

Planning, Design & Construction



PQ-BP04 PCL Job No. 5221303

# PREQUALIFICATION DOCUMENTS

for

# **BID PACKAGE NO. 04: ELECTRICAL & LOW VOLTAGE** (incl. Telecom & Fire Alarm)

# UCR BATCHELOR HALL RENEWAL PROJECT

PROJECT NO. 950464-950531

University of California, Riverside Planning, Design, & Construction 1223 University Ave., Suite 240 Riverside, CA 92507

Advertisement Date: Sept. 3, 2020

#### **LEVEL 1 - PREQUALIFICATIONS**

Document Issue Date: Sept. 4, 2020

Mandatory Zoom Pre-Qualification Conference: Sept. 18, 2020 at 10:00 AM

Notice of Intent Requested By: Sept. 22, 2020 at 3:00 PM

Last Day for Questions: Sept. 22, 2020 at 3:00 PM

Pre-Qualification Questionnaire Due By: Sept. 24, 2020 at 2:00 PM

**LEVEL 2 - REQUEST FOR PROPOSAL** 

Level 2 Bid / Best Value: 4<sup>rd</sup> Quarter 2020 (est.)





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#### A. PROJECT BACKGROUND

Batchelor Hall was completed in 1965 and was designed to provide maximum usability and flexibility per design standards current at that time. The four-story building frames the northeast corner of a quadrangle formed at the intersection of Eucalyptus and Science walks. Batchelor Hall currently houses the Institute of Integrative Genomic Biology, Department of Botany and Plant Sciences, Life Sciences Graduate Student Advising Office and Student Academic Affairs under the College of Natural and Agricultural Sciences (CNAS).

The building has remained substantially unchanged and currently houses an equipment core which is inefficient and lacks the recourse necessary for modern research. The building's utility infrastructure systems have reached the end of their service lives and in many cases the systems have become obsolete and exist in poor condition. The Batchelor Hall Renewal project will replace and upgrade the building <u>Mechanical</u>, <u>Plumbing</u>, <u>Electrical</u>, <u>Conveyance</u>, and <u>Fire Protection</u> systems, and convert several wet laboratories and support services to provide instructional laboratories and support services.

### **B. PROJECT DESCRIPTION**

The Batchelor Hall Renewal project focuses on replacement of the core building systems. The project scope includes the following:

- Modifications to the heating and cooling systems;
- Upgrades to the ventilation systems;
- Energy management systems;
- Primary and emergency electrical systems;
- Fire alarm and protection systems;
- De-ionized water and reverse osmosis systems;





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- Hazardous materials abatement;
- Connection of building to standby generator;
- Modernization of the existing elevator;
- Installation of a fire sprinkler system throughout the building; and,
- Placement of standby power panels on each floor.

In order to allow occupancy and research in the building during construction, the project will be divided into approximately four phases as will be determined by the University in working in cooperation with PCL Construction Services, Inc. in a separate project planning and preparation phase.

The University has contracted with **HDR Architects** to develop the construction documents which will be utilized on the project.

The campus' proposed <u>phased</u> schedule anticipates that construction will commence in the fourth quarter of 2020, with anticipated construction completion in the Spring of 2023.

The total anticipated Project Construction Budget is \$14,067,474.

The Estimated Construction Cost for the <u>Electrical & Low Voltage (including Telecommunications & Fire Alarm)</u> bid package is \$5,000,000.

#### C. SCOPE OF BID PACKAGE # 04: ELECTRICAL & LOW VOLTAGE

The scope of Bid Package # **04** is anticipated to include the following specification sections:

- Electrical General Requirements
- Wiring Equipment Furnished By Others
- Medium Voltage Cables
- Low Voltage Electrical Power Conductors & Cables
- Grounding & Bonding for Electrical Systems
- Conduits
- Boxes
- Underground Ducts & Raceways for Electrical Systems
- Vibration & Seismic Controls for Electrical Systems
- Identification for Electrical Systems
- Power Monitoring & Control
- Lighting Control Devices
- Pad-Mounted, Liquid-Filled, Medium Voltage Transformers
- Sectionalizing Equipment
- Low Voltage Distribution Transformers
- Switchboards
- Panelboards
- Wiring Devices
- Overcurrent Protective Devices
- Enclosed Safety Switches





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- Surge Protective Devices (SPD)
- Building Lighting
- Telecommunications
- Fire Alarm & Detection Systems

#### D. PREVAILING WAGES

This project will be subject to prevailing wages predetermined by the Department of Industrial Relations DIR).

#### E. SUBCONTRACTOR SELECTION PROCESS

This Prequalification phase will be followed by the bidding phase, wherein Pre-Qualified Subcontractors will be asked to submit lump-sum proposals based on 'For Construction' documents issued by the University's Architect. Proposals will be strictly 'Plans & Specs'; no qualifications will be allowed on Subcontractor proposals.

- END OF BACKGROUND & DESCRIPTION -





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#### SUBCONTRACTOR PREQUALIFICATION QUESTIONNAIRE - BP#04

(Sept. 4, 2020)

for

#### **BATCHELOR HALL RENEWAL**

PROJECT NO. 950464-950531 UNIVERSITY OF CALIFORNIA, RIVERSIDE

(Bidder I	Name. If a Joint Venture, state name of JV Entity)
Type of Organization:	☐ Sole Proprietor/Individual ☐ Partnership
	☐ Joint Venture
	☐ Corporation
	(State of Incorporation)
	(Contact Name & Title)
	,
	(Street Address)
	(0): 0: - 7: 0 1)
	(City, State, Zip Code)
	(Facsimile Number)

Each prospective bidder must answer all of the following questions and provide all requested information. Any prospective bidder failing to do so will be deemed not responsive and not prequalified with respect to this Prequalification at the University's sole discretion. All bidders that submit a Prequalification Questionnaire will be notified in writing of whether or not they have successfully achieved Prequalification status.

Prospective bidders that correctly respond to all questions that require a specific "YES" or "NO" response to prequalify per the Prequalification Questionnaire Evaluation form, submit all required information and supporting data, obtain the total requisite number of points per response as required AND are determined to have accurately and truthfully responded to the questions will be prequalified. Only those bidders that have been determined to be prequalified will be eligible to submit a bid for the Project.

If a prospective bidder is determined by the University not to be prequalified, the prospective bidder may request a review by the University of California, Riverside. If any person or entity is not satisfied with the outcome of the prequalification, such person or entity may file an objection with the University of California, Riverside. Any such a request or objection must be submitted in writing and received by the University of California, Riverside, at the address for receipt of Prequalification Questionnaires listed on the Advertisement for Subcontractor Prequalification no later than 3 calendar days after the date of the University's written notice regarding prequalification determination. The decision resulting from such review is final and is not appealable within the University of California. Any assertion that the outcome of the prequalification process was improper will not be grounds for a bid protest.





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All information submitted for prequalification evaluation in response to Sections 3 and 16 and marked as "Confidential" will be considered official information acquired in confidence, and the University of California will maintain its confidentiality unless (1) the University determines that it is required to release the information to a third party pursuant to the requirements of the California Public Records Act or (2) the University is required by court order to release the information to a third party pursuant to the requirements of the California Public Records Act. In the event that the University receives a request pursuant to the California Public Records Act and the University determines that it is required to disclose information marked "confidential" by the provisions of the California Public Records Act, the University will notify the prospective bidder of the pending disclosure at least 72 hours prior to such disclosure so that the prospective bidder may seek a restraining order in advance of such disclosure. The University shall err on the side of transparency and will generally treat information provided by the prospective bidder that is not marked "confidential" as subject to disclosure pursuant to the California Public Records Act. Likewise, any decision by the University that any document is subject to disclosure pursuant to the California Public Records Act shall not prevent the University from making a subsequent determination that any document is not subject to disclosure pursuant to the California Public Records Act.

All other information submitted for prequalification evaluation will be considered official information acquired in confidence, and the University will maintain its confidentiality to the extent permitted by law.

As used herein, the terms "prospective bidder" or "bidder" or "contractor" or "entity" mean the same. The terms "prospective bidder" or "contractor" or "entity" mean all entities and individuals who are intended to work as a part of, for, or under the prospective bidder for the Project that is the subject of this prequalification process and includes, without limitation, such entities or individuals who are prime contractors, and if a joint venture, all members of the joint venture. Whenever an individual or entity is referred to, the reference includes the individual or entity and all partners, affiliates, subsidiaries, heirs, executors, administrators, assigns, predecessors and successors in interest of or to the individual or entity. For instance, a reference to a bidder includes the prospective bidder and all partners, affiliates, subsidiaries, heirs, executors, administrators, assigns, insurers, predecessor businesses and successor businesses of the bidder.

WHERE NECESSARY, COPY THE FORMS IN THIS PACKAGE. USE ONLY THESE FORMS. Oral, telephonic, electronic mail (e-mail), facsimile, or telegraphic Pregualification Questionnaires are invalid and will not be accepted.

SUBMIT ONE (1) ELECTRONIC COPY (.PDF) NO LATER THAN THE DEADLINE IN THE ADVERTISEMENT FOR SUBCONTRACTOR PREQUALIFICATION.





