

**INTENT TO PARTICIPATE IN BOND WAIVER PROGRAM
BID AFFIDAVIT**

PROJECT NUMBER: _____

If the contractor intends on participating in the Bond Waiver Program, this form must be completed in its entirety and returned with the Contractor's bid.

FAILURE TO COMPLETE THIS FORM OR INCLUDE A BID SECURITY FOR PROJECTS WITH VALUES BETWEEN \$50,000 AND \$200,000, SHALL RESULT IN REJECTION OF YOUR BID.

_____ (Name of Bidder) hereby states that it intends on participating in the Bond Waiver Program as described in Palm Beach County Resolution R-89-1178 and Palm Beach County Policies and Procedures.

Signature of Contractor

Title

State of _____ County of _____

Subscribed and Sworn to (or affirmed) before me on this _____ day of _____,
20_____, by _____ who is personally known to me or has
presented _____ (type of identification) as
identification.

Notary Public Signature and Seal

Print Notary Name and Commission Number

CONTRACTOR QUALIFICATION FORM

Contractor: _____

Contact Person: _____

Address: _____

Phone No.: _____

Fax No.: _____

Email: _____

I. CONTRACTOR'S BUSINESS INFORMATION

Check if:

- Corporation Joint Venture LLC
 Partnership Sole Proprietorship

Has your firm or any of its principals ever filed for Bankruptcy? Yes No

If yes, attach a full explanation of the circumstances including date filed, case number and current status.

If Corporation:

State and Date of Incorporation: _____

Name Incorporated Under: _____

Name and Title of Officer(s): _____

If Partnership:

State and Date of Organization: _____

Name of all Partners: _____

Type of Partnership:

General

Publicly Held

Limited

Other (describe) _____

List all Subsidiaries or Holding Companies:

If Joint Venture:

State and Date of Organization: _____

Name, address, and form of organization of joint venture partners. The percentage of the joint venture responsibility is to be shown for each partner. Submit evidence of joint venture's current certification and license number.

If joint venture has not received license as a joint venture, proof that an application has been submitted to the Department of Professional Regulation for licensure must be included with the pre-qualification questionnaire. Proof of receipt of appropriate license as a joint venture will be required at the time of Bid Opening. Failure to produce a valid license at the time of Bid Opening may result in the Bid being considered non-responsive.

If Sole Proprietorship or LLC:

State and Date of Organization: _____

Name of address of all Owner(s): _____

II. INSURANCE REQUIREMENTS

Furnish to the Department certificates of insurance evidencing the existence of current valid, and binding insurance policies for the limits and coverage in accordance with the requirements delineated in the General Conditions, where such insurance is to be provided by Contractor, or as otherwise modified within the Contract Documents, together with a declaration of deductible amounts applicable to each type of insurance provided, acceptable to the County.

III. EXPERIENCE

- A. Attached Schedule A listing a minimum of three (3) of the largest projects completed within the last two (2) years where a project was completed by your firm.
- B. Attach Schedule B listing all current projects that are over \$5,000.00 (Five Thousand Dollars) value contract amount and are active by your firm. Use this form to show all previous work performed for Palm Beach County, or any other municipality in the past five (5) years.
- C. Attach Schedule C stating Key Personnel job experience and role assumed when working on County projects.

IV. LITIGATION

- A. List any current and pending litigation, arbitration and/or administrative proceedings initiated by or brought against your firm or qualifying agent(s) within the last (10) years as a result of related matters, including but not limited to liens, delays, defective performance or workmanship. Said information must include project name, presiding court, plaintiff and defendant, and case number.
- B. List any judgments for or against your firm(s) during the past five (5) years involving litigations with an Owner regarding construction matters including, but not limited to, mechanics liens, warranty, delay, negligence, or bonds. State project name and location, judgment amount, presiding court, plaintiff, defendant, and case number.

V. FINANCIAL

Provide a list with name, address and telephone number of the firm's principal banking institution, and include three (3) business-related credit references.

