

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

INSTRUCTIONS

Introductory Statement:

In accordance with the statutes of the State of Oregon, every public contracting agency contemplating receiving bids for and awarding any contract for a public improvement may require any prospective bidder (herein refer to as applicant) to submit a full and complete statement concerning their equipment and experience in constructing public improvements. The City of Astoria adopted a mandatory prequalification process for bidding public improvement projects per Resolution No. 06-07, approved on March 6, 2006.

The application and questionnaire forms which are bound herewith comply with the requirements of public contracting rules and must be used in determining the qualifications of applicants and in assigning limits as to the size and kinds of projects for which the applicant may submit bids.

The applicant should use care and integrity in preparing this information. The City of Astoria may make independent inquiries concerning the contractor's past performance and/or capabilities. Additional documentation may be required by the public contracting agency.

Manner of Preparing and Filling in Forms:

This application shall include equipment and experience information for only the specific single business organization or entity which is applying for prequalification and which would be the signatory on a contract with the public contracting agency.

All answers and other entries on the forms, except signatures, should be printed. To make this possible, a fillable PDF is available on the City of Astoria website. It shall be the responsibility of the applicant to return all pages whether applicable or not. Failure to do so may be grounds for rejection. All answers and entries shall be specific and complete in detail.

A new applicant prequalifying, a prequalified applicant who wishes to add a new class or classes or work in which they have not been previously prequalified, or an applicant whose company's prequalification has lapsed for longer than six months, must provide at least three references for each new Class of Work. Project(s) for references must have been completed within the prior five years. The Reference Form may be found at the end of this Prequalification Application.

An applicant must demonstrate that they possess an unexpired certificate, issued by the Oregon Department of Administrative Services in accordance with ORS 279A.167.

The prequalification application shall be signed by the applicant and sworn to as the form indicates. The signatory of the statement guarantees the truth and accuracy of all statements and of all answers to questions.

Use of Attachments:

Schedules, reports and other forms of prequalification statements may be used as attachments to the prescribed form, provided that the information contained therein specifically includes the information required by this form.

Place of Submission:

Prequalification applications and W-9 shall be submitted to:

City of Astoria
City Engineer
1095 Duane Street
Astoria, OR 97103

Time of Submission:

Applications for a specific project are generally required to be submitted at least seven (7) working days prior to the bid opening. Check bid requirements as this may vary.

Continued

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

Appeal Due to Denial, Disqualification, Revision or Revocation of Prequalification:

Per ORS 279B.125, ORS 279C.455, any applicant who wishes to appeal a decision shall, within three (3) business days after receipt of notice of disqualification, notify the Public Works Director, City Manager or City Council, acting as the local contract review board, that the applicant appeals the disqualification and demands a hearing.

Notification of Action Taken:

The applicant will be notified within thirty (30) days of receipt of prequalification application, in writing, of the action on their application. Applicant will then be allowed to bid on such projects as are within the limits of size and kind of work for which applicant has been declared qualified.

Period During Which a Qualified Applicant Remains Qualified:

An applicant who has been notified of prequalification for projects of a given size and kind will remain qualified for a period of one (1) year from the date of the written notice of approval. The public contracting agency may limit prequalification approval to individual public improvement projects. Unless such applicant is otherwise notified by the public body, the applicant will be permitted to submit bids for any and all projects of said kind and size for which bids are to be received. The public body may from time to time require new or revised prequalification applications and have them approved prior to allowing a bid.

Requirement of Continuing Prequalification:

Applicants who have once been qualified with an agency requiring prequalification and who desire to maintain an uninterrupted prequalification standing are required to submit a new application periodically. Applicants who are currently qualified may renew their prequalification by written request if the information and conditions provided with the application have not changed. Uninterrupted prequalification is contingent upon favorable action on the application. A prequalification may be revoked under the provisions of ORS 279C.430(4).

Changes:

Requests for revision of the prequalification standing of any applicant will be considered whenever the applicant can make a showing of materially improved ability, but not more often than once in three months. Major changes must be submitted by a new prequalification application. If the changes are minor, such changes may be requested in letter form to the public contracting agency. Minor changes involve, but are not limited to, company name, adding or deleting classes of work.

With or without a request from a prequalified applicant, the prequalification limitation on class of work or size of project may be reviewed and increased or decreased as found appropriate. The prequalified applicant will be notified in writing of any such revision.

Confidential Information:

If information provided herein is considered exempt from disclosure under either ORS 192.345(2) or ORS 646.461(4), or other grounds specified in Oregon Public Records Law, ORS 192.311 through ORS 192.478, clearly designate the portions which the applicant claims are exempt from disclosure, along with a justification and citation to the authority relied upon. Entire records or documents should not be designated as a trade secret or otherwise exempt from disclosure; only specific information within a record or document should be so designated. Contents of the application will not be disclosed to the public except upon the written order of the person or persons furnishing the same or upon an appropriate order of a court of competent jurisdiction.

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

Application Information

Application Submission Date		Date Received by City	
Person Preparing Application			
Title			
Phone		Email	

This Contractor's Prequalification Application is submitted with the following purpose (check one):

<input type="checkbox"/> General Prequalification Application	<input type="checkbox"/> This is a Prequalification Application for a specific project:	
General prequalification period expires one year from the date of the Notice of Approval:	Project Name	
	Bid Opening	
	<i>Application must be completed in its entirety and received no less than seven working days prior to a bid opening.</i>	

Company Information

Registered Company Name <i>Should Match W-9</i>		
Physical Address <i>No P.O. Boxes</i>		
Mailing Address		
Phone Number		
Fax Number		
Email Address		
Business Structure <i>(Check One)</i>	<input type="checkbox"/> Individual Sole Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Member of Joint Venture (JV) <input type="checkbox"/> Limited Liability Partnership (LLP) <input type="checkbox"/> Assumed Business Name (ABN)	<input type="checkbox"/> General Partnership <input type="checkbox"/> Joint Venture (JV) <input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Limited Partnership (LP) <input type="checkbox"/> _____

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR’S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

1 For each Class of Work, indicate in the corresponding column: (A) Enter the maximum dollar amount of work you are capable of performing, (B) Enter the number of years of experience in this class of work. An applicant wishing to add a new class or classes or work in which they have not been previously prequalified must provide at least three references for each new class of work. Reference Form may be found at the end of this Prequalification Application.

If more space is required, attach additional sheets.

Class of Work	A. Max Dollar Amount	B. Years' Experience
Land Clearing	_____	_____
Earthwork	_____	_____
Aggregate Base	_____	_____
Asphalt Concrete Paving	_____	_____
Portland Cement Paving	_____	_____
Asphalt Surface Treatment	_____	_____
Reinforced Concrete Structures, Retaining Walls, etc....	_____	_____
Masonry Walls.....	_____	_____
Curbs and Sidewalks.....	_____	_____
Signing and Striping	_____	_____
Traffic Signals	_____	_____
Landscaping.....	_____	_____
Utilities		
Sanitary Sewers	_____	_____
Sewage Pump Stations.....	_____	_____
Sewage Treatment Plants.....	_____	_____
Water Lines.....	_____	_____
Water Reservoirs	_____	_____
Water Tanks.....	_____	_____
Water Filtration.....	_____	_____
Storm Drains	_____	_____
Subsurface Drains.....	_____	_____
Stormwater Treatment	_____	_____
Buildings		
Electrical Wiring.....	_____	_____
Building Construction.....	_____	_____
Building Alteration and Repair.....	_____	_____
Demolition, Related Excavation & Clearing	_____	_____
Painting and Decorating.....	_____	_____
Plumbing.....	_____	_____
Heating.....	_____	_____
Air Conditioning.....	_____	_____
Roofing	_____	_____
Sheet Metal Work.....	_____	_____
Other		
Fixed Dock Construction.....	_____	_____
Floating Dock Construction.....	_____	_____
Dock maintenance	_____	_____
Pile Driving.....	_____	_____
Railroad.....	_____	_____
.....	_____	_____

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

2 Indicate below the total amount of work, expressed in dollars, which the applicant can be bonded for at one time. Provide bond letter from bonding company for verification.

\$ _____ Dollars

3 Bid & Performance Surety Bonds: If the contract(s) for which this prequalification is sought require bid and performance bond(s), the applicant shall state the name of the agent and name, address and telephone number of the surety company applicant expects to provide the bonds.

