

BIDDER’S QUALIFICATION AND EXPERIENCE STATEMENT

The OWNER will require supporting evidence regarding Bidder’s Qualifications and competency. The Bidder will be required to furnish all of the applicable information listed below, which must be submitted with the sealed Bid at the time of Bid Opening. The Qualifications and Experience Statement must be typewritten and signed in ink.

A fill-in-the blank version of this form is available for your convenience on the City of Novi’s website (www.cityofnovi.org) under Forms & Permits/Engineering.

QUALIFICATIONS AND EXPERIENCE STATEMENT

The undersigned certifies under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

Submitted to: _____

Address: _____

Submitted by: _____

Name: _____

Address: _____

City, State, ZIP _____

Telephone Number: _____ Fax Number: _____

Principal Office: _____

Corporation: _____ Joint Venture: _____

Partnership: _____ Other: _____

Individual: _____

Name of Project: _____

Type of Work (file separate form for each classification of work):

General: _____ Plumbing: _____

HVAC: _____ Electrical: _____

Other: _____ (Please Specify)

[Engineer to modify list of applicable trades experience, tailored to requirements of the project.]



Organization

How many years has your organization been in business as a CONTRACTOR?

How many years has your organization been in business under its present business name?

Under what other business names has your organization operated?

If your organization is a corporation, answer the following:

Date of Incorporation: _____

State of Incorporation: _____

President's Name: _____

Vice President's Name: _____

Secretary's Name: _____

Treasurer's Name: _____

If your organization is a partnership, answer the following:

Date of Organization: _____

Type of Partnership: _____

Names of General Partners: _____

If your organization is individually owned, answer the following:

Date of Organization: _____

Name of OWNER: _____

If the form of your organization is other than those listed above, describe it and name the principals:



Licensing

List jurisdictional and trade categories in which your organization is legally qualified to do business, and indicate registration or license numbers, if applicable:

List jurisdiction in which your organization’s partnership or trade name is filed:

Experience

List the categories of work that your organization normally performs with its own forces:

On a separate sheet, list major construction projects your organization has in progress. List the name of project, owner, architect/engineer, contract amount, percent complete, and scheduled completion date.

On a separate sheet, list the major construction projects your organization has completed in the past five (5) years. List the name of the project, owner, architect/engineer, contract amount, date of completion, and percentage of the cost of the work performed with your own forces.

On a separate sheet, list the construction experience and present commitments of the key individuals of your organization who would be employed in the Work.

Claims and Suits

If the answer to any of the questions below is yes, please attach details.

Has your organizations ever failed to complete any work awarded to it? _____

Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or officers? _____



Has the City of Novi filed a claim on any contract within the prior three years which asserted that your organization:

1) failed to perform as required by the contract?

_____ YES _____NO

2) completed contracted work in an untimely manner causing delays and interference;

_____ YES _____NO

3) lacked financial resources and the ability to satisfactorily perform the contract or provide the services or supplies;

_____ YES _____NO

4) exhibited poor quality of performance or completed work under the contract;

_____ YES _____NO

5) failed to comply with laws and ordinances relating to the contract performance;

_____ YES _____NO

6) defaulted on its quotations or prices;

_____ YES _____NO

References

Entity	Contact Name	Phone
<i>Trade References</i>		
1.		
2.		
3.		
<i>Bank References</i>		
1.		
2.		
3.		
<i>Surety</i>		



Name of Bonding Company: _____

Name of Bonding Agent: _____

Address of Bonding Agent: _____

SUBMITTED on _____
Date*

BY: _____
Name of Bidder*

Signature

Name and Title of Signatory*

*Typed or printed in ink.

_____ being duly sworn deposes and says that the information provided herein is true and sufficiently complete so as not to be misleading.

Subscribed and sworn before me this _____ day of _____ 20____.

Notary Public: _____

My Commission Expires: _____

IF THIS INFORMATION IS NOT SUBMITTED WITH THE SEALED BID AT THE TIME OF BID, THE BID WILL BE CONSIDERED INCOMPLETE.

