Pursuant to the NC Statute GS143-128.1, 143-135.8 and Wake County Board of Education (BOE) Policy for Prequalification of Bidders for Construction Projects (attached), this form gathers information about the Subcontractor seeking to qualify for the work and provides a general format for the prequalification criteria. Completing this questionnaire does not guarantee prequalification. Evaluation of the submittal shall be performed by the Prequalification Committee in accordance with the statutes and policies.

Prequalification Due Date: **Tuesday 6/13/2023**

Submitted To: **Josh Perina**

 **D.A. Everett Construction Group**

**4131 Parklake Avenue**

**Suite 350**

**Raleigh, North Carolina 27612**

 **P 919-800-9121**

 **jperina@daeverettgroup.com**

 **Name**: Mangum Elementary Renovations

 **Owner**: Durham County Board of Education

 **Location**: 9008 Quail Roost Rd, Bahama, NC 27614

 **Architect:** Moseley Architects

 **Civil Designer:** CLH Design, P.A.

 **Structural Engineer:** Lynch Mykins Structural Engineers

 **PME Engineer:** Moseley Architects

 **Envelope Consultant:** N/A

 **Construction Duration:** Phase 1 HVAC, Electrical, Roofing, and Brick Packages released - 8/15/23.

Brick tuckpointing, roofing and electrical work to be completed during fall/winter break 2023.

 Phase 2 Interior & Exterior phase – Summer 2024

**Advertisement to Bid:** Phase 1 HVAC & Electrical packages released. Brick tuckpointing

 scope. 5/30/2023.

 Phase 2 Interior/Exterior phase – December 2023.

**Bid Date: – Bid dates for each bid package will be provided in bid documents.**

**Performance & Payment Bond: Required for Bid Packages $100,000 or higher**

**Bid Bond: Required for Bid Packages $150,000 or higher**

Project Description:

* Approximately 51,000 sf - Single story elementary school renovation.
* Procurement packages (Phase 1) – HVAC & Electrical packages released. Brick tuckpointing during fall/winter breaks.
* Building Interior/Exterior (Phase 2) – Breezeway Connector Demolition (start demo a few weeks before school ends), Sitework, Paving, Repairs, etc. Doors/Frames/Hardware, complete remaining roof scope, Glass/Glazing, GWB Partitions, Ceilings, Flooring, Toilet Partitions, Kitchen Equipment Installation, plumbing, ETC.

Instructions to Prequalify:

* For questions about this form contact Josh Perina – jperina@daeverettgroup.com (919-800-9121).
* Forms may be submitted electronically via email (one attachment only preferred), mail, fax, or hand delivery to Josh Perina. Please make sure, if submitting handwritten form, that all information is clearly printed.
* The following forms are provided for reference only and are not required to be submitted with prequalification form:
	+ Sample Prequalification Ratings Matrix
	+ Durham County Board of Education Policy for Prequalification of Bidders for Construction Projects.
	+ Prequalification Schedule and Procedures

Bid Packages:

If your firm is interested in prequalifying for this project, please check the box for your trade(s). If multiple bid packages are selected, please make sure that project experiences and references are provided to allow the Prequalification Committee to evaluate your firm for EACH bid package selected. This is a preliminary list of Bid Packages and may change based on response and qualified bidders.

 **Bid Package** **Estimated Dollar Amount Check Box If Bidding**

|  |  |  |
| --- | --- | --- |
| BP1050 – Final Cleaning  | $5,000 |  |
| BP2419 – Selective Structural Demolition | $30,000 |  |
| BP2082 – Asbestos Abatement  | $10,000 |  |
| BP4012 – Masonry | $30,000 |  |
| BP5000 – Misc. Metals  | $50,000 |  |
| BP6410 – Architectural Wood Casework  | $15,000 |  |
| BP7250 – Fireproofing | $10,000 |  |
| BP7450 – Roofing | $400,000 |  |
| BP7920 – Joint Sealants  | $10,000 |  |
| BP8113- Doors, Frames & Hardware | $45,000 |  |
| BP8800 – Glazing | $200,000 |  |
| BP9290 – Gypsum Board and Framing | $40,000 |  |
| BP9300 – Tiling | $20,000 |  |
| BP9650 – Resilient Flooring & Base | $70,000 |  |
| BP9510 – Acoustical Ceilings | $20,000 |  |
| BP9910 – Painting | $25,000 |  |
| BP1005 – Plastic Toilet Compartments and Accessories | $15,000 |  |
| BP1010 – Signage | $3,500 |  |
| BP1015 – Visual Display Boards | $20,000 |  |
| BP1140 - Food Service Equipment | $100,000 |  |
| BP1220 – Horizontal Louver Blinds  | $10,000 |  |
| BP2200 – Plumbing | $175,000 |  |
| BP2300 – HVAC | $425,000 |  |
| BP2600 – Electrical | $1.25 Million |  |
| BP3100 – Sitework, Paving, & Utilities | $1.1 Million |  |
| BP3213 – Site Concrete | $1.25 Million |  |
| BP3231 – Fences & Gates | $350,000 |  |
| BP3290 – Landscaping | $150,000 |  |

