

QualityBidders 2.0 Pre-Qualification Questionnaire

Support Document - Application Summary

Purpose. This document summarizes the QualityBidders 2.0 pre-qualification application for agency, board, and contractor review. Numbering is for reference only and may differ from final system field labels.

Application structure: QualityBidders 2.0 organizes the contractor application into seven steps: Agency Selection, Minimum Qualifications, Firm and Contractor Information, History, Ranking Information, Completed Projects, and Certification.

Step 1: Agency Selection

Additional Requirements (if applicable)

Step 2: Minimum Qualifications

Minimum qualification items establish baseline eligibility before the contractor completes the full application. Required responses are shown.

1. Does the contractor/firm have a valid and current contractor's license in the State of CA?* (Must answer YES)
2. Is your firm registered with the Department of Industrial Relations (DIR) as a Public Works Contractor?* (Must answer YES)
3. Does the firm have a valid and current liability insurance policy in amounts no less than CA State requirements of \$1M per occurrence and \$2M aggregate? * (Must answer YES)
4. Does your firm have current workers' compensation insurance policy as required by the Labor Code or is your firm legally self-insured pursuant to Labor Code section 3700 et. seq.? If you are exempt, can you provide proof of exemption?* (Must answer YES)
5. Is your firm a small business as defined in GC 14837(d)(1)?*
 - -If no a drop down opens asking: Does your firm have an audited or reviewed financial statement that is less than 18 months old with accompanying notes and supplemental information?* (Must answer YES)
6. Are all of the personnel with licenses currently associated with your CSLB# eligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to Labor Code section 1777.1, Labor Code section 1777.7, or any other federal, state, county, municipal or other local law providing for the debarment of contractors from public works?* (Must answer YES)
7. Has your contractor's or other professional license been revoked at any time in the last five years?* (Must answer NO)

8. Has a surety firm completed a contract on your behalf, or paid for completion because your firm was in default and/or terminated by the project owner within the last five years?* (Must answer NO)
9. Has your firm or any of its officers, supervisors, or managers ever been convicted of a crime involving the awarding of a contract of a government construction project, the bidding or performance of a government contract, antitrust statutes, racketeering statutes, safety and health regulations, environmental laws, laws banning workplace discrimination, laws governing wages, hours or labor standards, or laws involving fraud, theft, or any other act of dishonesty?* (Must answer NO)
10. Is your firm currently the debtor in a bankruptcy case?* (Must answer NO)
11. Has your firm or any of its officers, supervisors, or managers ever been terminated for cause from a public works contract, including but not limited to termination based on any misconduct, such as failure to comply with contractual, statutory, or other legal obligations from any public construction project?* (Must answer NO)
12. Does your firm or any of its officers, supervisors, or managers currently have any delinquent liability to an employee, the state, or any awarding body for any assessment of back wages or related damages, interest, fines or penalties pursuant to any final judgment, order, or determination by any court or any federal, state, or local administrative agency, including a confirmed arbitration award?* (Must answer NO)

Step 3: Firm and Contractor Information

Firm Information

- Firm Name*
- Website
- Address 1*
- Address 2
- City*
- State*
- Zip*
- Phone*
- Ext
- Email*

Pre-qualification Application Contact Information

- First Name*
- Last Name*
- Email*
- Phone*
- Ext
- Firm Details

Business Certifications? *

13. Does your firm have any business certifications? *
 - -If yes to business certifications, a drop-down appears, select all relevant: *
 - Minority Business (MBE)
 - Disadvantaged Business (DBE)
 - Disabled Veteran Business (DVBE)
 - Women Owned Business (WBE)

- Small Business (SBE)
- Other
- -If "Other" business certification is selected, a text box appears asking, please state your other business certification(s) here.*
- -If a business certification is selected, UPLOAD: proof documents.*

Select Business Structure

14. Select Business Type (drop-down menu):

- Corporation (date Incorporated*, under the laws of what state*)
- Partnership (date of formation*, under the laws of what state*)
- Sole Proprietorship (date of commencement of business*, person's name*, construction company*, dates of person's, participation with company*).
- Joint Venture (date of formation*, construction company 1*, EMR of company 1*, construction company 2*, EMR of company 2*).