VI. ACCOUNTING AND FINANCIAL REPORTING

Federal Tax ID No.: _____

Social Security No. (if bidding as a proprietorship): _____

Provide one of the following forms of financial information:

- A. Annual compiled Financial Statements for the most recent fiscal year.

Preparer's Name: _____

Preparer's Address: _____

Preparer Phone No.: _____

Preparer Fax No.: _____

CPA Other (describe) _____

Public Accountant

How many years has the firm prepared your financial statements? _____

How many years has the firm prepared your tax returns? _____

The statement is prepared: Partially audited Fully audited (unqualified)

Review basis Compilation basis

Are interim statements prepared? Yes No

If yes, how often? Monthly Quarterly Semi-Annually

Basis of preparation, if different than fiscal. _____

Have your operations been profitable since the last statement date? Yes No

Are taxes current: Yes No Any tax liens? Yes No

Have there been any major changes in your financial condition since last statement date

with respect to:

Ownership Major loans or refinancing

Withdrawals Major equipment Purchases or leases

Other (describe) _____

If so, describe: _____

B. Verification of a line of credit equivalent to 30% of the contract amount from an acceptable financial institution. An acceptable institution is one which has a minimum "peer group" rating of 50 in the latest Thomson Reuters Bank Insight Quarterly Listing, or a minimum rating of 125 in the latest IDC Bank Financial Quarterly Listing.

C. An acceptable Dunn & Bradstreet rating.

In accordance with Florida Statute 119.07(3), any financial statement which the County requires a prospective bidder to submit, in order to pre-qualify for bidding or for responding to a proposal for a road or any other Public Works project, is confidential and exempt from the provisions of the Florida Public Records Statute.

D. Letter from Contractor's Surety attesting to bidder's bonding capacity.

E. Pre-qualification letter from another government entity.

VII. LICENSURE

A. List one or more of your firm's current licenses, as follows:

LICENSE NUMBER	ISSUING AGENCY
_____	_____
_____	_____
_____	_____
_____	_____

B. List and attach copies of all licenses (including those listed above, in VII. A.) and certificates of competency possessed by key members of the firm including the qualifying agent(s).

VIII. REGULATORY FINES

A. List any current and pending regulatory fines, arbitration and/or administrative proceedings initiated by or brought against your firm or qualifying agent(s) within the last ten (10) years, including but not limited to liens, delays, defective performance or workmanship. Said information must include project name, presiding court, case number, names of regulatory agency and defendant.

B. List any regulatory judgments for or against your firm(s) during the past five (5) years involving a regulatory agency. State project name and location, action, judgment amount, presiding court, case number, names of regulatory agency and defendant.

CERTIFICATION:

STATE OF _____

COUNTY OF _____

I, the undersigned authority, hereby certify that the information submitted herewith, including any attachment hereto, is true and accurate to the best of my knowledge and belief under perjury of law.

By:

Print Name

Signature

Title

Date

Witness:

Print Name

Signature

Date

State of _____ County of _____

Subscribed and Sworn to (or affirmed) before me on this _____ day of _____, 20____, by _____ who is personally known to me or has presented _____ (type of identification) as identification.

Notary Public Signature and Seal

Print Notary Name and Commission Number

MINIMUM CRITERIA TO BE USED IN PRE-QUALIFYING CONTRACTORS

I. CONTRACTOR'S BUSINESS INFORMATION

No Minimum Criteria as to type of business is required other than possessing the requisite licensure as provided by Section 287.055, Florida Statutes and local regulations to perform the specific work required by these documents.

II. INSURANCE

Must provide evidence of required insurance.

III. EXPERIENCE

A Submit experience records demonstrating a minimum of five (5) years experience as a Contractor.

IV. LITIGATION

The firm(s) must:

A. Not be involved in current or pending litigation which is likely to have a material negative impact on their ability to execute this project.