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1.	SUR	VEY (Information Only)	
	How	did you hear about the prequalification	on for this Project?
		Press Enterprise  McGraw Hill ("Greensheet") Reed	<ul><li>☐ UCR Website</li><li>☐ PCL SmartBid Site</li><li>☐ Other:</li></ul>
2.	LICE	NSE(S) (Pass/Fail Section)	
	A.	Do you have the following State of California Contractor's State License	f California contractor's license current and active with the Board?
		License Classification & Code:	
		C10: Electrical Contractor	
		YES NO NO	
		the requisite license. If the prospecti license and satisfy all of the requirem	nitting this Prequalification Questionnaire must be the holder of ve bidder is a Joint Venture, the Joint Venture must hold the ents in this Prequalification Questionnaire as the joint venture. ust have completed the projects that it cites as references in
	B.	If "YES," provide the following information	ation about the contractor's license:
		(1) Name of license holder exactly a License Board:	as on file with the California Contractor's State
		(2) License Number:	
		(3) Issue Date:	(4) Expiration Date:
	C.		en suspended or revoked by the California Contractor's State calendar years preceding the deadline for submission of the
		YES □ NO □	





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Latest Year to Date:

# 3. FINANCIAL INFORMATION (Points Section)

The University requires that prospective bidders provide the following information regarding their financial condition for the last two fiscal years ended and the current year to date. To verify the following information, each prospective bidder must submit copies of its financial statements, either reviewed or audited in accordance with Generally Accepted Accounting Principles in the United States of America, for the specified periods other than for the latest year to date. A financial statement that is neither reviewed or audited is not acceptable.

Year Ended:

Year Ended:

		<u>2017</u>	<u>2018</u>	<u>2019</u>
Curre	ent Assets:			
Unde	erbillings <sup>1</sup> :			
Total	Assets:			
Curre	ent Liabilities:			
Total	Liabilities:			
Reve	nue:			
Expe	nses:			
Equit Conti (C/R)	racts Receivable			
Cash	:			
Mark	etable Securities <sup>3</sup> :			
<sup>2</sup> Include	e retention. ³Do n	ot include marketable securitie	s held in lieu of retention.	
SURET	TY (Pass/Fail Sec	etion)		
		obtain and submit the Sure e of the surety proposed to l		n shown below, signed by an nd notarized.
A.		an admitted surety insurer		transact business in the State rnia Code of Civil Procedure
	YES 🗌	NO 🗌		
B.	Is the prospectiv	e bidder able to obtain <b>bon</b> e	<b>ding up to <mark>\$5,000,000</mark> f</b> o	r this Project?
	YES 🗌	NO 🗌		
	Bond Capacity:			





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	(1) Provid project	e your maximum bonding limit per ::	
	(2) Provide	e your aggregate bonding limit:	
	(3) Provide	e your available bonding capacity:	
C.	benefit of the		<b>payment bond</b> issued by a surety for the ties of the bidder within the last five (5) years
	YES 🗌	NO 🗆	
D.	benefit of an	• • • • • • • • • • • • • • • • • • • •	erformance bond issued by a surety for the tivities of the bidder within the last five (5) of the Prequalification Questionnaire?
	YES 🗌	NO 🗌	





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### E. Surety Declaration:

PROVIDE THIS DECLARATION TO YOUR SURETY(IES) FOR COMPLETION. DO NOT HAVE THE SURETY SUBMIT THIS INFORMATION DIRECTLY TO THE UNIVERSITY.

(If bidder has more than one surety, submit a completed form for each.) The undersigned declares under penalty of perjury that the bonding information indicated above on this Prequalification Questionnaire for (Name of Prospective Bidder) is true and correct and that this Declaration was executed in , in the State of (Name of City if within a City, otherwise Name of County) (Date) (Signature) (Name and Title - Printed or Typed) (Representing [Surety Name]) (Entity Name if Different than Surety Name) (Street Address) (City, State, Zip Code) (Telephone Number) (Facsimile Number)

(ATTACH ORIGINAL NOTARIZATION of SURETY REPRESENTATIVE'S SIGNATURE)

(E-mail)





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#### 5. INSURER (Pass/Fail Section)

Prospective bidder shall obtain and submit the Insurance Declaration in the form shown below or submit a sample certificate of insurance form from its insurer or submit a letter that declares the same as the Insurance Declaration, signed by an authorized representative of its insurer on the representative's or insurer's letterhead. (If more than one insurer or insurance representative, submit a completed form or sample certificate of insurance form or letter for each.)

A. Is the bidder able to obtain insurance in the following limits for	the required coverages?
YES NO NO	
Commercial Form General Liability Insurance* - Limits of Liability Each Occurrence - Combined Single Limit for Bodily Injury and	Minimum Requirement
Property Damage	\$1,000,000
Products - Completed Operations Aggregate	\$1,000,000
Personal and Advertising Injury	\$1,000,000
General Aggregate	\$2,000,000
Business Automobile Liability Insurance* - Limits of Liability  Each Accident - Combined Single Limit for Bodily Injury and Property	Minimum Requirement
Damage	\$1,000,000
Workers' Compensation and Employer's Liability** Workers' Compensation:	Minimum Requirement (as required by Federal and State of California law)
Employer's Liability: Each Employee	\$1,000,000
Each Accident	\$1,000,000
Each Policy	\$1,000,000

\*This insurance must be (i) issued by companies with a Best rating of A- or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody's) or (ii) guaranteed, under terms consented to by the University (such consent to not be unreasonably withheld), by companies with a Best rating of A- or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody's). Further, the deductible, or retained limit, for each coverage shall not be more than \$100,000.

<sup>\*\*</sup>This insurance must be issued by companies (i) that have a Best rating of B+ or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody's); or (ii) that are acceptable to the University.





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#### B. **Insurance Declaration**:

PROVIDE THIS DECLARATION TO YOUR INSURANCE CARRIER FOR COMPLETION AND HAVE YOUR CARRIER RETURN THE COMPLETED DECLARATION TO YOU. THE PROSPECTIVE CONTRACTOR MUST SUBMIT THIS DECLARATION TO UNIVERSITY. DO NOT HAVE YOUR CARRIER SUBMIT THIS DECLARATION DIRECTLY TO THE UNIVERSITY

The undersigned declares under penalty of periury that the below named insurer is currently

Questionnaire for	(Name of Prospective Bidder)	
and that this Declaration was executed in		
	, in the State of	
(Name of City if within a City, otherwise Name of County)	, in the State of	(State)
ON (Date)		
(Date)		
	(Signature)	
(1	Name &Title)	
,	,	
(Ir	nsurer Name)	
(Si	treet Address)	
(O:h.)	Otata 9 7:- Cada)	
(City, s	State & Zip Code)	
(Telephone Number)	(Fac	simile Number)
(Mobile Number)		(Email)



Α.



UCR Batchelor Hall Renewal (UCR Project # 950464-950531) University of California, Riverside PQ-BP04 PCL Job No. 5221303

#### 6. CONSTRUCTION EXPERIENCE (Pass/Fail Section)

YES 🗌	NO 🗌	

Does the prospective bidder have the construction experience required below?

- 1. Has completed, on or after July 31, 2009, at least **three (3) projects (private or public)** in the United States of America:
  - a. Acting as the prime or subcontractor during the construction phase on the project;
  - b. With an initial construction contract (prime or subcontract) award of \$2,500,000 or more;
  - c. Where the construction involved <u>six or more</u> of the following: Medium Voltage Cabling, Low Voltage Cabling, Grounding & Bonding, Underground Ducts & Raceways for Electrical Systems, Vibration & Seismic Controls for Electrical Systems, Power Monitoring & Control, Lighting Control Devices, Pad-Mounted Liquid-Filled Medium Voltage Transformers, Sectionalizing Equipment, Low Voltage Distribution Transformers, Switchboards, Panelboards, Surge Protective Devices, Telecommunications, or Fire Alarm & Detection Systems, as required in the attached Project Data Sheets;
  - d. Where the construction work occurred in an occupied building or immediately adjacent to an occupied building;
  - e. That satisfies the Staff Rating requirements in the attached Project Data Sheets; and
  - f. That satisfies the Responsible Performance requirements in the attached Project Data Sheets.

Complete and submit the attached Project Data Sheets as evidence that your construction experience satisfies the above requirements. A PROJECT MAY BE USED TO SATISFY MORE THAN ONE REQUIREMENT.

The term "completed" as used above in this Section means that (1) all work has been completed per your contract and (2) the improvement/facility has been approved and/or accepted (i.e., passed final inspection) by the owner.

NOTE THAT PROJECT REFERENCES WILL BE CONTACTED FOR VERIFICATION OF THE INFORMATION REPORTED ON THE PROJECT DATA SHEETS. IN CASE OF CONFLICT BETWEEN THE INFORMATION REPORTED BY THE PROSPECTIVE BIDDER AND THE INFORMATION PROVIDED BY THE REFERENCE, THE INFORMATION PROVIDED BY REFERENCE SHALL TAKE PRECEDENCE AND AMBIGUITIES SHALL BE RESOLVED AGAINST THE PROSPECTIVE BIDDER.