15. Is the firm a subsidiary, parent, holding company or affiliate of another construction firm?*

- If yes, please include information about other firms if one firm owns 50 percent or more of another, or if an owner, partner, officer or the responsible managing employee (RME) or responsible managing officer (RMO) of your firm holds a similar position in another firm.*

16. Are any corporate officers, partners, or the responsible managing employee (RME) or responsible managing officer (RMO) connected to any other construction firm(s)?*

- If yes, please provide an explanation

17. Name of liability insurance carrier*

18. What State is the Liability insurance carrier in?*

19. What is your single project Liability*

20. What is your aggregate project Liability*

21. UPLOAD: Proof of liability*

Contractor Information

22. CSLB License Number*

- Program links to Contractor's State License Board page for that license number

23. License Expiration*

- NOTE: Please enter all license classifications listed on CSLB. If you do not wish to use a particular license please state so in the license comments section. (If you choose to not use a license on this application, that license classification will be unavailable to use for the 1-year life span of this application.)

24. License Classifications*

- Drop down menus to select multiple License Classifications*

25. License Comments*

- Upload: a copy of your CA State Contractor's license

26. If any of your firm's license(s) are held in the name of a corporation, partnership, or limited liability company, list below the names of all of the qualifiers, the responsible managing employee (RMEs) or

responsible managing officer (RMOs), as listed on the CSLB website who meet(s) the experience and examination requirements for each license.

27. DIR #*

28. DIR Expiration Year*

- Program links to DIR page for that number

Step 4: History

Firm History

29. In the last 5 years, if your firm was required to maintain workers' compensation insurance or state-approved self-insurance did you have any gaps in coverage?*

- If yes, provide explanation including the duration of the gap.*
- **UPLOAD:** For the current and last 5 years, upload a statement of continuous coverage from your workers' compensation insurance carrier, including years and policy numbers, on carrier letterhead. If your firm has been in business for less than 5 years, upload a carrier's statement verifying continuous coverage from firm inception.

30. In the last 3 years, has there been any change of more than 10 percent in ownership of the firm? Note: A corporation whose shares are publicly traded may answer "no".

- If yes, provide the year of change of ownership and an explanation.*

31. How many years has your firm been in business in California as a contractor under your present business name and license number?*

32. In the last 5 years, has the License Qualifier for this firm changed?*

- If yes, provide how many time and an explanation.*

32. Is the firm a debtor in a bankruptcy case, or has it been within the last 5 years?*

- **UPLOAD:** the bankruptcy petition showing the case number and year the petition was filed. If case is closed, also upload a copy of the court's discharge order. If no order issued by the court, then upload any other document that ended the case. *

33. In the last 5 years, has your firm changed names or license number(s)?*

- If yes, provide an explanation.*

34. In the last 5 years, has any owner, partner, member, officer or the responsible managing employee (RME) or responsible managing officer (RMO) of your firm operated a differently named construction firm?*

- If yes, provide an explanation.*

Note: Be specific. All personnel connections of active and inactive licenses listed on the CSLB will be verified.

35. In the last 5 years, has any insurance carrier, for any form of insurance, terminated or refused to renew the insurance policy for your firm?*

- If yes, provide type of insurance and reason for refusal.*

36. In the last 5 years, was your firm required to pay a premium of more than one percent for a performance and payment bond on any project?*

- If yes, provide year, percent, and brief explanation.*

37. In the last 5 years, has your firm used more than 3 different sureties to write your bonds?*

- If yes, list all surety company names and the State where each surety does business*

38. Please provide your California Workers' Compensation Experience Rating for the past four years. If your firm did not qualify for a rating, enter "DNQ." For more information, visit WCIRB's Guide to Workers' Compensation Experience Rating.

<https://www.wcirb.com/guide-to-workers-compensation/experience-rating>

- **UPLOAD:** a copy of the Workers' Compensation Insurance Rating Bureau's (WCIRB) Comprehensive Risk Summary (CRS) Report from your broker.

