

**INTENT TO PARTICIPATE IN BOND WAIVER PROGRAM**

**BID AFFIDAVIT**

PROJECT NUMBER: \_\_\_\_\_

If the contractor intends on participating in the Bond Wavier 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**

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
----------------------	---------------------------	------------------------

_____	_____	_____
-------	-------	-------

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 B: Current Status**

List all current projects over a Five Thousand Dollar (\$5,000.00) amount that are active by your firm. If you have done work for Palm Beach County in the past five (5) years, or another municipality, use this form to show that work, regardless of the dollar amount. Duplicate form as necessary.

Project Title \_\_\_\_\_

Dollar Amount \_\_\_\_\_

Work Type \_\_\_\_\_

Start Date \_\_\_\_\_

Completion Date \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_

**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