- B. A bidder wishing to use a predecessor business to satisfy prequalification requirements demonstrate with written information submitted with this Prequalification Questionnaire that substantially the same organization (in terms of who is managing the prospective bidder) as the predecessor business. A bidder may meet the requirement of the preceding sentence by demonstrating that the same person is the qualifying individual (under California Contractor's License Law) for:
  - Contractor's license of contractor which shall be the same type as the license required for the contract; and
  - (2) Contractor's license of predecessor business which shall also be the same type as the license required for the contract.





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# **PROJECT DATA SHEET NO. 1**

Project Na	me:						
Location:	(Street Address)	,	City) ,	(State & Zip)			
Owner:							
Contact Na	me:	Tel:	Cell:				
Contact Titl							
Owner was		☐ California State University					
If "No," ther	ner hold your contract?  Yes or provide the contact information for the Name:						
Contac	et Person:	Tel:	Cell:				
Design Pro	fessional of Record:						
Address:	(Street Address)						
Email:	(Street Address)						
Inspector of	(D )						
Address:							
Email:	(Street Address)	,(					
•	onal Office Information: ense number and license classification	on(s) under which you completed	the work:				
Provide the	name of your Superintendent assign	ed to the work:					
Is this same	Is this same person that you are proposing to be the Superintendent on the University's project?						
Provide the	name of your Project Manager assig	ned to the work:					
Is this same	Is this same person that you are proposing to be the Project Manager on the University's project?						
Provide the	address for the office that directly ma	anaged the work:					
	(Street Address)		City) ,	(State & Zip)			





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6.	Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)
	Project Delivery Method: Check one:
7.	Schedule: Original Start Date: Actual Start Date: Actual Completion Date: Actual Completion Date: Actual Completion Date: # of Time Extensions: Number of calendar days extension due to conflicts in construction documents: Number of calendar days extension due to unforeseen conditions: Number of calendar days extension due to design errors/omissions: Number of calendar days extension due to regulatory agency requirements: Number of calendar days extension due to owner-initiated changes: On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.
8.	Contract Amount:  Original Contract Award \$
9.a.	Project Description:  (1) Did you complete the construction work acting as the general contractor? ☐ Yes or ☐ No  (2) Did you complete your construction work acting as the subcontractor? ☐ Yes or ☐ No  (3) Construction Type:  (4) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b.	Construction Experience: (Construction Experience Requirement 6.A.1.)  (1) The project involved: (Check all that apply. Each is worth 10 Points. 60 Points required to pass.)    Medium Voltage Cabling





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	b	y continuous pedestrian and vehicular traffic during normal business hours?  (es = Pass / No = Fail)
		☐ YES, Was in an occupied facility ☐ NO, Not in or adjacent to an occupied facility ☐ YES, Was adjacent to an occupied facility
	С	"YES," then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a eparate sheet if necessary.
0.	Staff Ra	ating – Construction: (Must score at least 35 points to pass.)
	(1)	The originally assigned project manager remained assigned and involved with the project for the following duration:
		☐ More than 95% of the construction contract time (10 points) ☐ 75% - 95% of the construction contract time (5 points) ☐ Less than 75% of the construction contract time (0 points)
	(2)	The originally assigned superintendent remained assigned and involved with the project for the following duration:
		☐ More than 95% of the construction contract time (10 points) ☐ 75% - 95% of the construction contract time (5 points) ☐ Less than 75% of the construction contract time (0 points)
	(3)	When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?
		How many times did you submit your schedule update on time?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
	(4)	How many times did the Owner or Owner's Representative approve your schedule update?    More than 90% of the time = More than satisfactory (10 points)   75% - 90% of the time = Satisfactory (5 points)   Less than 75% of the time = Needs improvement (0 points)
	(5)	How many applications for payment did you submit?  When were your applications for payment due?
		How many times did you submit your applications for payment on time in the form required by your contract?    More than 90% of the time = More than satisfactory (10 points)   75% - 90% of the time = Satisfactory (5 points)   Less than 75% of the time = Needs improvement (0 points)
	(6)	When were you required to submit updated redlined as-builts?
		How many times did you submit your updated redlined as-builts on time in the form required by your contract?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
	(7)	How would the entity that held your contract describe your overall performance and compliance with the contract requirements?    More than satisfactory (10 points)   Satisfactory (5 points)   Needs improvement (0 points)





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11.	Liq	uidated Damages and Claims:
	a.	. Were liquidated damages assessed against you? ☐ Yes or ☐ No If "Yes," then state amount: \$
	b.	Were actual damages assessed against you? ☐ Yes or ☐ No If "Yes," then state amount: \$
	C.	Were back charges assessed against you? ☐ Yes or ☐ No
		If you answered "Yes" to any of the above questions, provide the following information on a separate page and attach it to this Prequalification Questionnaire:  (1) Amount of initial claim (2) Resolution and amount of final claim (3) Source of claim (e.g., subcontractor, etc.) (4) Method of resolution.
	d.	Did you file any claim(s) on the referenced project? ☐ Yes or ☐ No If "Yes," complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.
12.		esponsible Performance on the Project Provided on the Project Data Sheet: ass/Fail Section)
	a.	Have you listed any negative references for the Project above?
		YES NO
	b.	Have you provided any information that would conflict with a reference verification check?
		YES NO
	C.	Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
		YES NO
		- END OF PROJECT DATA SHEET NO. 1 -





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# **PROJECT DATA SHEET NO. 2**

Project Na	me:				
Location:		(Street Address)	(City)		(State & Zip)
Owner:					
Contact Na	me:		Tel:	Cell:	
Contact Tit					
Owner was	a private ent	tity	fornia State University		
If "No," the	n provide the contact	act? ☐ Yes or ☐ No ct information for the entit			
Conta			Tel:	Cell:	
Design Pr	ofessional of Reco	ord:			
Address:		(Street Address)	, <u></u> _	, _	
Email:		(Street Address)			
Inspector	(D				
Address:					
Email:		(Street Address)	,, Tel:		
_	onal Office Informations	ation: license classification(s) u	nder which you complete	ed the work:	
Provide the	name of your Sup	erintendent assigned to th	ne work:		
Is this sam	e person that you a	re proposing to be the Su	perintendent on the University	versity's project? TY6	es or 🗌 No
	-	ect Manager assigned to	-		
Is this sam	e person that you a	re proposing to be the Pro	oject Manager on the Ur	niversity's project? 🗌 Y	'es or ☐ No
Provide the	address for the off	fice that directly managed	the work:		
	(Stree	et Address)	,	(City)	(State & Zip)





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6.	Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)							
	Project Delivery Method: Check one:							
7.	Schedule: Original Start Date: Actual Start Date:							
	Original Completion Date: Actual Completion Date:							
	# of Time Extensions:							
	Number of calendar days extension due to conflicts in construction documents:							
	Number of calendar days extension due to unforeseen conditions:							
	Number of calendar days extension due to design errors/omissions:							
	Number of calendar days extension due to regulatory agency requirements:							
	Number of calendar days extension due to <b>owner-initiated changes</b> :							
	On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.							
8.	Contract Amount:							
	Original Contract Award \$							
	Change Orders \$ Number of Change Orders:							
	Final Contract Amount \$							
	Amount of Change Orders due to conflicts in construction documents: \$							
	Amount of Change Orders due to unforeseen conditions: \$							
	Amount of Change Orders due to design errors/omissions:							
	Amount of Change Orders due to regulatory agency requirements: \$							
	Amount of Change Orders due to owner-initiated changes:							
9.a.	Project Description:							
o.u.	(5) Did you complete the construction work acting as the general contractor? ☐ Yes or ☐ No							
	(6) Did you complete the construction work acting as the subcontractor? ☐ Yes or ☐ No							
	(7) Construction Type:							
	<ul><li>(8) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.</li></ul>							
9.b.	Construction Experience: (Construction Experience Requirement 6.A.1.)							
	(3) The project involved: (Check all that apply. Each is worth 10 Points. 60 Points required to pass.)							
	☐ Medium Voltage Cabling       ☐ Pad-Mounted, Liquid-Filled, Medium Voltage         ☐ Low Voltage Electrical Power Conductors       Transformers         & Cables       ☐ Sectionalizing Equipment         ☐ Grounding & Bonding for Electrical Systems       ☐ Switchboards         ☐ Underground Ducts & Raceways for Electrical Systems       ☐ Panelboards         ☐ Systems       ☐ Surge Protective Devices         ☐ Power Monitoring & Control       ☐ Telecommunications         ☐ Lighting Control Devices       ☐ Fire Alarm & Detection Systems							





