

Attachment No. 1 PREQUALIFICATION QUESTIONNAIRE FOR TRADE CONTRACTORS SEEKING TO BID ON TRADE CONTRACTS FOR JOB ORDER CONTRACTING (JOC)

For SPECIALIZED WORK

JOC NO. 020



Due January 4, 2024

TITLE PAGE

TRADE CONTRACTORS SEEKINGTO BID ON TRADE CONTRACTS FOR JOB ORDER CONTRACTING (JOC) for SPECIALIZED WORK

Full name of firm completing this questionnaire:	
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- 2. This Application is submitted for consideration of Pre-Qualification as a Trade Contractor for JOC Trade Contracts under the Job Order Contract (JOC) project delivery method. Contractors bidding on trade contracts for Job Order Contracting (herein referred as "Work") for the County must be prequalified in order to submit bids for award for Specialized Work.
- 3. This JOC Trade Contract prequalification is contingent upon the contractor's demonstrated self-performance of the prime contract for one specific craft or trade under a license for that trade on a construction project. The Applicant has been issued and currently holds any of the following license(s) issued by the Contractor's State License Board for the State of California that is (are) active and in good standing in order to perform Specialized Work ("Eligible License(s)"):

ELIGIBLE LICENSES:

License		Trade License Classification(s) for	
Classification	Trade Description	This Pre-Qualification Application:	
C12	Paving		
C15	Flooring		
C20	Mechanical (HVAC)		
C33	Painting		
C36	Plumbing		
C39	Roofing		

FORMAL PREQUALIFICATION QUESTIONNAIRE for JOC TRADE CONTRACTORS

Firm Na	ame:	ars on license)		Check One:	Corporation	
	(as it appe	ars on license)			☐ Partnership	
Other N	Name: (DBA):				☐ Sole Prop.	
Contac	t Person:			Title:		
Email:				Cell Phone:		
Phone:				Fax:		
Addres	s:					
	s a sole proprieto	or or partnership:				
		ons, License Number. Please only list the				e Classifications that ork under:
DIR Re	egistration Numbe	er:				
Compa	ny Union Status:	Union No	on-Union			
Minority	y Status: MBE	DBE	DVBE	SBE	DBE	
Other N	Minority Certificat	ion:				
PART	I. ESSE	ENTIAL REQUIR	EMENTS FOR	QUALIFICATIO	N	
		I be immediately d of questions 8 thro				gh 7 is "no." If the qualified.
1.		attached a copy of t		nt California Contra	ctor's license for the	e specialized work or
	☐ Yes	☐ No				
2.		attached a copy of \$2,000,000 aggregation		ance policy with a	policy limit of at le	east \$1,000,000 per
	☐ Yes	☐ No				
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3.			compensation insurance policy as required by the Labor Code or is legally self-section 3700 et. seq.
	☐ Yes	☐ No	Contractor is exempt from this requirement because it has no employees
4.		attached the late	st copy of a <u>reviewed</u> or <u>audited</u> financial statement with accompanying notes and hment II.4).
	☐ Yes	☐ No	Contractor is exempt from this requirement because it is a Certified Small Business
	availability of information of basis that App	i a line of credi nly, and is not a olicant is a small	t that is neither reviewed nor audited is not acceptable. A letter verifying t may also be attached; however, it will be considered as supplemental substitute for the required financial statement. If Applicant is exempt on the business pursuant to Government Code Section 14837(d)(1) ¹ , a copy of the SB) or Small Business Public Works Certification (SB-PW) must be attached
5.	Department of bonding capac	Insurance) and au ity is sufficient for	arized statement from an admitted surety insurer (approved by the California uthorized to issue bonds in the State of California, which states: (a) that your current the project for which you seek pre-qualification if you are seeking pre-qualification are seeking pre-qualification valid for a year) (b) your current available bonding
	☐ Yes	☐ No	
6.	all documents i	elated to the corp	of the corporate resolution that duly certifies individuals or officers to sign any and poration and who are authorized to contractually bind the corporation upon entering the the County of Riverside.
	☐ Yes	☐ No	
7.	Contractor has	provided a copy	of the registration with the California Department of Industrial Relations.
	☐ Yes	☐ No	
8.			ontract on your behalf, or paid for completion because your contract was terminated ast five (5) years?
	☐ Yes	☐ No	
9.	contract, or pe		e-qualification form, is your firm ineligible to bid on or be awarded a public works ntractor on a public works contract, pursuant to either Labor Code section 1777.1
	☐ Yes	☐ No	
			I and operated business that is not dominant in its field of operation, the principal office of which is located in alifornia, and which, together with affiliates, has 100 or fewer employees, and average annual gross receipts of

