

CITY OF TUALATIN



CONTRACTOR'S PREQUALIFICATION APPLICATION

CITY OF TUALATIN
18880 S.W. MARTINAZZI AVENUE
TUALATIN, OREGON 97062-7092
Phone 503.691.3031 Fax 503.692.0147

Application of: _____
(PRINT Contractor's Registered Company Name)

- Individual Sole Proprietorship
General Partnership
Corporation
Joint Venture (JV)
Member of Joint Venture
Limited Liability Company (LLC)
Limited Liability Partnership (LLP)
Limited Partnership (LP)
Assumed Business Name (ABN)
Address to which all correspondence should be mailed:
Physical Address:
Mailing Address:
City:
State: Zip code:
Phone (incl. area code):
Fax (incl. area code):
Email:

Date Application Prepared: _____

- This is a prequalification application and good for 3 years upon approval by the City of Tualatin.

PLEASE ANSWER EACH SECTION AND QUESTION IN THE APPLICATION. FAILING TO DO SO, THE APPLICATION WILL BE RETURNED FOR COMPLETION.

1

PLEASE FILL IN THE CLASSES OF WORK YOU WISH TO WORK ON. CLASSES OF WORK INCLUDE, BUT ARE NOT LIMITED TO, WORK LISTED IN PARENTHESIS.

For Each Class of Work

- A Enter the maximum dollar amount of work you are capable of performing.
- B Enter the maximum dollar amount of work you are qualified to undertake in other states.
- C Enter the number of years of experience in this class of work.

***** If more space is required, attach additional sheets *****

(HIGHWAYS, ROADS, AND STREETS)

CLASS	A. MAX. DOLLAR AMT.	B. QUALIFIED DOLLAR AMT.	C. YEARS EXPERIENCE
Aggregate Bases			
Asphalt Concrete Paving & Oiling			
Bridges, Retaining Walls			
Earthwork & Drainage (clearing, earthwork, blasting, riprap, culverts, manholes, inlets)			
Illumination			
Landscaping (roadside seeding, lawns, shrubs, trees, irrigation systems, topsoil, temporary & permanent erosion control)			
Guardrail, barrier, curbs, walks, fences, protective screening, impact attenuators, cold plane pavement removal			
Pavement markings (permanent – painted, durable, markers, delineators)			
Portland Cement Concrete paving			
Rock production (aggregate crushing, sanding rock)			
Signing (permanent)			
Temporary traffic control (all temporary traffic control items including flaggers)			
Traffic signals			

1 continued

For Each Class of Work

- A Enter the maximum dollar amount of work you are capable of performing.
- B Enter the maximum dollar amount of work you are qualified to undertake in other states.
- C Enter the number of years of experience in this class of work.

(OTHER PUBLIC IMPROVEMENTS)

CLASS	A. MAX. DOLLAR AMT.	B. QUALIFIED DOLLAR AMT.	C. YEARS EXPERIENCE
Demolition & related excavation & clearing			
Drainage			
Electrical Wiring			
Painting			
Plumbing			
Sewer construction			
Sewage pumping station			
Water lines			
Water reservoirs			
Water tanks – steel, concrete			
Well drilling			

2

Indicate the total amount of work, expressed in dollars, which the applicant can be bonded for at one time:

\$ _____

3

BID AND PERFORMANCE SURETY BONDS:

If the contract(s) for which this prequalification is sought require bid and performance bond(s), the applicant shall state the name of the agent and name, address, and telephone number of the surety company applicant expects to provide the bonds.

4

If an Oregon corporation, answer this:

When Incorporated: _____

President: _____

1st Vice President: _____

Secretary: _____

Treasurer: _____

What officers are authorized to execute contracts:

5

If a General partnership, answer this:

Date of Organization: _____

If a foreign (out of State) co-partnership or persons engaging in business in the State under an assumed name, but not domiciled within this State, State whether or not such partnership or business organization has been registered as may be required in compliance with Chapter 648, Oregon Revised Statutes

Name and address of partners: _____

6

If a foreign (out of State) corporation, answer this:

