project on which your company was the Contractor, in the past five years?  **NOTE:** If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.  \* If “yes,” attach a separate signed page describing each citation. | Yes\*  No |

| **Labor Law, Prevailing Wage and Apprenticeship Compliance Record** | | |
| --- | --- | --- |
| 15. | Has there been more than one occasion during the last five years in which Contractor was required to pay either back wages or penalties for your failure to comply with state or federal labor laws, including but not limited to, overtime wages, prevailing wage laws, or apprenticeship requirements?  \* If ”yes,” attach a separate signed page or pages, describing the nature of each violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid and the amount of back wages and penalties that you were required to pay. | Yes\*  No |

| **PART IV. ORGANIZATION’S STATEMENT OF EXPERIENCE**  **RECENT CONSTRUCTION PROJECTS COMPLETED** | |
| --- | --- |
| Contractor name: (as it appears on license) |  |
| Provide information on projects completed or currently in progress that demonstrate your organization’s experience with projects of similar scope, size and complexity. Provide specific project related experience, relevance of scope, size and complexity. Please label responses consistent to the categories listed below and include project name, location, construction value, and owner contact information. | |
| 1. **Relevant Projects**   Submit at least six (6) examples (see sample format below) of your organization’s relevant projects with construction costs ranging between $25,000 and up to $15,000,000 that have been completed within the last five (5) years. Relevant projects shall include as many of the following components and construction types, as applicable; including at least one (1) construction project for a public entity in the State of California (e.g., State of California, cities, counties, school districts, and special districts, etc.):   * Facilities with a minimum of 5,000 gross square footage area and construction costs up to $15,000,000.00 * Court facilities * Secure facilities * Projects with complex interrelated building systems such as security monitoring and alarm, building and energy management, telecommunications, data distribution and other related sub-systems * Projects requiring completion of the project in phases, possibly allowing owner occupancy of portion of completed phase(s) prior to final completion of whole project * Projects requiring work in adjacent existing site/facility that remains occupied and operational, while new work including utilities, site features, security, building and energy management, and telephone/data systems are constructed and connected to the existing facility   Clearly identify the relevance of each project and be specific as to the nature of any self-performed work and the role of your organization in the management of the overall project. List each project by name, location, year of completion, and owner’s name, owner’s project manager’s name and current contact information including phone number. Include a description of the construction type, project schedule, and the construction value of the work performed. Photos and other graphic materials would be helpful to delineate each project. For purposes of meeting the requirement of one (1) construction project for a public entity in the State of California, work as either the general contractor or a first tier subcontractor will suffice. A sample format is included.  **Relevant Project submittals should be no more than six (6) pages total.** | |
| 1. **Client References**   Contractors shall provide five (5) client references that must be from recently completed projects. Please include the following with each client reference: name of entity/firm, contact person, their phone number/email, project title, location, and start/end dates.  **Client Reference submittals should be no more than one (1) page total.** | |
| 1. **Project Management Expertise**   Indicate how your organization has managed, directed or participated in projects of similar scope. Indicate your organization’s management structure, lines of authority and hierarchy. Provide information on how schedules, costs, and quality are maintained throughout a project. Indicate how communications between the various stakeholders (owner, project design consultants, tenants and inspectors) and the General Contractor are managed to ensure all project requirements are addressed and met. This should include both on-site personnel and home office staff. | |
| 1. **Quality Control**   Describe your organization’s philosophy for producing quality buildings and your approach to quality control. Provide information on how you handle minimizing warranty callbacks and typical response time for warranty callbacks. (Typical response time is from initial request by Owner to final resolution of issue to Owner’s established requirements.) Describe how coordination has been achieved and communicated to subcontractors and other tradespersons on projects of similar size, scope and complexity. | |
| 1. **Key Personnel**   Provide proposed key personnel’s qualifications, experience, length of employment with company, and training to competently manage this project. Key personnel shall include principal(s), or officer(s) having overall project responsibility, as well as on-site project manager(s), superintendent(s), project controls engineer(s), schedule manager(s), and all others involved in the management of the project. Provide an overview of how your organization intends to structure on-site management operations and interface with the home office, owner, specialty subcontractors and Judicial Council representatives during the construction of the project. | |
| 1. **Safety Program**   Describe in general terms your organization’s safety program. In addition, an Experience Modification Rate (“EMR”) is established by the Contractor’s worker’s compensation insurance carrier and is based upon the Contractor’s loss history. Contractors are required to provide their EMR in their response, which will be used in the evaluation of Contractors. The Judicial Council is committed to the safety of the work being done, all employees, the existing staff on-site, the surrounding community, visitors and the environment. While the Judicial Council has the responsibility for conducting our business in a manner that strives to prevent accidents, the Contractor will have primary responsibility for the safety at the project site. Contractor will be required to provide Judicial Council with a detailed safety program prior to commencement of work on any Project. | |

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| ***SAMPLE FORMAT:***  **PROJECT DESCRIPTION AND INFORMATION EXAMPLES** |
| Names/references must be current and verifiable. Use separate sheets that contain all of the following information: |
| **FOR EACH PROJECT:** |
| Project name/identification |
| Project location |
| Project Owner |
| Project Owner contact person and telephone |
| Architect or Engineer |
| Architect or Engineer contact person and telephone |
| Construction Manager |
| Construction Manager contact person and telephone |
| Description of Project, Scope of work Performed |
| Total Value of Construction (including Change Orders) |
| Original Scheduled Completion Date |
| Time Extensions Granted (number of days) |
| Actual Date of Completion |
| **NOTE:** Include information to address all the previously listed categories (e.g., project management, quality control, key personnel, safety program, etc.). |

| **PART V. REQUIRED ATTACHMENTS** | |
| --- | --- |
| Contractor name: (as it appears on license) |  |
| The following documents are to be provided to the Judicial Council by the Contractor:  **Attachment 1** – Current Copy of Contractor’s California Contractor’s License(s)  **Attachment 2** – Proof of Contractor’s Liability Insurance (i.e., Certificate of Insurance )  **Attachment 3** - Notarized Statement from Worker’s Compensation Insurance Carrier  **Attachment 4** – Evidence of Contractor’s Bonding Capacity | |

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| **Attachment 1**  **Current Copy of Organization’s California Contractor’s License(s)** |
| Exchange this page for a current copy of your organization’s California Contractor’s License(s). |

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| **Attachment 2**  **Evidence of Contractor’s Liability Insurance** |
| Exchange this page for documentation of Contractor’s current liability insurance, including commercial liability coverage, automobile coverage, excess liability coverage, etc. (i.e. Certification of Insurance). |

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| **Attachment 3**  **Notarized Statement from Worker’s Compensation Insurance Carrier** |
| Exchange this page for a Notarized Statement from your Workers Compensation Carrier providing evidence of Contractor Workers Compensation Coverage. |

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| **Attachment 4**  **Evidence of Contractor’s Bonding Capacity** |
| Exchange this page for documentation which demonstrates Contractor’s current bonding capacity. |