^{1 &}quot;Small business" means an independently owned and operated business that is not dominant in its field of operation, the principal office of which is located in California, the officers of which are domiciled in California, and which, together with affiliates, has 100 or fewer employees, and average annual gross receipts of fifteen million dollars (\$15,000,000) or less over the previous three years, or is a manufacturer, as defined in subdivision (c), with 100 or fewer employees. For the purposes of public works contracts, as defined in Section 1101 of the Public Contract Code, and engineering contracts, as described in Section 4525, for public works projects, awarded through competitive bids or otherwise, "small business" means an independently owned and operated business that is not dominant in its field of operation, the principal office of which is located in California, the officers of which are domiciled in California, and which, together with affiliates, has 200 or fewer employees, and average annual gross receipts of thirty-six million dollars (\$36,000,000) or less over the previous three years.

² An additional notarized statement from the surety may be requested by *Public Entity* at the time of submission of a bid, if this pre-qualification package is submitted more than 60 days prior to submission of the bid. NOTE: Notarized statement must be from the surety company, not an agent or broker.

PART II. ORGANIZATION AND HISTORY, PERFORMANCE, COMPLIANCE WITH CIVIL AND CRIMINAL LAWS

For Firms That Are Corporations: a. Date incorporated:	Current Organization and	Structure of t	he Business						
Under the laws of what state: Federal Identification Number: Provide all the following information for each person who is either (a) an officer of the corporation (prespresident, secretary, treasurer), or (b) the owner of at least ten per cent of the corporation's stock. Name Position Years with Co. Ownership Social Security # Identify every construction firm that any person listed above has been associated with (as owner, gene limited partner or officer) at any time during the last five years. NOTE: For this question, "owner" and "partner" refer to ownership of ten per cent or more of the or 10 per cent or more of its stock, if the business is a corporation. Person's Name Construction Firm Position Participation with Firm For Firms That Are Partnerships: Under the laws of what state: Provide all the following information for each partner who owns 10 per cent or more of the firm. Name Position Years with Co. Wownership Social Security # Identify every construction company that any partner has been associated with (as owner, general partner or officer) at any time during the last five years.) NOTE: For this question, "owner" and "partner" refer to ownership of ten per cent or more of the business, or ten per cent or more of its stock, if the business is a corporation.	For Firms That Are Corpo	rations:							
Provide all the following information for each person who is either (a) an officer of the corporation (prespecially president, secretary, treasurer), or (b) the owner of at least ten per cent of the corporation's stock. Name	Date incorporated:								
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Name Position Position	Federal Identification Numb	er:		_					
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Date of formation: Under the laws of what state: Provide all the following information for each partner who owns 10 per cent or more of the firm. Name Position Years with Co. % Ownership Social Security # Identify every construction company that any partner has been associated with (as owner, general partner or officer) at any time during the last five years.) NOTE: For this question, "owner" and "partner" refer to ownership of ten per cent or more of the business, or ten per cent or more of its stock, if the business is a corporation. Dates of Person's	Person's Name	Cor	nstruction Firm						
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Dates of Person's	partner or officer) at any tim NOTE: For this question,	e during the la " owner" and "	st five years.) " partner" refer	to own	ership	of ten p	er cent		
Person's Name Construction Company Participation with Company						Date	s of Pe		
		1			L				

