STATEMENT OF BIDDER'S QUALIFICATIONS

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The Undersigned certifies under oath the truth and correctness of all statements and of all answers to questions made hereinafter. All items are to be completely filled in as requested. If additional space is required, attach separate sheets.

SUBMITTED TO:

SUBMITTED BY:

NAME:

ADDRESS:

PRINCIPAL OFFICE:

CHECK ONE: 0 Corporation

0 Partnership

0 Individual

0 Joint Venture

0 Other

1. How many years has your organization been in business as a Contractor?

2. How many years has your organization been in business under its present business name?

3. If a corporation, answer the following:

   a. Date of incorporation:

   b. State of incorporation:

   c. President's name:

   d. Vice President's name:

   e. Secretary's or Clerk's name:

   f. Treasurer's name:

4. If individual or partnership, answer the following:

   a. Date of organization:

   b. Name and address of all partners: (State whether general or limited partnership.)

5. Have you ever failed to complete any work awarded to you? (If so, note when, where and why.)

6. Has any officer or partner of your organization ever been an officer or partner of another organization that failed to complete a construction contract? (If so, state circumstances.)

7. List name of project, owner, engineer, contract amount, percent complete, and scheduled completion of the major construction projects your organization has in process on this date:

8. List name of project, owner, engineer, contract amount, date of completion of the major projects of a similar nature to this project that your organization has completed in the past five (5) years. Indicate all projects on which your organization acted as prime contractor. Include name and telephone number of owner's representative to contact on each project for further information.

9. List the construction experience of the principal individuals of your organization:

10. Proposed construction superintendent:

    a. Name:

    b. General construction experience:

    c. Experience in similar types of projects:

11. List states and categories in which your organization is legally qualified to do business:

12. Professional References: (List names, addresses, and telephone numbers.)

13. Bank References: (Include names, addresses, and telephone numbers of officers familiar with your company.)

14. Name of Bonding Company: (Include name, address, and telephone number of agent.)

15. The City reserves the right to request a Certified Statement of Financial Condition, including Contractor's latest regular dated financial statement or balance sheet which must contain current assets including cash, joint venture accounts, accounts receivable, notes receivable, accrued interest on notes, deposits, materials, prepaid expenses, net fixed assets, and other assets, and current liabilities including accounts payable, notes payable, accrued interest on notes, provision for income taxes, advances received from owners, accrued salaries, accrued payroll taxes, other liabilities and capital (capital stock, authorized and outstanding shares per values and earned surplus). Date of statement must be within 12 months of current date.

16. Dated at _____

this _____ day of _____, 20___.

Name of Organization:

By:

Title:

17. _____ being duly sworn, deposes and says that he (she) is the _____

of _____Contractor(s), and that answers to the foregoing

questions and all statements therein contained are true and correct.

Subscribed and sworn before me this _____day of _____ , 20___.

Notary Public: SEAL

My Commission Expires: