**PRE-QUALIFICATION**

**BIDDER PRE-QUALIFICATION REQUIREMENT**

All bidders on this project must pre-qualify with the Construction Manager/Contractor (Riley Palmer Construction Co., Inc.). Pre-qualification forms are available at the office of Riley Palmer Construction Company, Inc., 1208 Hays Street, Tallahassee, Florida, 32301, Phone: (850) 656-6161.

(To request form by e-mail, please send request to: a.knowles@rileypalmerconstruction.com)

Submit Pre-qualification Forms to:

Home Office

Riley Palmer Construction Company, Inc.

Attn.: Pre-qualification Form B.P. #: (insert B.P.#)

Post Office Box 12668

Tallahassee, Florida 32317

Fax #: (850) 656-1883

**RILEY PALMER CONSTRUCTION COMPANY, INC.**

**TRADE CONTRACTOR PRE-QUALIFICATION FORM**

**PROJECT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date:** |  | **Bid Package #:** |  |
| **B.P.. Description:** |  |
| **GENERAL FIRM INFORMATION** |
| **Firm Name:** |  |
| **Street Address:** |  |
| **Mailing Address:** |  |
| **City:** |  | **State:** |  | **Zip Code:** |  |
| **Phone #:** |  | **Fax #:** |  |
| **Contact Name:** |  | **email:** |  |
| **FIRM HISTORY** |
| **Type of Work:** |  |
| **Florida License #:** |  | **Dunn & Bradstreet Rating:** |  |
| **Yrs Performing:** |  | **% performed by own forces:** |  |
| **# Perm Employees:** |  | **Value of equipment owned:** |  |
| **List work typically performed by firms employees:** | **List portion of work typically subcontracted to others:** |
|  |  |
|  |  |
|  |  |
| **Has your firm ever:** | **yes** | **no** |
| **Failed to complete a project?:** |  |  |
| **Failed to meet the GC/CM project schedule?:** |  |  |
| **Been accessed back charges for project delays?:** |  |  |
| **(Or any principle of this firm) Been involved in bankruptcy or reorganization?:** |  |  |
| **Pending judgments, claims or suit against this firm?:** |  |  |
| **If the answer to any of the preceding questions is yes, please elaborate below:** |
|  |
|  |
|  |
| **TRADE CONTRACTOR PRE-QUALIFICATION FORM (continued)** |
| **FINANCIAL INFORMATION:** |
|  **($) Value of work completed in the last three (3) years:** |  |
| **($) Value of work completed last year:** |  |
| **($)Value of work currently under contract:** |  |
| **($) Value of projects under contract and not yet started:** |  |
| **Bank:** |  | **Contact:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |
| **BONDING & INSURANCE INFORMATION** |
| **Bonding limit per project:** |  |
| **Total aggregate bonding capacity:** |  |
| **Value of work presently bonded:** |  |
| **Surety:** |  | **Agent:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |
| **Insurance Co.:** |  | **Agent:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |
| **GENERAL**  |
|  | **yes** | **no** |
| **Is this firm compliance with EEO requirements?** |  |  |
| **Does this firm have a written safety program?** |  |  |
| **Does this firm have a written hazardous communication program?** |  |  |
| **Has this firm been cited by OSHA within the last three (3) years?** |  |  |
| **If so, what was the citation for:** |
|  |
|  |
| **Is this firm a Minority Business Enterprise?** |  |  |
| **If so, with whom is this firm certified with:** |
|  |
|  |
|  |
| **TRADE CONTRACTOR PRE-QUALIFICATION FORM (continued)** |
| **REFERENCES** |
| **Major Material Supplier:** |
| **Company:** |  | **Contact:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |
| **Major Material Supplier:** |
| **Company:** |  | **Contact:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |
| **General Contractor (Within the last Year)** |
| **Project:** |  | **Contract Value:** |  |
| **Company:** |  | **Contact:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |
| **General Contractor (ACTIVE PROJECT)** |
| **Project:** |  | **Contract Value:** |  |
| **Company:** |  | **Contact:** |  |
| **Address:** |  | **Phone #:** |  |
| **City:** |  | **State/Zip:** |  |

**ATTACHMENTS:**

Financial Statement ***(\*\*FURNISH ONLY IF REQUESTED)***

 ■ A currently certified financial statement is preferable.

 ■ Date of statement or balance sheet:

 ■ Firm preparing statements:

***I hereby certify that the above information is true and complete to the best of my knowledge.***

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Officer of the firm

Name & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_