# Prequalification Submittal Date:

**Submitted to:** \_ *(Name of CM at Risk firm)*

# Main Office Location & Company Contacts

Company Name

Physical Address

Mailing Address

City/State Zip Code + 4

( ) ( )

Phone number Fax number

President/CEO CFO

Primary Prequalification Contact Name Primary Prequalification Contact Phone Number

Primary Prequalification Contact Email Address Company Website

Secondary Prequalification Contact Name Secondary Prequalification Contact Phone Number

Secondary Prequalification Contact Email Address

# Business Type

(check box) ◻ Corporation ◻ Partnership ◻ Limited Liability Company ◻ Sole Proprietor

Indicate your NC Statewide Uniform Certification: (check box):

* MBE ◻ HBE ◻ AABE ◻ AIBE ◻ WBE ◻ SDB ◻ DBE ◻ NONE (other) See website link for more information: <http://www.doa.nc.gov/hub/swuc.htm>

Is your firm registered with the Department of the Secretary of State to conduct business in the State of North Carolina?

* Yes ◻ No

Is your firm owned or controlled by a parent or any other organization? ◻ Yes ◻ No Describe Ownership if Yes:

Confirm that your company can demonstrate compliance with insurance coverages which meet or exceed the minimum requirements. ◻ Yes ◻ No

List all other names and years of operation that your firm has operated under for the past five (5) years:

# Licensing Information

(Please provide all North Carolina professional licenses required for you to perform your services.)

**NC License Type** (check box) ◻ General Construction ◻ Electrical ◻ Mechanical ◻ Plumbing

* Fire Protection ◻ Other (Trade Specific License)

 **NC License number/name of licensee** **License Limit/Level**

Has any license ever been denied or revoked? ◻ Yes ◻ No If yes, please describe why,

# Type of Scope Performed, Average project size (in terms of revenue), Largest project size (in terms of revenue)

*List all Scopes of Work for which you would request prequalification review in the upcoming year (Bid Packages):*

*For Each Scope of Work list the following with values from the last 5 years. (Provide references upon request of the CM)*

*Scope #1: Percentage of Self Performed Work:*

*Average project size ($): Largest Project Size ($):*

*Scope #2: Percentage of Self Performed Work:*

*Average project size ($): Largest Project Size ($):*

*Scope #3: Percentage of Self Performed Work:*

*Average project size ($): Largest Project Size ($):*

*Scope #4: Percentage of Self Performed Work:*

*Average project size ($): Largest Project Size ($):*

*Scope #5: Percentage of Self Performed Work:*

*Average project size ($): Largest Project Size ($):*

*Scope #6: Percentage of Self Performed Work:*

*Average project size ($): Largest Project Size ($):*

*Indicate your two* ***largest*** *completed projects in the last 5 Years per scope. If submitting for multiple scopes, submit multiple sheets.*

|  |  |
| --- | --- |
| **#1 –Completed - Project Name** |  |
| Description of Work Performed |  |
| Contract Delivery Method (CMAR or GC?) |  |
| Owner Name/ Representative |  |
| Architect Name/Representative |  |
| GC or CM Name/Representative |  |
| GC or CM Address/Phone #/Email |  |
| Lost Man-hours due to Accident |  |
| Final Contract Dollar Value |  |
| HUB % Achieved (on Contract Value) |  |
| Date Complete |  |

|  |  |
| --- | --- |
| **#2 –Completed - Project Name** |  |
| Description of Work Performed |  |
| Contract Delivery Method (CMAR or GC?) |  |
| Owner Name/ Representative |  |
| Architect Name/Representative |  |
| GC or CM Name/Representative |  |
| GC or CM Address/Phone #/Email |  |
| Lost Man-hours due to Accident |  |
| Final Contract Dollar Value |  |
| HUB % Achieved (on Contract Value) |  |
| Date Complete |  |

# Size of Company

List the annual dollar value of billings the company has performed for each year over the last (5) five fiscal years (most recent Y/E listed first).

Year #1 (20 ) - $

Year #2 (20 ) - $

Year #3 (20 ) - $

Year #4 (20 ) - $

Year #5 (20 ) - $

# Current Workload

Number of active projects that your company is presently working on -

Remaining revenue to earn (backlog) on active projects - \_

Attach updated Bonding letter from your Surety if anticipated Bid Package will exceed $300,000. Letter shall be dated within the last 30 days. Have you attached a surety letter?  Yes  No

# Safety

List your company’s Experience Modification Rate (EMR) for past five years. Refer to Supplemental information, Item 4 for Insurance Carrier letter supporting Present Rate EMR.