	For Firms That Are Sol	e Proprietorships:	
۱.	Date of commencement	of business.	
١.	Social Security number of	of Company owner.	
; .	partner or officer) at any NOTE: For this questio	time during the last five years.	een associated with (as owner, general partner, l ownership of ten per cent or more of the busi corporation.
Pers	son's Name	Construction Company	Dates of Person's Participation with Company
	History of the Business	S	
		nge in ownership of the firm at any t whose shares are publicly traded	time during the last three years? is not required to answer this question.
	☐ Yes ☐ No		
	☐ Fes ☐ NO	If "yes," explain on a separate sign	ed page.
	Is the firm a subsidiary, p	parent, holding company or affiliate	of another construction firm? frm owns 50 per cent or more of another, or
	Is the firm a subsidiary, p NOTE: Include inform owner, partner, or office	parent, holding company or affiliate of a strain about other firms if one firms	of another construction firm? frm owns 50 per cent or more of another, or osition in another firm.
	Is the firm a subsidiary, p NOTE: Include inform owner, partner, or offic Yes No Are any corporate officer	parent, holding company or affiliate of ation about other firms if one filter of your firm holds a similar point "yes," explain on a separate sign s, partners or owners connected to ation about other firms if an own	of another construction firm? rm owns 50 per cent or more of another, or esition in another firm. ed page.
	Is the firm a subsidiary, p NOTE: Include inform owner, partner, or offic Yes No Are any corporate officer NOTE: Include inform position in another firm	parent, holding company or affiliate of ation about other firms if one filter of your firm holds a similar point "yes," explain on a separate sign s, partners or owners connected to ation about other firms if an own	of another construction firm? frm owns 50 per cent or more of another, or osition in another firm. ed page. any other construction firms. ner, partner, or officer of your firm holds a second
	Is the firm a subsidiary, position in another firm	parent, holding company or affiliate pation about other firms if one firer of your firm holds a similar point "yes," explain on a separate sign as, partners or owners connected to ation about other firms if an owner.	of another construction firm? Irm owns 50 per cent or more of another, or esition in another firm. ed page. any other construction firms. Iner, partner, or officer of your firm holds a second page.
	Is the firm a subsidiary, position in another firm	parent, holding company or affiliate pation about other firms if one filter of your firm holds a similar point of "yes," explain on a separate sign as, partners or owners connected to ation about other firms if an own. If "yes," explain on a separate sign as separate sign on a separate sign as revenues for each of the past three series.	of another construction firm? Irm owns 50 per cent or more of another, or esition in another firm. ed page. any other construction firms. Iner, partner, or officer of your firm holds a second page.
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	Is the firm a subsidiary, p NOTE: Include inform owner, partner, or offic Yes No Are any corporate officer NOTE: Include inform position in another firm Yes No State the Applicant's gro 20: How many years has you	parent, holding company or affiliate pation about other firms if one filer of your firm holds a similar point "yes," explain on a separate sign rs, partners or owners connected to ation about other firms if an owner. If "yes," explain on a separate sign rs revenues for each of the past three 20	of another construction firm? Irm owns 50 per cent or more of another, or esition in another firm. ed page. any other construction firms. Iner, partner, or officer of your firm holds a served page. ed page. ree (3) full calendar years:
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C.	Eligible Licenses for Specialized Work: C-12, C-15, C-20, C-33, C-36, C-39
7.	List the California construction license numbers, for any of the <u>six (6) eligible license classifications</u> and expiration dates of the California contractor licenses held by your firm for which you are applying for prequalification for JOC Trade Contracts:
8.	If any of your firm's above license(s) are held in the name of a corporation or partnership, list below the names of the qualifying individual(s) listed on the CSLB records who meet(s) the experience and examination requirements for each license.