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		Did the project involve construction work in an occupied facility <u>or</u> was it adjacent to an occupied facility surrounded by continuous pedestrian and vehicular traffic during normal business hours? <b>(Pass/Fail)</b>	ţ
		☐ YES, Was in an occupied facility ☐ NO, Not in or adjacent to an occupied facility ☐ YES, Was adjacent to an occupied facility	
		If "YES," then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.	
10.	Staff I	Rating – Construction: (Must score at least 35 points to pass.)	
	(8)	3) The originally assigned project manager remained assigned and involved with the project for the following duration:	
		More than 95% of the construction contract time (10 points)	
		<ul><li>☐ 75% - 95% of the construction contract time (5 points)</li><li>☐ Less than 75% of the construction contract time (0 points)</li></ul>	
	(0	The originally assigned superintendent remained assigned and involved with the project for the following	
	(3	duration:	
		<ul><li>☐ More than 95% of the construction contract time (10 points)</li><li>☐ 75% - 95% of the construction contract time (5 points)</li></ul>	
		Less than 75% of the construction contract time (5 points)	
	(1	10) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?	
		How many times did you submit your schedule update on time?	_
		<ul><li>☐ More than 90% of the time = More than satisfactory (10 points)</li><li>☐ 75% - 90% of the time = Satisfactory (5 points)</li></ul>	
		Less than 75% of the time = Needs improvement (0 points)	
	(1	11) How many times did the Owner or Owner's Representative approve your schedule update?	
		More than 90% of the time = More than satisfactory (10 points)	
		<ul><li>☐ 75% - 90% of the time = Satisfactory (5 points)</li><li>☐ Less than 75% of the time = Needs improvement (0 points)</li></ul>	
	(1	12) How many applications for payment did you submit?	
	( -	When were your applications for payment due?	
		How many times did you submit your applications for payment on time in the form required by your contract?  More than 90% of the time = More than satisfactory (10 points)	
		☐ 75% - 90% of the time = Satisfactory (5 points)	
		Less than 75% of the time = Needs improvement (0 points)	
	(1	13) When were you required to submit updated redlined as-builts?	
		How many times did you submit your updated redlined as-builts on time in the form required by your contract?	
		<ul> <li>☐ More than 90% of the time = More than satisfactory (10 points)</li> <li>☐ 75% - 90% of the time = Satisfactory (5 points)</li> </ul>	
		Less than 75% of the time = Needs improvement (0 points)	
	(1	14) How would the entity that held your contract describe your overall performance and compliance with the	
		contract requirements?  More than satisfactory (10 points)	
		☐ Satisfactory (5 points)	
		Needs improvement (0 points)	





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11.	Liq	uidated Dama	ges and Claims:				
	e.	Were liquidate	ed damages assess	sed against you?	☐ Yes or ☐ No	If "Yes," then state amount:	\$
	f.	Were actual of	damages assessed	against you? 🗌 `	res or ☐ No	If "Yes," then state amount	\$
	g.	Were back ch	arges assessed ag	ainst you? 🗌 Yes	or 🗌 No	If "Yes," then state amount	\$
			ach it to this Prequal (5) (6) (7)	lification Question Amount of initial Resolution and a	naire: claim amount of final clai (e.g., subcontracto		ate
	h.		any claim(s) on the blete a Claim Data S			o fication Questionnaire.	
12.		esponsible Per ass/Fail Section	rformance on the I on)	Project Provided	on the Project Da	ata Sheet:	
	a.	Have yo	u listed any negativ	e references for the	ne Project above?		
		YES 🗌	NO 🗆				
	b.	Have yo	u provided any info	rmation that would	d conflict with a ref	erence verification check?	
		YES 🗌	NO 🗌				
	C.	continue accorda contract	ed use of defective r nce with the contract documents?	materials, unautho	rized product subs	Project referenced above as stitutions, refusal to correct w provide proper supervision re	ork not in
1.	Pro	YES ☐ oject Name:					
	Loc	cation:	(Chr.	ant Address	,	(Oit.)	(State & Zip)
			(511	eet Address)		(City)	(State & Zip)
2.	Ow	ner:					
	Co	ntact Name:			Tel:	Cell:	
	Contact Title:				Email:		
	Owner was   a private entity  California State University  University  4-Year Private College or University:  Other public entity:						ity of California
			Id your contract?  de the contact informance:		ty that held your co	ontract:	
		Contact Pers	on:		Tel:	Cell:	
					Email:		





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Design Profe	ssional of Record:					
Address:			,		,	
	(Street Add			(City)		(State & Zip)
Email:			Tel:		Cell:	
Inspector of	Record:					
Address:					,	
	,	ress)		, •,		
Email:			Tel:		Cell:	
Your Region	al Office Information:					
State the licer	nse number and license cla	assification(s) under w	hich you com	pleted the v	work:	
Provide the na	ame of your Superintender	nt assigned to the worl	k:			
	erson that you are proposi	· ·				es or □ No
Provide the na	ame of your Project Manag	er assigned to the wo	rk:			
	erson that you are proposi			e University	y's project?	Yes or □ No
•			-		,	
Provide trie at	ddress for the office that di	rectly managed the wi	JIK.			
			<u> </u>		,	
	(Street Address)		_ ,	(City)	,	(State & Zip)
-	(Street Address) ery Method: (CM NOT AT ry Method: Check one:	<sup>-</sup> <b>RISK DOES NOT QI</b> ☐ CM at Risk		(City)		
-	ery Method: (CM NOT AT	RISK DOES NOT QI	UALIFY.)	(City)		
-	ery Method: (CM NOT AT ry Method: Check one:	□ CM at Risk □ Other, specify:	<b>JALIFY.)</b> □ Design-E	(City) Bid-Build	□ Design-B	uild
Project Delive	ery Method: (CM NOT AT ry Method: Check one: Original Start Da	RISK DOES NOT QUESTION OF CM at Risk Other, specify:	<b>JALIFY.)</b> ☐ Design-E	(City) Bid-Build Actua	□ Design-Bi	uild
Project Delive	ery Method: (CM NOT AT ry Method: Check one:	RISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate:	<b>JALIFY.)</b> ☐ Design-E	(City) Bid-Build Actua	□ Design-Bi	uild
Project Delive	ery Method: (CM NOT AT ry Method: Check one: Original Start Da Original Completion Da	CRISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate: ons:	JALIFY.)  Design-E	(City)  Bid-Build  Actual  Actual Com	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Project Delive  Schedule:	ery Method: (CM NOT AT ry Method: Check one: Original Start Da Original Completion Da # of Time Extension	CRISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate: ons:	UALIFY.)  Design-E  A  construction	(City)  Bid-Build  Actual  Actual Com	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Project Delive  Schedule:  Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension	CRISK DOES NOT QUESTION OF CM at Risk  Control CM at Risk  CM	JALIFY.)  Design-E  A  construction conditions:	(City)  Bid-Build  Actual  Actual Com  a documen	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Schedule:  Number Number	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension r of calendar days extension	CM at Risk Cher, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to design error	JALIFY.)  Design-E  Construction conditions:	(City)  Bid-Build  Actual  Actual Com  a documer	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Schedule:  Numbe Numbe Numbe Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension r of calendar days extension	CRISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to design error on due to regulatory at the conflicts of the conflicts on due to regulatory at the conflicts of the conflic	DALIFY.)  Design-E  Construction  conditions:  ors/omissions agency require	(City)  Bid-Build  Actual  Actual Com  a documer  a:  rements:	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Schedule:  Numbe Numbe Numbe Numbe Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension	CM at Risk CM at Risk Cher, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to regulatory at on due to owner-initiatin explanation for each	JALIFY.)  Design-E  construction conditions: ors/omissions agency requirated changes h time extens	(City)  Bid-Build  Actual  Actual Com  a documer  a: rements:	Design-Bi	uild
Schedule:  Numbe Numbe Numbe Numbe Numbe otherw	ery Method: (CM NOT AT  ry Method: Check one:  Original Start Da  Original Completion Da  # of Time Extension  r of calendar days extension	CM at Risk CM at Risk Cher, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to regulatory at on due to owner-initiatin explanation for each	JALIFY.)  Design-E  construction conditions: ors/omissions agency requirated changes h time extens	(City)  Bid-Build  Actual  Actual Com  a documer  a: rements:	Design-Bi	uild
Schedule:  Numbe Numbe Numbe Numbe Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension	CRISK DOES NOT QUESTION COME AT Risk Comments of the conflicts in the component of the comments of the comment	JALIFY.)  Design-E  construction conditions: ors/omissions agency requirated changes h time extens	(City)  Bid-Build  Actual  Actual Com  a document  a:  rements:  ::  sion due to  stionnaire.	Design-Bi	uild





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	Final Contract Amount \$
	Amount of Change Orders due to conflicts in construction documents: \$
	Amount of Change Orders due to <b>unforeseen conditions</b> :
	Amount of Change Orders due to design errors/omissions:
	Amount of Change Orders due to regulatory agency requirements: \$
	Amount of Change Orders due to owner-initiated changes:
	Amount of change orders due to owner-initiated changes.
9.a.	Project Description:
	(1) Did you complete the construction work acting as the general contractor? ☐ Yes or ☐ No
	(2) Did you complete your construction work acting as the subcontractor? ☐ Yes or ☐ No
	(3) Construction Type:
	(4) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.
9.b.	Construction Experience: (Construction Experience Requirement 6.A.1.)
	(1) The project involved: (Check all that apply. Each is worth 10 Points. 60 Points required to pass.)
	☐ Medium Voltage Cabling ☐ Pad-Mounted, Liquid-Filled, Medium Voltage
	Low Voltage Electrical Power Conductors  Transformers
	& Cables Sectionalizing Equipment Sectionalizing Equipment Switchboards
	☐ Underground Ducts & Raceways for Electrical ☐ Panelboards
	Systems Surge Protective Devices
	Power Monitoring & Control  Telecommunications  Tipe Alarm & Potentian Systems
	☐ Lighting Control Devices ☐ Fire Alarm & Detection Systems  (2) Did the project involve construction work in an occupied facility or was it adjacent to an occupied facility surrounded
	by continuous pedestrian and vehicular traffic during normal business hours?
	(Yes = Pass / No = Fail)
	☐ YES, Was in an occupied facility ☐ NO, Not in or adjacent to an occupied facility
	☐ YES, Was adjacent to an occupied facility
	If "YES," then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.
10.	Staff Rating – Construction: (Must score at least 35 points to pass.)
	(1) The originally assigned project manager remained assigned and involved with the project for the following duration:
	☐ More than 95% of the construction contract time (10 points)
	☐ 75% - 95% of the construction contract time (5 points)
	Less than 75% of the construction contract time (0 points)
	(2) The originally assigned superintendent remained assigned and involved with the project for the following duration:
	☐ More than 95% of the construction contract time (10 points)
	☐ 75% - 95% of the construction contract time (5 points)
	Less than 75% of the construction contract time (0 points)
	(3) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?