Present Rate Last Rate Year before rate Year before rate Year before rate If any year your rate is over 1.00 please explain why:

List your company’s Recordable Incident Rate (RIR) for past five years:

Present Rate Last Rate Year before rate Year before rate Year before rate List your company’s Days Away Restricted or Transferred Rate (DART) for past five years:

Present Rate Last Rate Year before rate Year before rate Year before rate

List any OSHA fines and Jobsite fatalities in the past five (5) years. Please attach OSHA report describing the incident:

Does your company have a dedicated safety individual who inspects job sites on a regular base? If yes, please provide name and contact information for this individual:

Does your company have a Written Safety Program and Plan in compliance with current OSHA requirements for your scopes of work (Y/N):

Does your company provide weekly training to your on-site employees (Y/N):

Does your company perform weekly safety inspections on the jobsite? (Y/N):

# Litigation, Claims, Criminal Convictions & Administrative Actions

Has your company filed any claims against a CM at Risk or General Contractor within the last five years, whether

resolved or still pending resolution? ◻ Yes ◻ No If yes, state the project name(s), year(s), and reason why:

Has your company been involved in any judgments, arbitration or mediation proceedings, or suits within the last five years, whether resolved or still pending resolution? ◻ Yes ◻ No If yes, state the project name(s), year(s), case number and reason why:

Has your company ever failed to complete work awarded to it or has your company’s work been supplemented by a CMAR or GC? ◻ Yes ◻ No If yes, please provide project name(s), year(s), and reason why:

Have you ever paid liquidated damages on any project? ◻ Yes ◻ No If yes, state the project name(s), year(s), and

reason why. \_

Has your bonding company had to take any of the following actions in the last 10 years: Project technical support, Payments to vendors, Supplement work on a contract, or complete a contract for your company? ◻ Yes ◻ No

If yes, state the project name(s), year(s), and reason why.

 \_

Has a Bid Bond ever been collected upon on a project your company bid in the last 5 years? ◻ Yes ◻ No

If yes, state the project name(s), year(s), and reason why.

 \_

Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging? ◻ Yes ◻ No If yes, state the project name(s), year(s), and reason why.

Has your present company, its officers, owners, or agents ever been barred from bidding public work in North Carolina?

* Yes ◻ No If yes, state the project name(s), year(s), case number and reason why.

# Historically Underutilized Business (HUB) Plan

# Does the company currently have a documented plan for engaging subcontractor participation from Historically Underutilized Businesses? ◻ Yes ◻ No If yes, please attach your company’s HUB plan.

# Information

**10.a.** Name of Project Advertised: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10.b.** Subcontractor Full Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 1.b.1 Primary Contact Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.b.2 Primary Contact Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.b.3 Primary Contact email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10.c.** Check the Boxes on the Attached Exhibit 1 (Listing of Bid Packages) to indicate which Bid Packages this Subcontractor is requesting to Prequalify for on this Project and return with Prequalification Part B.

**10.d.** Does Subcontractor intend to Partner or Joint Venture with another Subcontractor for this Project:  Yes  No

If yes, list the Companies involved and their applicable participating percentage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Project Specifics

**11.a.** The assigned project superintendent for this project shall be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Include a resume. Have you included a resume?  Yes  No

**11.b**. Experience of the superintendent on this specific type of project is: \_\_\_ 0-2 \_\_\_ 3-4 \_\_\_ 5-10 \_\_\_ >10 years.

**11.c.** The assigned project manager for this project shall be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Include a resume. Have you included a resume?  Yes  No

**11.d**. Experience of the project manager on this specific type of project is: \_\_\_ 0-2 \_\_\_ 3-4 \_\_\_ 5-10 \_\_\_ >10 years.

**11.e.** List three (3) current or completed projects of similar type which most closely reflects the size and complexity of the type of work being requested for the currently proposed project within the last 5 years.

**11.f.** Labor Resources for this project

3.f.1 What is total number of craft employees does Subcontractor employee for Bid Packages requesting:

 3.f.1.a = supervisors and foreman = \_\_\_\_\_\_\_\_\_each

3.f.1.b = skilled tradesman = \_\_\_\_\_\_\_\_\_each

3.f.1.c = unskilled tradesman = \_\_\_\_\_\_\_\_\_each

3.f.2 What is percentage of anticipated self-perform work with own forces vs. subcontracting to lower tiers: \_\_\_\_% self-perform with inhouse labor; \_\_\_\_% to outsource ready labor; \_\_\_\_% lower tier subcontract;



# Signature

By signing this document, you are acknowledging that all answers are true to the best of your knowledge. **Any answers found to be falsified will ban you from being prequalified for projects.**

Signature Date

Printed Name and Title

# Required Supplementary Information that needs to be included at the same time the prequalification form is submitted.

* 1. Your most recent CPA audited or reviewed financial statements.
	2. Bonding Letter from your Surety Company listing single and aggregate bonding limits and what bonding capacity that is available.
	3. A current Certificate of Insurance listing all insurance policies.
	4. Letter from Insurance carrier stating last five years of EMR ratings.
	5. The last five years of your OSHA 300A report
	6. Copy of HUB Certification (if Applicable)
	7. Copy of Professional Licenses (If Applicable)

***Note:***

***All pieces of supplementary information shall be provided. If they are not, then the prequal is deemed incomplete and may be rejected. If for some reason you are unable to provide one of the items listed above, please explain below.***

1. **Scoring Matrix**

CM at Risk Subcontractor scoring Matrix