Bid History

39. Have any of the owners, partners, officers, or the responsible managing employee (RME) or responsible managing officer (RMO) of your firm, ever been associated with a firm (including this firm) that has been disbarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?

- If yes, how many*, if while working for a different firm, provide the name of that firm, the name of the person, their title, and if RMO/RME*, year*, name of agency*, project name*, and basis for action*.

40. Has your firm ever been denied an award of a public works contract based on a finding by a public agency that your firm was not a responsible bidder?

- If yes, year*, name of agency*, project name*, and basis for finding*.

41. Has your firm ever agreed with a public agency that your firm would not bid on future projects for a period of time?

- If yes, name of agency*, year*, how long*, and optional comments.

Project History

Note: The following 3 questions apply only to claims between your firm and a public agency.

Do not include claims involving suppliers, other contractors, or subcontractors. You also do not need to include pass-through claims where the actual dispute is between a subcontractor and the project owner.

42. Has a public agency ever made a construction related claim against you that entered arbitration or been filed in court?

- If yes, project name*, year*, name of agency*, description*, state of arbitration or court where filed*, description of status and resolution*, are fines paid?*

43. In the last 5 years, has your firm been denied bond coverage by any surety, or had a lapse of coverage during an active public construction project when one was required?

- If yes, year*, company involved*, during an active public construction project?*, longest duration*, reason*, date range*.

44. At any time in the last 5 years has a public agency withheld, or has the firm paid liquidated damages to a public agency in CA?

- If yes, number of projects*, project names*, agency*, year*, value*, explanation*.

45. In the last 3 years has your firm held a public works contract on which a stop notice remained unresolved for 90 days or longer?

- If yes, number of projects*, optional comments.

46. In the last 5 years, has a Stop Payment Notice resulted in a paid claim against your payment bond?

- If yes, optional comments.

47. Does your firm comply with and actively monitor that appropriate and timely safety meetings and trainings occur on the jobsite(s)?

- If yes, optional comments.

Compliance History

- 48.** In the last 5 years, has CAL OSHA cited and assessed penalties against your firm for any serious, willful or repeat violations of its safety or health regulations?
- If yes, approximate value*, number OSHA penalties*, nature of violations*, optional comments.
- 49.** In the past 5 years, has the Federal Occupational Safety and Health Administration cited and assessed penalties against your firm in CA?
- If yes, number of citations*, nature of violations*, year*, optional comments.
- 50.** In the past 5 years, has the EPA or any Air Quality District (AQMD or APCD) or any State or Regional Water Quality Control Board, or similar environmental oversight agency charged or cited your firm, the holder of your contract, or the public agency, of code, regulation, or permit violations and assessed penalties?
- If yes, number of violations*, approximate value*, nature of violations*, optional comments.
- 51.** In the last 5 years, Has your firm been required to pay either back wages or penalties for your own, (not the subcontractor's), failure to comply with CA prevailing wage laws?
- If yes, approximate value*, number of projects*, penalty paid?*, optional comments.
- 52.** In the last 5 years, has there been an occasion in which your firm has been penalized or required to pay back wages for failure to comply with the federal Davis-Bacon prevailing wage requirements in CA?
- If yes, approximate value*, number of projects*, penalty paid?*, optional comments.
- 53.** In the last 5 years, has your firm been required to pay a fine or fee for any violation of skilled and trained workforce requirements, including apprenticeship requirements?
- If yes, number of violations*, number of projects*, year*, penalty paid?*, optional comments.

Legal History

- 54.** Has your firm ever made a construction related claim against a public agency that entered arbitration or was filed in court?
- If yes, project name*, year*, name of agency*, description*, state of arbitration or court where filed*, description of status and resolution*, are fines paid?*
- 55.** Has your firm or any of its owners, partners, officers, or the responsible managing employee (RME) or responsible managing officer (RMO) ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or material misrepresentation to any public agency?
- If yes, person involved*, agency name*, year*, nature of suit*