B. Not display an undesirable pattern of construction related litigation with project Owners.

V. FINANCIAL

The firm(s) must provide evidence of adequate financial stability and resources to execute the work.

VI. LICENSURE

The firm must possess a valid License pursuant to Florida Statute Chapter 489.

VII. REGULATORY FINES

The firm(s) must:

A. Not be involved in current or pending litigation which is likely to have a material negative impact on their ability to execute this project.

B. Not display an undesirable pattern of regulatory judgments.

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

Request for Qualifications (RFQ)

Schedule A: Relevant Project Experience

Note: Please provide one (1) form Schedule A per project. Include at least the three (3) largest projects completed in the last two (2) years. Duplicate form as necessary.

Project Title: _____

Project Type: _____

Location: _____

Total Dollar Value: _____

Scheduled State Date	Scheduled Completion Date	Actual Completion Date
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_____	_____	_____
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Name: _____

Address: _____

Phone: _____

Other contacts (specify name, organization, address, and phone number):

Brief description of project scope and type of work:

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS
Request for Qualifications (RFQ)

Schedule C: Key Personnel

Note: Attach a copy of the resume for each key personnel. Duplicate form as necessary.

Name: _____

Proposed Role: _____

Years of experience performing in a similar role: _____ Locally available: Yes No

Years with your organization: _____ Number of hours employed weekly: _____

Educational background/Special Training/Certifications/Licenses: _____

Experience: Describe experience, **list** projects performed where key personnel had a similar role as that proposed. Indicate the name of the project, the dollar value of the project, owner, and brief description of role in the project. Attach additional sheets as necessary.

Project: _____

Owner: _____ Contract Dollar Amount: _____

Description of role in project: _____

Project: _____

Owner: _____ Contract Dollar Amount: _____

Description of role in project: _____

**NOTICE TO SUBCONTRACTORS/SUPPLIERS
THAT PROJECT IS NOT BONDED**

To: Palm Beach County, _____ Department, _____ Division

Re: Project No. _____ Project Name: _____

I, _____ in my capacity as _____
Representative of Subcontractor/Supplier *Title*

Hereby acknowledge receipt of notice from _____ that
General Contractor

this project is being performed under Palm Beach County's Bond Waiver Program. I understand that the General Contractor is not required to obtain a payment bond. It is also understood that if the General Contractor fails to make appropriate periodic payments to any Subcontractor/Supplier, that Subcontractor/Supplier should notify the Palm Beach County contracting Department/Division in writing of the non-payment indicating the project number, title, and amount owed.

If one or more notices are received on any one project, the contracting Department/Division may withhold payment to the General Contractor until the payment(s) in question is/are made, and proof of such payment is submitted to the contracting Department/Division.

Subcontractor/Supplier:

Name: _____

Title: _____

Company: _____

State of _____ County of _____

Subscribed and Sworn to (or affirmed) before me on this _____ day of _____,
20__, by _____ who is personally known to me or has presented
_____ (type of identification) as identification.

Notary Public Signature and Seal

Print Notary Name and Commission Number

JOINT CHECK DISBURSEMENT

Date: _____

Re: Project No. _____

Project Name: _____

TO APPLY TO ESTIMATE NO. _____, 20__

_____, Prime Contractor for the above-referenced contract, and _____, Subcontractor/Supplier to the above Prime Contractor, are in agreement that a Joint Check made out in both company names in the amount of \$ _____ may be issued to the County.

Prime Contractor

Subcontractor/Supplier

**SUMMARY
JOINT CHECK DISBURSEMENT**

Date: _____

Re: Project No. _____

Project Name: _____

TO APPLY TO ESTIMATE NO _____, 20____

_____ Prime Contractor	_____ Amount
_____ Subcontractor/Supplier	_____ Amount
_____ Subcontractor/Supplier	_____ Amount
_____ Subcontractor/Supplier	_____ Amount
	_____ Total Amount