9.	Has your firm changed names or license number in the past five years?
	☐ Yes ☐ No
	If "yes," explain on a separate signed page, including the reason for the change.
10.	Has any owner, partner or (for corporations) officer of your firm operated a construction firm under any other name in the last five years?
	☐ Yes ☐ No
	If "yes," explain on a separate signed page, including the reason for the change.
11.	Has any CSLB license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years?
	☐ Yes ☐ No
	If "yes," please explain on a separate signed sheet.
D.	Bankruptcy, Disputes, Criminal Matters, Lawsuits
12.	Is your firm currently the debtor in a bankruptcy case?
	☐ Yes ☐ No
	If "yes," please attach a copy of the bankruptcy petition, showing the case number, and the date on which the petition was filed.
13.	Was your firm in bankruptcy at any time during the last five years?
	☐ Yes ☐ No
	If "yes," please attach a copy of the bankruptcy petition, showing the case number and the date on which the petition was filed, and a copy of the Bankruptcy Court's discharge order, or of any other document that ended the case, if no discharge order was issued.
14.	At any time in the last five (5) years has your firm been assessed and paid liquidated damages after completion of a project under a construction contract with either a public or private owner?
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	☐ Yes	□ No
	completion of the	on a separate signed page, identifying all such projects by owner, owner's address, the date of the project, amount of liquidated damages assessed and all other information necessary to fully essment of liquidated damages.
15.	was associated government age construction fi	5) years has your firm, or any firm with which any of your company's owners, officers or partners, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any ency or public works project for any reason? NOTE: "Associated with" refers to another irm in which an owner, partner or officer of your firm held a similar position, and which is use to question 1c or 1d on this form.
	☐ Yes	□ No
	qualification her	n on a separate signed page. State whether the firm involved was the firm applying for pre- re or another firm. Identify by name of the company, the name of the person within your firm who with that company, the year of the event, the owner of the project, the project and the basis for the
16.		(5) years has your firm been denied an award of a public works contract based on a finding by a nat your company was not a responsible bidder?
	☐ Yes	□ No
		on a separate signed page. Identify the year of the event, the owner, the project and the basis for the public agency.
	You need not i	lowing two questions refer only to disputes between your firm and the owner of a project. include information about disputes between your firm and a supplier or another contractor. include information about "pass-through" disputes in which the actual dispute is between a r and a project owner. Also, you may omit reference to all disputes about amounts of less
17.	In the past five project?	(5) years has there been a claim <u>against</u> your firm concerning your firm's work on a construction
	☐ Yes	□ No
	claim, name of	parate signed sheets of paper identify the claim(s) by providing the project name, date of the the claimant, a brief description of the nature of the claim, the court in which the case was filed cription of the status of the claim (pending or, if resolved, a brief description of the resolution).
18.	In the past five payment for a c	(5) years has your firm made a claim against a project owner concerning work on a project or contract?
	☐ Yes	□ No
	name of the en	arate signed sheets of paper identify the claim by providing the project name, date of the claim, tity (or entities) against whom the claim was filed, a brief description of the nature of the claim, ch the case was filed and a brief description of the status of the claim (pending, or if resolved, a n of the resolution).
19.	result of a defau	ing the past five (5) years, has any surety company made any <u>payments</u> on your firm's behalf as a alt, to satisfy any claims made against a performance or payment bond issued on your firm's behalf, ith a construction project, either public or private?