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			How many times did you submit your schedule update on time?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)		
		(4)	How many times did the Owner or Owner's Representative approve your schedule update?    More than 90% of the time = More than satisfactory (10 points)   75% - 90% of the time = Satisfactory (5 points)   Less than 75% of the time = Needs improvement (0 points)		
		(5)	How many applications for payment did you submit?		
			When were your applications for payment due?		
			How many times did you submit your applications for payment on time in the form required by More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)	your contract?	1
		(6)	When were you required to submit updated redlined as-builts?		
			How many times did you submit your updated redlined as-builts on time in the form required by  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)	your contrac	t?
		(7)	How would the entity that held your contract describe your overall performance and compliance contract requirements?  More than satisfactory (10 points)  Satisfactory (5 points)  Needs improvement (0 points)	e with the	
11.	Lic	-	ated Damages and Claims:		
	a.		ere liquidated damages assessed against you?   Yes or  No If "Yes," then state amount:	\$	
	b.		ere actual damages assessed against you?   Yes or  No If "Yes," then state amount:	\$	
	C.	Wei	ere back charges assessed against you?   Yes or   No  If "Yes," then state amount:	\$	
			vou answered "Yes" to any of the above questions, provide the following information on a separat ge and attach it to this Prequalification Questionnaire:  (1) Amount of initial claim  (2) Resolution and amount of final claim  (3) Source of claim (e.g., subcontractor, etc.)  (4) Method of resolution.	e	
	d.		d you file any claim(s) on the referenced project?  Yes or  No Yes," complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.		
12.			onsible Performance on the Project Provided on the Project Data Sheet: /Fail Section)		
	a.		Have you listed any negative references for the Project above?		
			YES NO NO		
	b.		Have you provided any information that would conflict with a reference verification check?		





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	YES NO NO
C.	Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
	YES NO NO
	- END OF PROJECT DATA SHEET NO. 2 –





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# **PROJECT DATA SHEET NO. 3**

Project Nam	e:				
Location:	(Street Address)		(City) ,		
Owner:					
Contact Nam	e:	Tel:	Cell:		
Contact Title					
Owner was		California State University	☐ University	of California	
If "No," then	er hold your contract?  Yes or  No provide the contact information for the e by Name:	entity that held your contract:			
Contact	Person:	Tel:	Cell:		
			_		
Email:	Record:				
Address:					
Address	(Street Address)	,	City) ,	(State & Zip	
Email:		Tel:	Cell:		
State the lice Provide the r Is this same Provide the r	nal Office Information:  nse number and license classification(s  ame of your Superintendent assigned to  person that you are proposing to be the  ame of your Project Manager assigned  person that you are proposing to be the	o the work:  Superintendent on the Unive to the work:	rsity's project? 🔲 Ye	es or □ No	
	ddress for the office that directly manage		., . , . ,		
	,	-			
	(Street Address)	, (	City) , .	(State & Zip	





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6.	Project Delivery Method: (CM NOT AT RISK DOES NOT QUALIFY.)							
	Project Delivery Method: Check one:							
7.	Schedule: Original Start Date: Actual Start Date:							
	Original Completion Date: Actual Completion Date:							
	# of Time Extensions:							
	Number of calendar days extension due to conflicts in construction documents:							
	Number of calendar days extension due to <b>unforeseen conditions:</b>							
	Number of calendar days extension due to <b>design errors/omissions:</b>							
	Number of calendar days extension due to regulatory agency requirements:							
	Number of calendar days extension due to owner-initiated changes:							
	On a separate page, provide an explanation for each time extension due to prospective bidder or not otherwise included above and attach it to this Prequalification Questionnaire.							
8.	Contract Amount:							
	Original Contract Award \$							
	Change Orders \$ Number of Change Orders:							
	Final Contract Amount \$							
	Amount of Change Orders due to conflicts in construction documents: \$							
	Amount of Change Orders due to unforeseen conditions: \$							
	Amount of Change Orders due to design errors/omissions: \$							
	Amount of Change Orders due to regulatory agency requirements: \$							
	Amount of Change Orders due to <b>owner-initiated changes</b> :							
9.a.	Project Description:							
	(9) Did you complete the construction work acting as the general contractor? ☐ Yes or ☐ No							
	(10) Did you complete your construction work acting as the subcontractor? ☐ Yes or ☐ No							
	(11) Construction Type:							
	(12) Describe your entire Scope-of-Work related to the Project for which you are applying to prequalify. Attach a separate page if necessary.							
9.b.	Construction Experience: (Construction Experience Requirement 6.A.1.)							
	(5) The project involved: (Check all that apply. Each is worth 10 Points. 60 Points required to pass.)							
	☐ Medium Voltage Cabling       ☐ Pad-Mounted, Liquid-Filled, Medium Voltage         ☐ Low Voltage Electrical Power Conductors       Transformers         & Cables       ☐ Sectionalizing Equipment         ☐ Grounding & Bonding for Electrical Systems       ☐ Switchboards         ☐ Underground Ducts & Raceways for Electrical Systems       ☐ Panelboards         ☐ Systems       ☐ Surge Protective Devices         ☐ Power Monitoring & Control       ☐ Telecommunications         ☐ Lighting Control Devices       ☐ Fire Alarm & Detection Systems							





PQ-BP04 PCL Job No. 5221303

	by continuous pedestrian and vehicular traffic during normal business hours? (Pass/Fail)
	☐ YES, Was in an occupied facility ☐ NO, Not in or adjacent to an occupied facility ☐ YES, Was adjacent to an occupied facility
	If "YES," then in the space below, describe the adjacency and/or pedestrian and traffic conditions, proximity to the construction work, and the measures that you took to mitigate risk of harm to pedestrians and vehicles. Attach a separate sheet if necessary.
10.	Staff Rating – Construction: (Must score at least 35 points to pass.)
	(15) The originally assigned project manager remained assigned and involved with the project for the following duration:
	☐ More than 95% of the construction contract time (10 points)
	75% - 95% of the construction contract time (5 points)
	Less than 75% of the construction contract time (0 points)
	(16) The originally assigned superintendent remained assigned and involved with the project for the following duration:
	☐ More than 95% of the construction contract time (10 points)
	75% - 95% of the construction contract time (5 points)
	☐ Less than 75% of the construction contract time (0 points)
	(17) When were you required to submit schedule updates, e.g., weekly, with every application for payment, etc.?
	How many times did you submit your schedule update on time?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
	(18) How many times did the Owner or Owner's Representative approve your schedule update?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
	(19) How many applications for payment did you submit?
	When were your applications for payment due?
	How many times did you submit your applications for payment on time in the form required by your contract?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
	(20) When were you required to submit updated redlined as-builts?
	How many times did you submit your updated redlined as-builts on time in the form required by your contract?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
	(21) How would the entity that held your contract describe your overall performance and compliance with the contract requirements?    More than satisfactory (10 points)   Satisfactory (5 points)   Needs improvement (0 points)





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11.	Liqui	idated Damag	jes and Claims:			
	i. V	Were liquidated	d damages assessed again	st you? 🗌 Yes or 🗌 No	If "Yes," then state amount:	\$
	j. \	Were actual da	mages assessed against y	ou? ☐ Yes or ☐ No	If "Yes," then state amount:	\$
	k. V	Were back cha	rges assessed against you	? ☐ Yes or ☐ No	If "Yes," then state amount:	\$
			h it to this Prequalification (9) Amount (10) Resolut (11) Source			ate
			ny claim(s) on the referenc ete a Claim Data Sheet per			
12.		ponsible Perf ss/Fail Section	ormance on the Project P n)	Provided on the Project	Data Sheet:	
	a.	Have you	listed any negative referen	ices for the Project above	9?	
		YES 🗌 1	NO 🗆			
	b.	Have you	provided any information t	hat would conflict with a r	reference verification check?	
		YES 🗌 1	NO 🗆			
	C.	continued accordand contract of	I use of defective materials ce with the contract docume documents?	, unauthorized product su	e Project referenced above as obstitutions, refusal to correct wo provide proper supervision re	ork not in
1.	Proie	YES 🗌 1 ect Name:	NO L			
	Loca	•	(Street Addres	,, ss)	(City)	(State & Zip)
2.	Own	er:				
	Cont	act Name:		Tel:	Cell:	
	Cont	act Title:		Email:		
	Owne	□ 4	private entity -Year Private College or Ur Other public entity:	California State Uni	versity	ty of California
				<del></del>		
	If "No	o," then provide	your contract?  Yes or [ e the contact information fo		contract:	
		Company Nan	ne:			
		Contact Perso	n:	Tel:	Cell:	
				Email:		