Criminal History

- 56.** Has your firm or any of its owners, partners, officers, or the RME ever been convicted of a crime involving any federal, state, or local law related to construction?
- If yes, description of conduct*, person involved*, agency name*, year*, grounds for conviction*, person convicted*, title of convicted*, name of court*, optional comments
- 57.** Has your firm or any of its owners, partners, officers, or RME ever had a felony conviction for a federal or state crime of fraud, theft, or any other act of dishonesty, or of antitrust or racketeering statutes?
- If yes, description of conduct*, person involved*, agency name*, year*, grounds for conviction*, person convicted*, title of convicted*, name of court*, optional comments

Step 5: Ranking Information

Financial Capacity

58. My firm is certified as a small business under Government Code section 14837(d)(1)*

- If no, UPLOAD: a COMPLETE copy of your firm's latest reviewed or audited financial*,
Is this upload a 10K or Annual Report?*

59. For the last 3 years, state your firm's gross revenues. If your firm has not been in business for 3 years, enter \$0 for those years

Bonding Capacity

60. In the next 12 months, will your company bid directly to the Agency/District as a prime contractor?

- If yes, bonding capacity single project*, bonding capacity combined*, AM Best rating*, surety name*, surety location*, surety agency*, agent phone*, agent email*, UPLOAD: supporting documents*
- If no, UPLOAD: Provide a letter of explanation on your letterhead stating that you are not currently bonded and have never been bonded as a Prime Contractor *

Step 6: Completed Projects

Project Information

61. Fully Completed Projects Only. Do not include projects where final payment is still pending. NOTE: All names, email addresses, and phone numbers provided must be current and useable, and must not include your own employees. Contact information that is inaccurate or no longer valid to reach the person listed will cause the application to be returned for correction. All projects in this section must have been completed after:[8 years prior]

- Project name*
- Project Owner*
- Description of Project, Scope of Work Performed*
- Original Scheduled Completion Date*
- Actual date of completion
- Location*
- Project location*
- Were you a Prime contractor on this project? *(Y/N)
- What license classification was used to bid this project*
- Bid#*
- DSA#/Permit#PWC100#/Equivalent*
- Original Value of Construction*
- Total Value of Construction (including change orders)*
- Project type*(PW-Public Ed, PW-Military/Government, Private)
- Project Delivery Method (HardBid/DBB, Multi-Prime, Multi-Year/Multi-Task Order (IDIQ or JOC), Lease/Leaseack, Design Build, Negotiated Price, Other[with description])
- Did the Owner/Agency themselves hold your contract? *(Y/N)
- If yes:
 - Owner Contact (Name, Email, and Phone #)*
 - Design Professional (Name, Email, and Phone #)*
 - Inspector (Name, Email, and Phone #)*
 - Other (Position, Name, Email, and Phone #)*
- If no:
 - Construction Manager (Name, Email, and Phone #)*
 - Design Professional (Name, Email, and Phone #)*

- Inspector (Name, Email, and Phone #)*
- Other (Position, Name, Email, and Phone #)*
- Optional: UPLOAD: a document with additional past projects for reference only. This upload will not be used for scoring and does not replace the project references or project values required above in this section.

Step 7: Certification

Signature of Application

The person signing below makes the following representations under penalty of perjury. Satisfactory evidence of the authority of the officer signing on behalf of a corporation shall be furnished upon request:

The submitter of the foregoing answers to the questionnaire has read the same and the matters stated therein are true to the best of his or her own personal knowledge. This information is provided for the purpose of qualifying to bid, and any individual, company or other agency named herein is hereby authorized to supply the awarding body with any information necessary to verify the prospective bidder's statements. By signing below, the submitter and the named contractor hereby grant permission to contact any or all of the above listed persons or entities to confirm facts or otherwise investigate the above facts and issues.

The submitter understands that any statement which is proven to be false shall be grounds for immediate disqualification from bidding on the Project. The submitter whose signature appears below represents and warrants that he or she has authority to bind the named contractor.

[FULL NAME], the undersigned, with the authority to act for and on behalf of [COMPANY NAME], declare under penalty of perjury under the laws of the State of California that the foregoing information provided in this Pre-qualification Questionnaire is true, full, and correct.

Executed on this day: [TODAY'S DATE] at [LOCATION](city,state)*

Certification: The final submitter certifies the application under penalty of perjury under California law and represents that they have authority to bind the named contractor.