	☐ Yes ☐ No
	If "yes," explain on a separate signed page the amount of each such claim, the name and telephone number of the claimant, the date of the claim, the grounds for the claim, the present status of the claim, the date of resolution of such claim if resolved, the method by which such was resolved if resolved, the nature of the resolution and the amount, if any, at which the claim was resolved.
20.	In the last five (5) years has any insurance carrier, for any form of insurance, refused to renew the insurance policy for your firm?
	☐ Yes ☐ No
	If "yes," explain on a separate signed page. Name the insurance carrier, the form of insurance and the year of the refusal.
21.	Has your firm or any of its owners, officers or partners ever been found liable in a civil suit or found guilty in a criminal action for making any false claim or material misrepresentation to any public agency or entity?
	☐ Yes ☐ No
	If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding.
22.	At any time during the last five (5) years, has your firm, or any of its owners or officers been convicted of a crime involving the awarding of a contract of a government construction project, or the bidding or performance of a government contract?
	☐ Yes ☐ No
	If "yes," explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the conviction and the grounds for the conviction.
23.	Has your firm or any of its owners, officers or partners ever been convicted of a federal or state crime of fraud, theft, or any other act of dishonesty?
	☐ Yes ☐ No
	If "yes," identify on a separate signed page the person or persons convicted, the court (the county if a state court, the district or location of the federal court), the year and the criminal conduct.
24.	Has your firm been required to pay a premium of more than one per cent for a performance and payment bond on any project(s) on which your firm worked at any time during the last three (3) years? state the percentage that your firm was required to pay. If "yes," provide an explanation for a percentage rate higher than one per cent.
	<u> </u>
25.	List all other sureties (name and full address) that have written bonds for your firm during the last five (5) years, including the dates during which each wrote the bonds:
26.	During the last five (5) years, has your firm ever been denied bond coverage by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required?
	☐ Yes ☐ No
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	If "yes," provide details on a separate signed sheet indicating the date when your firm was denied coverage and the name of the company or companies which denied coverage; and the period during which you had no surety bond in place.
E.	Occupational Safety
27.	Has CAL OSHA cited and assessed penalties against your firm for any "serious," "willful" or "repeat" violations of its safety or health regulations in the past five (5) years? NOTE: If you have filed an appeal of a citation, and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.
	☐ Yes ☐ No
	If "yes," attached a separate signed page describing the citations, including information about the dates of the citations, the nature of the violation, the project on which the citation(s) was or were issued, the amount of penalty paid, if any. If the citation was appealed to the Occupational Safety and Health Appeals Board and a decision has been issued, state the case number and the date of the decision.
28.	Has the federal Occupational Safety and Health Administration cited and assessed penalties against your firm in the past five (5) years? NOTE : <i>If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.</i>
	☐ Yes ☐ No
	If "yes," attach a separate signed page describing each citation.
29.	Has the EPA or any Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor, in the past five years? NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.
	☐ Yes ☐ No
	If "yes," attach a separate signed page describing each citation.
30.	How often do you require documented safety meetings to be held for construction employees and field supervisors during the course of a project?
31.	List your firm's Experience Modification Rate (EMR) (California workers' Compensation insurance) for each of the past three (3) premium years: NOTE: <i>An Experience Modification Rate is issued to your firm annually by your workers' compensation insurance carrier.</i>
	20: 20: 20:
	If your EMR for any of these three years is or was 1.00 or higher you may, please attach a letter of explanation.
32.	Within the last five (5) years has there ever been a period when your firm had employees but was without workers' compensation insurance or state-approved self-insurance?
	☐ Yes ☐ No
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	Pregualification Questionnaire for Trade Contractors Seeking to Bid on Specialized Work Contracts for JOC 020