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Design Profe	ssional of Record:					
Address:			,		,	
	(Street Add			(City)		(State & Zip)
Email:			Tel:		Cell:	
Inspector of	Record:					
Address:					,	
	,	ress)		, •,		
Email:			Tel:		Cell:	
Your Region	al Office Information:					
State the licer	nse number and license cla	assification(s) under w	hich you com	pleted the v	work:	
Provide the na	ame of your Superintender	nt assigned to the worl	k:			
	erson that you are proposi	· ·				es or □ No
Provide the na	ame of your Project Manag	er assigned to the wo	rk:			
	erson that you are proposi			e University	y's project?	Yes or □ No
•			-		,	
Provide trie at	ddress for the office that di	rectly managed the wi	JIK.			
			<u> </u>		,	
	(Street Address)		_ ,	(City)	,	(State & Zip)
-	(Street Address) ery Method: (CM NOT AT ry Method: Check one:	<sup>-</sup> <b>RISK DOES NOT QI</b> ☐ CM at Risk		(City)		
-	ery Method: (CM NOT AT	RISK DOES NOT QI	UALIFY.)	(City)		
-	ery Method: (CM NOT AT ry Method: Check one:	□ CM at Risk □ Other, specify:	<b>JALIFY.)</b> □ Design-E	(City) Bid-Build	□ Design-B	uild
Project Delive	ery Method: (CM NOT AT ry Method: Check one: Original Start Da	RISK DOES NOT QUESTION OF CM at Risk Other, specify:	<b>JALIFY.)</b> ☐ Design-E	(City) Bid-Build Actua	□ Design-Bi	uild
Project Delive	ery Method: (CM NOT AT ry Method: Check one:	RISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate:	<b>JALIFY.)</b> ☐ Design-E	(City) Bid-Build Actua	□ Design-Bi	uild
Project Delive	ery Method: (CM NOT AT ry Method: Check one: Original Start Da Original Completion Da	CRISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate: ons:	JALIFY.)  Design-E	(City)  Bid-Build  Actual  Actual Com	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Project Delive  Schedule:	ery Method: (CM NOT AT ry Method: Check one: Original Start Da Original Completion Da # of Time Extension	CRISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate: ons:	UALIFY.)  Design-E  A  construction	(City)  Bid-Build  Actual  Actual Com	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Project Delive  Schedule:  Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension	CRISK DOES NOT QUESTION OF CM at Risk  Control CM at Risk  CM	JALIFY.)  Design-E  A  construction conditions:	(City)  Bid-Build  Actual  Actual Com  a documen	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Schedule:  Number Number	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension r of calendar days extension	CM at Risk Cher, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to design error	JALIFY.)  Design-E  Construction conditions:	(City)  Bid-Build  Actual  Actual Com  a documer	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Schedule:  Numbe Numbe Numbe Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension r of calendar days extension	CRISK DOES NOT QUESTION OF CM at Risk Other, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to design error on due to regulatory at the conflicts of the conflicts on due to regulatory at the conflicts of the conflic	DALIFY.)  Design-E  Construction  conditions:  ors/omissions agency require	(City)  Bid-Build  Actual  Actual Com  a documer  a:  rements:	☐ Design-Bi al Start Date: _ pletion Date: _	uild
Schedule:  Numbe Numbe Numbe Numbe Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension	CM at Risk CM at Risk Cher, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to regulatory at on due to owner-initiatin explanation for each	JALIFY.)  Design-E  construction conditions: ors/omissions agency requirated changes h time extens	(City)  Bid-Build  Actual  Actual Com  a documer  a: rements:	Design-Bi	uild
Schedule:  Numbe Numbe Numbe Numbe Numbe otherw	ery Method: (CM NOT AT  ry Method: Check one:  Original Start Da  Original Completion Da  # of Time Extension  r of calendar days extension	CM at Risk CM at Risk Cher, specify:  ate: ate: ons: on due to conflicts in on due to unforeseen on due to regulatory at on due to owner-initiatin explanation for each	JALIFY.)  Design-E  construction conditions: ors/omissions agency requirated changes h time extens	(City)  Bid-Build  Actual  Actual Com  a documer  a: rements:	Design-Bi	uild
Schedule:  Numbe Numbe Numbe Numbe Numbe	ery Method: (CM NOT AT ry Method: Check one:  Original Start Da Original Completion Da # of Time Extension r of calendar days extension	CRISK DOES NOT QUESTION COME AT Risk Comments of the conflicts in the component of the comments of the comment	JALIFY.)  Design-E  construction conditions: ors/omissions agency requirated changes h time extens	(City)  Bid-Build  Actual  Actual Com  a document  a:  rements:  ::  sion due to  stionnaire.	Design-Bi	uild





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	Final Contract Amount \$	
	Amount of Change Orders due to conflicts in construction documents:	\$
	Amount of Change Orders due to unforeseen conditions:	\$
	Amount of Change Orders due to design errors/omissions:	\$
	Amount of Change Orders due to regulatory agency requirements:	\$
	Amount of Change Orders due to owner-initiated changes:	\$
9.a.	Project Description:	
	(1) Did you complete the construction work acting as the general contractor	? ☐ Yes or ☐ No
	(2) Did you complete your construction work acting as the subcontractor?	
	(3) Construction Type:	ee e e
	(4) Describe your entire Scope-of-Work related to the Project for which you separate page if necessary.	are applying to prequalify. Attach a
9.b.	Construction Experience: (Construction Experience Requirement 6.A.1.)	
	(1) The project involved: (Check all that apply. Each is worth 10 Points	s. 60 Points required to pass.)
	☐ Medium Voltage Cabling ☐ Pad-Mounted, Li	quid-Filled, Medium Voltage
	☐ Low Voltage Electrical Power Conductors Transformers	
	& Cables Sectionalizing Education Sectionalizing Education Sectionalizing Education Section Se	quipment
	☐ Underground Ducts & Raceways for Electrical ☐ Panelboards	
	Systems Surge Protective	
	☐ Power Monitoring & Control ☐ Telecommunicat ☐ Lighting Control Devices ☐ Fire Alarm & Det	
	(2) Did the project involve construction work in an occupied facility or was it adja	acent to an occupied facility surrounded
	by continuous pedestrian and vehicular traffic during normal business hour (Yes = Pass / No = Fail)	s?
	(165 - F a55 / NO - F all)	
	<ul><li>☐ YES, Was in an occupied facility</li><li>☐ NO, Not in or adjacent to an occupied facility</li></ul>	acent to an occupied facility
	If "YES," then in the space below, describe the adjacency and/or pedestriar construction work, and the measures that you took to mitigate risk of harm separate sheet if necessary.	
10.	Staff Rating – Construction: (Must score at least 35 points to pass.)	
	(1) The originally assigned project manager remained assigned and involve	d with the project for the following
	duration:  More than 95% of the construction contract time (10 points)	
	☐ 75% - 95% of the construction contract time (10 points)	
	☐ Less than 75% of the construction contract time (0 points)	
	(2) The originally assigned superintendent remained assigned and involved duration:	with the project for the following
	☐ More than 95% of the construction contract time (10 points)	
	☐ 75% - 95% of the construction contract time (5 points)	
	Less than 75% of the construction contract time (0 points)	
	(3) When were you required to submit schedule updates, e.g., weekly, with	every application for payment, etc.?





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			How many times did you submit your schedule update on time?    More than 90% of the time = More than satisfactory (10 points)   75% - 90% of the time = Satisfactory (5 points)   Less than 75% of the time = Needs improvement (0 points)
		(4)	How many times did the Owner or Owner's Representative approve your schedule update?  More than 90% of the time = More than satisfactory (10 points)  75% - 90% of the time = Satisfactory (5 points)  Less than 75% of the time = Needs improvement (0 points)
		(5)	How many applications for payment did you submit?
			When were your applications for payment due?
			How many times did you submit your applications for payment on time in the form required by your contract?    More than 90% of the time = More than satisfactory (10 points)   75% - 90% of the time = Satisfactory (5 points)   Less than 75% of the time = Needs improvement (0 points)
		(6)	When were you required to submit updated redlined as-builts?
			How many times did you submit your updated redlined as-builts on time in the form required by your contract?  ☐ More than 90% of the time = More than satisfactory (10 points)  ☐ 75% - 90% of the time = Satisfactory (5 points)  ☐ Less than 75% of the time = Needs improvement (0 points)
		(7)	How would the entity that held your contract describe your overall performance and compliance with the contract requirements?    More than satisfactory (10 points)   Satisfactory (5 points)   Needs improvement (0 points)
11.	Lic	-	ted Damages and Claims:
	a.		re liquidated damages assessed against you?   Yes or  No If "Yes," then state amount: \$
	b.		re actual damages assessed against you?   Yes or  No If "Yes," then state amount: \$
	C.	Wei	re back charges assessed against you?   Yes or  No  If "Yes," then state amount: \$
			ou answered "Yes" to any of the above questions, provide the following information on a separate e and attach it to this Prequalification Questionnaire:  (1) Amount of initial claim  (2) Resolution and amount of final claim  (3) Source of claim (e.g., subcontractor, etc.)  (4) Method of resolution.
	d.		you file any claim(s) on the referenced project? ☐ Yes or ☐ No 'es," complete a Claim Data Sheet per Section 16 of this Prequalification Questionnaire.
12.			nsible Performance on the Project Provided on the Project Data Sheet: Fail Section)
	a.		Have you listed any negative references for the Project above?
			YES NO NO
	b.		Have you provided any information that would conflict with a reference verification check?