When Incorporated _____

In what State: _____

Date of authorization to transact business in the State of Oregon: _____

Has applicant filed with the

Department of Revenue forms required by ORS 279.021

Yes

No

President: _____

1st Vice President: _____

Secretary: _____

What officers are authorized to execute contracts:

Name and address of registered agent in Oregon:

7

If a limited liability company, limited liability partnership or a limited partnership, indicate below:

- Check one:
- Limited liability company
 - Limited liability partnership
 - Limited partnership

Have you registered with the State Corporation Division, Business Registry? Yes
 No

Name and address of organizer: _____

List who is authorized to execute contracts: _____

(Additional documentation may be required by the public contracting agency)

8

If doing business under an assumed business name, fill out the following information:

Name of assumed business: _____
 Owner's name and address: _____

Registration date: _____ Expires: _____

9

If doing business as a sole proprietorship, fill out the following information:

Individual's name liable for all obligations of business: _____
 If you are sole proprietor using an assumed business name, please list name below:

Registration date: _____ Expires: _____

11

APPLICANT'S EXPERIENCE QUESTIONNAIRE

List major projects that applicant has undertaken in the last five years.
(List most recent projects first)

Name and Address of Owner	Name of Project	Class of Work	Contract Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

12

Applicant's Experience Questionnaire – cont.

List the following additional information for projects listed under Item 11 (use same line number as on preceding page)

Date of Completion (if cmplt.)	Location of Work	*	Surety Company If Project bonded	Architects or Engineering Firms ✧✧
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

* Indicate whether: (P) Prime Contractor, (JV) Joint Venture, (Sub) Subcontractor

✧✧ Indicate name, address, and phone number (incl. area code)

13

Applicant's Experience Questionnaire – cont.

- A. How many years has applicant been in business under present name:
 As a prime contractor? _____ As a subcontractor? _____
- B. How many years experience in construction work has applicant had:
 As a prime contractor? _____ As a subcontractor? _____

14

What is the construction experience of all owners, officers, partners, and principal individuals in applicant's organization? Also list any other individuals or organization who, in any way and to any extent, controls or influences the bidding.

Individual's Name	Present Position or Office	Years of Construction	Magnitude and Type of Work	In What Capacity

15

Indicate contractor's licenses or registration numbers held as required by Oregon Statutes:

- Corporation Division Registration No. _____
- Construction Contractors Board No. _____
- Landscape Contractors License No. _____
- Electrical License No. _____
- Plumbing License No. _____
- Other License No. _____

16

Following space may be used for general remarks and explanations pertaining to the foregoing prequalification statements: (also explain here any experience claimed which is that of a business organization or entity, other than the applicant, including a business entity superseded by the applicant).

17

OWNERSHIP AND CONTROL

- A. List any organization, owned or controlled by the applicant, its officers, directors, partners, and anyone owning at least 10% interest in the firm, or in which the applicant was or is an officer, director, partner, doing business in Oregon under another name. If none, so state.

- B. List those individuals, companies, or corporations owning 10% or more of applicant's firm.

- C. List all other personnel in applicant's organization who have a financial interest in or serve as officers or partners in another firm prequalified to bid in this or another state.

Individual's Name	Present Position Or Office	Other Firm Or Firms	Position in Other Firm(s)	State of Other Firm

18

- A. Has any officer or partner of the applicant ever applied for prequalification with the public contracting agency under a different name?

Yes No If yes, please explain.

- B. Has the applicant ever failed to complete a state, local, or federal public improvement (works) contract?

Yes No If yes, please explain.

- C. Has any officer or partner of the applicant ever been found in breach of a local, state, or federal contract?

Yes No If yes, please explain.

19

Name of contact person for information regarding this application: _____

20

Contractor's Prequalification Applications subject to approval of the City Engineer.

21

AFFIDAVIT:

STATE OF OREGON)
) ss
County of Washington)

I, _____, being first sworn, state that I am _____
_____ of the applicant herein and that the statements
(title)

made in this application are true and I acknowledge that any false, deceptive, or fraudulent statements on the application or at a hearing will result in the denial of my prequalification with the City.

Original signature

Title

Subscribed and sworn to me this _____ day of _____, 20____.

Before me: _____
Notary Public for Oregon

My Commission Expires: _____