worke for les	," please provide a statement by your current workers' compensation insurance carrier that verifies periods of ers' compensation insurance coverage for the last five years. (If your firm has been in the construction business as than five years, provide a statement by your workers' compensation insurance carrier verifying continuous ers' compensation insurance coverage for the period that your firm has been in the construction business.)
Preva	ailing Wage and Apprenticeship Compliance
back v	ere been more than one occasion during the last five (5) years in which your firm was required to pay either vages or penalties for your own firm's failure to comply with the California's prevailing wage laws? NOTE: vuestion refers only to your own firm's violation of prevailing wage laws.
□ Y	es 🗌 No
proje	s," attach a separate signed page or pages, describing the nature of each violation, identifying the name of the ct, the date of its completion, the public agency for which it was constructed; the number of employees who initially underpaid and the amount of back wages and penalties that you were required to pay.
	g the last five (5) years, has there been more than one occasion in which your own firm has been penalized juired to pay back wages for failure to comply with the Federal Davis-Bacon prevailing wage requirements?
□ Y	es 🔲 No
If "ye	
If "ye the power who who who who were also be a second or the second of the second or	roject, the date of its completion, the public agency for which it was constructed; the number of employees were initially underpaid, the amount of back wages you were required to pay along with the amount of any ty paid. The control of the control of the apprenticeship program (approved by the California) and the control of the apprenticeship program (approved by the California).
If "ye the provided the provide	roject, the date of its completion, the public agency for which it was constructed; the number of employees were initially underpaid, the amount of back wages you were required to pay along with the amount of any ty paid. de the name, address and telephone number of the apprenticeship program (approved by the California enticeship Council) from whom you intend to request the dispatch of apprentices to your company for use
If "ye the provided the provide	de the name , address and telephone number of the apprenticeship program (approved by the California enticeship Council) from whom you intend to request the dispatch of apprentices to your company for use y public work project for which you are awarded a contract by <i>the County of Riverside</i> .
If "ye the power who we penal Provide Appre on an If you	roject, the date of its completion, the public agency for which it was constructed; the number of employees were initially underpaid, the amount of back wages you were required to pay along with the amount of any ty paid. The the name, address and telephone number of the apprenticeship program (approved by the California enticeship Council) from whom you intend to request the dispatch of apprentices to your company for use y public work project for which you are awarded a contract by the County of Riverside. The trim operates its own State-approved apprenticeship program: Identify the craft or crafts in which your firm provided apprenticeship training in the past year.
If "ye the power who we penal Provide Appreous and If you (a)	roject, the date of its completion, the public agency for which it was constructed; the number of employees were initially underpaid, the amount of back wages you were required to pay along with the amount of any ty paid. The the name, address and telephone number of the apprenticeship program (approved by the California enticeship Council) from whom you intend to request the dispatch of apprentices to your company for use y public work project for which you are awarded a contract by the County of Riverside. In tirm operates its own State-approved apprenticeship program: Identify the craft or crafts in which your firm provided apprenticeship training in the past year. State the year in which each such apprenticeship program was approved and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s). State the number of individuals who were employed by your firm as apprentices at any time during the
If "ye the provided Appression and If you (a)	reject, the date of its completion, the public agency for which it was constructed; the number of employees were initially underpaid, the amount of back wages you were required to pay along with the amount of any ty paid. The the name, address and telephone number of the apprenticeship program (approved by the California enticeship Council) from whom you intend to request the dispatch of apprentices to your company for use y public work project for which you are awarded a contract by the County of Riverside. Identify the craft or crafts in which your firm provided apprenticeship training in the past year. State the year in which each such apprenticeship program was approved and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s). State the number of individuals who were employed by your firm as apprentices at any time during the past three years in each apprenticeship and the number of persons who, during the past three years,
If "ye the provided Appression and If you (a)	respect, the date of its completion, the public agency for which it was constructed; the number of employees were initially underpaid, the amount of back wages you were required to pay along with the amount of any ty paid. The the name, address and telephone number of the apprenticeship program (approved by the California anticeship Council) from whom you intend to request the dispatch of apprentices to your company for use you public work project for which you are awarded a contract by the County of Riverside. Identify the craft or crafts in which your firm provided apprenticeship training in the past year. State the year in which each such apprenticeship program was approved and attach evidence of the most recent California Apprenticeship Council approval(s) of your apprenticeship program(s). State the number of individuals who were employed by your firm as apprentices at any time during the past three years in each apprenticeship and the number of persons who, during the past three years, completed apprenticeships in each craft while employed by your firm.