7.



UCR Batchelor Hall Renewal (UCR Project # 950464-950531) University of California, Riverside

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	YES NO
C.	Do you have a history of poor past performance of work on the Project referenced above as evidenced by continued use of defective materials, unauthorized product substitutions, refusal to correct work not in accordance with the contract documents, or repeated failure to provide proper supervision required by the contract documents?
	YES NO
	- END OF PROJECT DATA SHEET NO. 3 -
RE	ESPONSIBLE PERFORMANCE ON ALL COMPLETED PROJECTS (Points Section)
	ich "NO" is worth 10 points. Must score 70 or more points to pass. At its sole discretion, the niversity may award 5 points due to mitigating circumstances.
-	you answer "YES" to any question, provide an explanation on a separate page and attach it to this equalification Questionnaire.
A.	Has bidder provided any inaccurate or incorrect information required during prequalification, qualification, bidding, or required by contract documents?
	YES NO NO
В.	Is bidder currently debarred from work by a public entity in California?
	YES NO If "YES," provide name of public entity:
C.	Has bidder performed any work without the required contractor's license?
	YES
D.	Is bidder currently the debtor in a bankruptcy case?



8.



UCR Batchelor Hall Renewal (UCR Project # 950464-950531) University of California, Riverside PQ-BP04 PCL Job No. 5221303

	above-	named individual is subject to t	on of this Questionnaire, you agree that the he University's approval and is subject to quest during the Prequalification and Bidding
	individu		sume that demonstrates that the above-name antially similar to that specified in Section 6.A. o
		Email:	Cell:
	Name of S	Superintendent:	Tel:
A.	The Univers (Full-time st	sity requires the prospective bidder to a upervision is required while working or	assign a <u>dedicated</u> Superintendent to the Projec or site.)
STAF	FING (Pass/F	ail Section)	
	YES 🗌	NO 🗆	
J.		NO  ic entity ever had to issue bidder a unhange order and perform the change of	nilateral change order because bidder refused torder work?
I.	defective m with the con	aterials, unauthorized product substit	nance of work as evidenced by continued use of utions, refusal to correct work not in accordance, or repeated failure to provide proper supervision
	YES 🗌	NO 🗌	
H.	Has bidder projects?	ever been convicted of a criminal offer	se in connection with current or past contracts fo
	YES 🗌	NO 🗌	
G.	Has bidder	failed to adhere to contractually requir	ed and agreed-upon schedules?
	YES 🗌	NO 🗌	
F.	Has bidder	substituted a subcontractor without an	owner's written consent?
	YES 🗌	NO 🗆	
E.	Has bidder	used unlicensed or improperly licensed	d subcontractors?
	YES 📙	NO 📙	



9.



UCR Batchelor Hall Renewal (UCR Project # 950464-950531) University of California, Riverside PQ-BP04 PCL Job No. 5221303

periods for this Project, and if awarded the Contract for the Project, after award. Any individual approved by the University cannot be replaced by you without University's written consent.

Б.	The University requires the prospective bluder to assign a <b>dedit</b>	cated Project Manager to the Project.
	Name of Project Manager:	Tel:
	Email:	Cell:
	(1) You must complete and submit detailed resume that of individual has construction experience substantially similar this Prequalification Questionnaire.	
	(2) By signing the Prequalification Declaration of this C above-named individual is subject to the Universi replacement by you at University's sole request during periods for this Project, and if awarded the Contract individual approved by the University cannot be repl written consent.	ty's approval and is subject to g the Prequalification and Bidding for the Project, after award. Any
C.	The individual(s) named above must be assigned to the office to Contractor. Provide the address of your office to be assigned (Street Address)	
	(City)  The above office must be within <b>90 miles</b> of the UCR Planning 1223 University Avenue, Suite 240, Riverside, CA 92507.	(State & Zip) g, Design & Construction office at
	Any change in the office assigned must be approved replaced without University's written consent.	by the University and cannot be
SAFI	ETY PROGRAM (Pass/Fail Section)	
A.	Has bidder instituted an injury and illness prevention program 6401.7 of the Labor Code?	(IIPP) pursuant to Section 3201.5 or
	YES NO NO	
	If "YES," then ☐ attach a copy of the <u>Table of Contents</u> from b	pidder's IIPP.



B.

10.



UCR Batchelor Hall Renewal (UCR Project # 950464-950531) University of California, Riverside PQ-BP04 PCL Job No. 5221303

	may be the assigned Superintendent or Project Manager.)
	YES NO NO
	If "YES", provide the name(s) and title(s) of the person(s):
	Name and Title:
	If necessary, include additional information on a separate page and attach it to this Prequalification Questionnaire.
C.	Has bidder had a serious and willful violation of Part 1 (commencing with Section 6300) of Division 5 of the Labor Code within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
	YES NO
D.	Has bidder maintained a Workers' Compensation Experience Modification Rate (EMR) that averages at or below <b>1.00</b> for the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire? (If bidder has been in business for less than five years, then bidder must have maintained a Workers' Compensation EMR that averages at or below <b>1.00</b> for all years that bidder has been in business.)
	YES NO NO
	Year: EMR: Year: EMR: Year: EMR: Year: EMR: Year: EMR: Year: EMR:  Attach verification of EMR from State of California or from bidder's insurance company.
LABO	R COMPLIANCE (Pass/Fail Section)
A.	Has the prospective bidder committed a prevailing wage violation* within the last five (5) calendar years preceding the deadline for submission of the Prequalification Questionnaire?
	YES NO
	*Does not include a violation determined to be due to inadvertent or unintentional error by the California Department of Industrial Relations. If a violation due to inadvertent or unintentional error, then on a separate page attached to this Prequalification Questionnaire, identify the violation by providing the project name, date of the violation, name of the entity (or entities), a brief description of the nature of the violation, and a brief description of the status of the violation (e.g., pending, or if resolved, a brief description of the resolution, etc.) for the University's verification.

Will bidder have personnel permanently assigned and dedicated to Safety on this Project? (This





UCR Batchelor Hall Renewal (UCR Project # 950464-950531) University of California, Riverside

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	B.	Prequalification	vithin the last five (5) calendar years preceding the deadline for submission of the in Questionnaire, has the prospective bidder been found to have violated any provision opprenticeship laws or regulations, or the laws pertaining to use of apprentices on public
		YES 🗌	NO 🗆
11.	QUAL	ITY ASSURAN	CE/QUALITY CONTROL (QA/QC) PROGRAM (Pass/Fail Section)
	A.	Does bidder h	ave a written quality assurance/quality control program?
		YES 🗌	NO 🗆
		If "YES," □ at	tach a copy of the Table of Contents from bidder's QA/QC program.
	B.		we personnel permanently assigned and dedicated to QA/QC on this Project? (This edicated Superintendent or Project Manager.)
		YES 🗌	NO 🗆
		If "YES", provi	de the name(s) and title(s) of the person(s):
		Name and	Title:
		If necessary, i Questionnaire	nclude additional information on a separate page and attach it to this Prequalification .
12.	DISCII	PLINARY MEAS	SURES HISTORY (Pass/Fail Section)
	from do	oing business w nia State Unive	mber of the entity if a joint venture or partnership) been disqualified or otherwise barred ith a public agency (e.g., federal, state, county, city, University of California System, rsity System, school district,) within the last five (5) calendar years preceding the n of the Prequalification Questionnaire?
	YES [	□ NO □	]
13.	FALSE	E CLAIMS HIST	ORY (Pass/Fail Section)
	court t Califor	to have submitt rnia System, Ca	ember of the entity if a joint venture or partnership) been found in a final decision of a ed a false claim to a public agency (e.g., federal, state, county, city, University of lifornia State University System,) within the last five (5) calendar years preceding the on of the Prequalification Questionnaire?
	YES [	] NO [	]
14.	TERM	INATION HISTO	DRY (Pass/Fail Section)
	Has bi	dder (or any me	ember of the entity if a joint venture or partnership) been terminated for cause by an

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submission of the Prequalification Questionnaire?

owner after construction commenced within the last five (5) calendar years preceding the deadline for





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	YES 🗌	NO 🗆
15.	LIQUIDATE	DAMAGES (Pass/Fail Section)
	of more than	or any member of the entity if a joint venture or partnership) been assessed liquidated damages \$50,000 on a construction contract with either a public or private owner within the last five (5) rs preceding the deadline for submission of the Prequalification Questionnaire?
	YES 🗌	NO 🗆
40	01 41140 1110	

### 16. CLAIMS HISTORY (Points Section)

Each prospective bidder will be evaluated to determine if the bidder and/or persons or entities associated with the bidder have a history of having unmeritorious claims asserted by or on their behalf in litigation or arbitration and/or of having had meritorious design or construction claims asserted against them in litigation or arbitration.

In order to be evaluated, each prospective bidder must complete the Claims History portion of this Prequalification Questionnaire. Based on the information provided, each prospective bidder will be assigned a Claims History score. The maximum possible score is 15. Must score 10 or more points to pass this Section.

**Two (2) points** will be deducted from the total available points for this Section for each qualifying lawsuit or arbitration, commenced within **five (5) calendar years** preceding the deadline for submission of the Prequalification Questionnaire, in which the prospective bidder and/or persons or entities associated with the bidder, had design or construction claims asserted by or on their behalf that were resolved by trial court judgment, arbitration award or settlement calling for receipt of less than 50% of the total amount of claims asserted in the lawsuit or arbitration.

Additionally, **two (2) points** will be deducted from the total available points for this Section for each qualifying lawsuit or arbitration, commenced within **five (5) calendar years** preceding the deadline for submission of the Prequalification Questionnaire, in which the prospective bidder and/or persons or entities associated with the bidder, had design or construction claims asserted against them, that were resolved by trial court judgment, arbitration award or settlement calling for receipt of more than 50% of the total amount of claims asserted in the lawsuit or arbitration.

Any prospective bidder with a **score deduction of 6 or more points** will presumptively be considered not prequalified because the prospective bidder and/or persons or entities associated with the bidder have been a party to three (3) or more lawsuits or arbitrations in which they either asserted, or had asserted on their behalf, unmeritorious design or construction claims or they had meritorious design or construction claims asserted against them.

The presumption may be rebutted if the University determines, after investigating any explanation offered in providing the Claims History, that the prospective bidder and/or persons or entities associated with the bidder have not been a party to three (3) or more lawsuits or arbitrations in which they either asserted, or had asserted on their behalf, unmeritorious design or construction claims or they had meritorious design or construction claims asserted against them.

If the presumption is not rebutted, the prospective bidder will be deemed to have an unacceptable Claims History, and will not be prequalified for the Project that is the subject of this prequalification process.





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As used herein:

"Lawsuit" means any lawsuit commenced within five (5) calendar years preceding the deadline for submission of the Pregualification Questionnaire.

"Arbitration" means any binding arbitration commenced within five (5) calendar years preceding the deadline for submission of the Pregualification Questionnaire.

"Claim" means a claim (excluding claims solely for the enforcement of stop notices) arising from design and/or construction work and includes, without limitation, claims for extra compensation and damages (including delay, disruption and acceleration damages, but excluding claims for personal injury or death), and claims for defective design or construction work.

"Pass-Through Claim" has the meaning commonly ascribed to it in the construction industry and also includes (i) any claim that was or is asserted by the prospective bidder, in whole or in part, against an Owner on behalf of a different person or entity; and (ii) any claim that was or is asserted by an Owner against the prospective bidder, and that was subsequently reasserted, in whole or in part, against a different person or entity.

A.	preceding the o	ed to be prequalified, in part or in whole, within the last five (5) calendar years leadline for submission of the Prequalification Questionnaire, for failure to provide mation regarding past litigation or arbitration history?
	YES 🗌	NO [ (5 Points)
B.	preceding the d	en a party to any lawsuits or arbitrations, within the last five (5) calendar years eadline for submission of the Prequalification Questionnaire, where the total amount uding Pass-Through Claims) asserted <b>by or on behalf of</b> the entity exceeded
	YES 🗌	NO [ (5 Points)
	If "YES," then h	ow many?
		claim, complete a Claim Data Sheet and attach it to this Prequalification Make Copies of the Claim Data Sheet as needed.
C.	preceding the d	en a party to any lawsuits or arbitrations, within the last five (5) calendar years eadline for submission of the Prequalification Questionnaire, where the total amount uding Pass-Through Claims, and claims for indemnity or contribution) <b>against</b> the \$50,000?
	YES 🗌	NO [ (5 Points)
	If "YES," then h	ow many?
		n claim, complete a Claim Data Sheet and attach it to this Prequalification Make Copies of the Claim Data Sheet as needed.





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#### CLAIM DATA SHEET No. \_\_\_

(Copy this sheet as many times as needed.)

A separate Claim Data Sheet must be prepared for each Lawsuit or Arbitration as required above. If the claims were made against the entity and were resolved for more than 50% of the highest amount sought, state why the claims should not be considered meritorious design or construction claims asserted against the prospective bidder and/or persons or entities associated with the prospective bidder.

Contact Name: Tel: Cell:  Contact Title: Email:  Did the Owner hold your contract? Yes or No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person: Tel: Cell:  Email:	1.	Case Name and Number:						
Name of Court or Arbitration Service:         Location of Court or Arbitration Service:         Address:       (Street Address)       (City)       (State & Zip)         2. Project Name:       Project or Contract Number:       (City)       (State & Zip)         3. Owner:       Contact Name:       Tel:       Cell:         Contact Title:       Email:       Contact Title:       Email:         Did the Owner hold your contract? ☐ Yes or ☐ No       No       If "No," then provide the contact information for the entity that held your contract:       Company Name:       Cell:       Email:         Contact Person:       Tel:       Cell:       Email:         4. Description of Claims: (Attach a separate page if necessary.)       Highest Amount Sought for All Claims: \$		Name of Entity Initiating Claim:						
Location of Court or Arbitration Service:  Address:		Date Arbitration or Litigation Commenced:						
Address:		Name of Court or Arbitration Service:						
(Street Address) (City) (State & Zip)  2. Project Name: Project or Contract Number:  Location:  (Street Address) (City) (State & Zip)  3. Owner:  Contact Name:  Contact Name:  Tel:  Contact Title:  Email:  Did the Owner hold your contract? Yes or No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		Location of Court or Arbitration Service:						
(Street Address) (City) (State & Zip)  2. Project Name: Project or Contract Number:  Location:  (Street Address) (City) (State & Zip)  3. Owner:  Contact Name:  Contact Name:  Tel:  Contact Title:  Email:  Did the Owner hold your contract? Yes or No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)								
Project or Contract Number:  Location:  (Street Address) (City) (State & Zip)  3. Owner:  Contact Name:  Contact Name:  Contact Title:  Did the Owner hold your contract?  Yes or  No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		Address: (Street Address)		(City)	, _	(State & Zip)		
Project or Contract Number:  Location:  (Street Address) (City) (State & Zip)  3. Owner:  Contact Name:  Contact Name:  Contact Title:  Did the Owner hold your contract?  Yes or  No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)	•	Designet Names						
Location:  (Street Address)  (City)  (State & Zip)  3. Owner:  Contact Name:  Contact Name:  Contact Title:  Did the Owner hold your contract?  Yes or  No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)	۷.	-						
(Street Address) (City) (State & Zip)  3. Owner:  Contact Name:  Contact Title:  Did the Owner hold your contract? Yes or No If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		Project or Contract Number:						
(Street Address) (City) (State & Zip)  3. Owner:  Contact Name:  Contact Title:  Did the Owner hold your contract? Yes or No If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)								
Contact Name: Tel: Cell:  Contact Title: Email:			,	(City)		(State & Zin)		
Contact Name: Tel: Cell:  Contact Title: Email:		(Street Addres	5)	(City)		(State & Zip)		
Contact Title: Email:	3.	Owner:						
Did the Owner hold your contract?  Yes or  No  If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		Contact Name:	Tel:		Cell:			
If "No," then provide the contact information for the entity that held your contract:  Company Name:  Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		Contact Title:	Email:					
Contact Person:  Tel: Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$ Amount Recovered: \$ Date of Claim Resolution: Method of Resolution: (Check one.)		Did the Owner hold your contract? ☐ Yes or ☐	∃ No					
Contact Person:  Tel:  Email:  4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		If "No," then provide the contact information for	the entity that held your co	ontract:				
### Amount Recovered: \$ Date of Claim Resolution: (Check one.)		Company Name:						
4. Description of Claims: (Attach a separate page if necessary.)  Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)		Contact Person:	Tel:		Cell:			
Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)			Email:					
Highest Amount Sought for All Claims: \$  Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)								
Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)	4.	Description of Claims: (Attach a separate page	ge if necessary.)					
Amount Recovered: \$  Date of Claim Resolution:  Method of Resolution: (Check one.)								
Date of Claim Resolution:  Method of Resolution: (Check one.)								
Method of Resolution: (Check one.)		· -						
·								
I I Judgment		,						
Other describe:			<del>_</del>					





PQ-BP04 PCL Job No. 5221303

# PREQUALIFICATION DECLARATION

I,	, hereby declare that I am the
(Printed Name	9)
of	
(Title)	(Name of Bidder)
submitting this Prequalification Questionnaire; that I	am duly authorized to sign this Prequalification Questionnaire
on behalf of the above-named bidder; and that all in	formation set forth in this Prequalification Questionnaire and
all attachments hereto are, to the best of my knowle	dge, true, accurate, and complete as of its submission date.
I declare, under penalty of perjury, that the f	oregoing is true and correct and that this Declaration was
executed in:	
	, in the State of
(Name of City if within a City, otherwise Name of County)	(State)
on	
(Date)	
	(Signature)

- END OF PREQUALIFICATION QUESTIONNAIRE -