If "yes," please explain the reason for the absence of workers' compensation insurance on a separate signed page.

		You may omit reference to any incident that occurred prior to January 1, 1998, if the violation y your firm, as prime contractor on a project, had no knowledge of the violation at the time they red.
	☐ Ye	s 🔲 No
	If "yes,	" provide the date(s) of such findings and attach copies of the Department's final decision(s).
PAR	T III.	COMPLETED CONSTRUCTION PROJECTS
38.	last five Contrac verifiabl	Contractor shall provide information about its six most recently completed public works projects within the (5) years (six (6) for each of the eligible license classifications) under which the license classification etor is seeking pre-qualification for JOC Trade Contracts. Names and references must be current and e. NOTE: The County reserves the right to contact all references provided. Interviews that result in conable reviews are subject to disqualification

<u>Project Reference Form</u> (six projects for each of the eligible license classifications applying for)

License Classification:
Project #1:
Project Name:
Location:
Owner:
Owner Contact (name and current phone number):
Architect or Engineer:
Architect or Engineer Contact (name and current phone number):
Construction Manager:
Construction Manager Contact (name and current phone number):
Description of Project (describe in detail the scope of work performed under the license classification):
Method of Project Delivery (hard bid, JOC, design-build, etc):
Total Value of Construction (including change orders):
Original Scheduled Completion Date:
Time Extensions Granted (number of days):
Actual Date of Completion:
Person to Contact for Interview (must be one of the contacts listed above for the Owner,
Architect, or Construction Manager):

t #2	2:	
Pi	roject Name:	
Lo	ocation:	
0	Owner:	
0	wner Contact (name and current phone number):	
_		
Aı	rchitect or Engineer:	
Aı	rchitect or Engineer Contact (name and current phone number):	
C	construction Manager	
C	construction Manager Contact (name and current phone number):	
D	rescription of Project (describe in detail the scope of work performed under the licens	se classification
_		
M	lethod of Project Delivery:	
To	otal Value of Construction (including change orders):	
0	Original Scheduled Completion Date:	
Ti	ime Extensions Granted (number of days):	
A	ctual Date of Completion:	
Р	erson to Contact for Interview (must be one of the contacts listed above for the Own	er,
	rchitect or Construction Manager):	

Proje	ct Name:
Locat	ion:
Owne	er:
Owne	er Contact (name and current phone number):
Archi	tect or Engineer:
Archi	tect or Engineer Contact (name and current phone number):
0	Annation Management
	truction Manager:
Cons	truction Manager Contact (name and current phone number):
Desc	ription of Project (describe in detail the scope of work performed under the license classification
Meth	od of Project Delivery:
Total	Value of Construction (including change orders):
Origin	nal Scheduled Completion Date:
Time	Extensions Granted (number of days):
Actua	al Date of Completion:
Perso	on to Contact for Interview (must be one of the contacts listed above for the Owner,
	tect. or Construction Manager):

ject #4:	
Project Name:	
Location:	
Owner:	
Owner Contact (name and current phone number):	
Architect or Engineer:	
Architect or Engineer Contact (name and current phone number):	
Construction Manager:	
Construction Manager Contact (name and current phone number):	
Description of Project (describe in detail the scope of work performed under the license	e classification):
Method of Project Delivery:	
Total Value of Construction (including change orders):	
Original Scheduled Completion Date:	
Time Extensions Granted (number of days):	
Actual Date of Completion:	
Person to Contact for Interview (must be one of the contacts listed above for the Owne	er,
Architect, or Construction Manager):	

roject	#5:	
	Project Name:	-
	Location:	-
	Owner:	-
	Owner Contact (name and current phone number):	
	And the descriptions	-
	Architect or Engineer:	_
	Architect or Engineer Contact (name and current phone number):	
		-
	Construction Manager:	-
	Construction Manager Contact (name and current phone number):	
	Description of Project (describe in detail the scope of work performed under the licer	- nse classification):
		-
	Method of Project Delivery:	-
	Total Value of Construction (including change orders):	-
	Original Scheduled Completion Date:	-
	Time Extensions Granted (number of days):	-
	Actual Date of Completion:	-
	Person to Contact for Interview (must be one of the contacts listed above for the Ow	ner,
	Architect, or Construction Manager):	_

oject #6:	
Project Name:	
Location:	
Owner:	
Owner Contact (name and current phone number):	
Analoite et au Engine eu	
Architect or Engineer: Architect or Engineer Contact (name and current phone number):	
Construction Manager:	
Construction Manager Contact (name and current phone number):	
Description of Project (describe in detail the scope of work performed under the licens	e classification):
Method of Project Delivery:	
Total Value of Construction (including change orders):	
Original Scheduled Completion Date:	
Time Extensions Granted (number of days):	
Actual Date of Completion:	
Person to Contact for Interview (must be one of the contacts listed above for the Owne	er,
Architect, or Construction Manager):	