Surety Company Name	
Surety Company Agent Name	
Surety Company Address	
Surety Company Phone	

4 If an Oregon corporation, answer this:

Date Registered with Secretary of State	
President	
1 st Vice President	
Secretary	
Treasurer	
What Officers are authorized to execute contracts?	

5 If a general partnership, answer this:

Date of Organization	
If a foreign (out of state) co-partnership or persons engaging in business in the state under an assumed name, but not domiciled within this state, is the partnership or business organization registered as required in compliance with ORS 648 et. seq?	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	
Name & Address Of Partners	

6 If a foreign (out of state) corporation, answer this:

When Incorporated		President	
In What State		1 st Vice President	
Date of authorization to transact business in the State of Oregon		Secretary	
Has applicant filed with the Department of Revenue forms required by ORS 279A.120?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name & Address of Registered Agent in Oregon	
What Officers are authorized to execute contracts?			

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

7 If a limited liability company, limited liability partnership or a limited partnership, indicate below:

Check One	<input type="checkbox"/> Limited Liability Company (LLC) <input type="checkbox"/> Limited Liability Partnership (LLP) <input type="checkbox"/> Limited Partnership (LP)	Have you registered with the State Corporation Division, Business Registry?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Who is authorized to execute contracts?		Name & Address of Organizer	

8 If doing business under an assumed business name, fill out the following information:

Name of Assumed Business			
Owner's Name			
Owner's Address			
Secretary of State Registration Date		Secretary of State Expiration Date	

9 If doing business as a sole proprietorship, fill out the following information:

Individual's Name Liable for all Obligations of Business			
Individual's Address			
<i>If you are a sole proprietor using an assumed business name, fill out the following information:</i>			
Name of Assumed Business			
Secretary of State Registration Date		Secretary of State Expiration Date	

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

10 Applicant's Equipment Questionnaire: List major plants and equipment owned by the applicant; small equipment and tools can be lumped together. If more space is required, attach additional sheets.

Description	Capacity	Age (Years)	Qty.	Condition

Total Market Value of Equipment in Dollars	\$
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If applicant intends to rent equipment, provide a general description:

If applicant intends to rent equipment, indicate where available:

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

11 Applicant's Experience Questionnaire: List major projects applicant has undertaken in the last five years; list most recent projects first.

If more space is required, attach additional sheets.

Owner Name, Address & Phone	Project Name	Class(es) of Work	Contract Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

12 Applicant's Experience Questionnaire, *Continued*: For the projects listed under Item 11, list the following additional information. Use the same line number per project listed under Item 11.

- Indicate whether: (P) Prime Contractor, (JV) Joint Venture, (Sub) Subcontractor
- Indicate name, address and phone number including area code

Date of Completion	Location of Work	• P/JV/Sub	Surety Company (if Project Bonded)	Architects or Engineering Firms •• Name, Address & Phone
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

13 Applicant's Experience Questionnaire, Continued:

How many years has applicant been in business under present name?

As Prime Contractor?	As a Subcontractor?
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How many years' experience in construction work has applicant had?

As Prime Contractor?	As a Subcontractor?
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14 Indicate contractor's licenses or registration numbers held as required by Oregon Statutes:

Type	Number & Name
Oregon Secretary of State Corporation Division – Active Business Registry No.	
Oregon Construction Contractors Board (CCB) No.	
W-9 Taxpayer Identification No. <i>Submit current, dated W-9 with application.</i>	
Oregon Business Landscape Contractors License No. & Company Name	
Individual Landscape Contractor License No. & Name	
Oregon Electrical Contractor License No. & Company Name	
Supervisor's License No. & Name	
Oregon Plumbing Business License No. & Company Name	
Journeyman's License No. & Name	
Oregon Boiler/Pressure Vessel Business License No. & Company Name	
Other License Type, No. & Name	

15 Public Records Requests: If information provided herein is considered exempt from disclosure under either ORS 192.345(2) or ORS 646.461(4), or other grounds specified in Oregon Public Records Law, ORS 192.311 through ORS 192.478, clearly designate the portions which the applicant claims are exempt from disclosure, along with a justification and citation to the authority relied upon. Entire records or documents should not be designated as a trade secret or otherwise exempt from disclosure; only specific information within a record or document should be so designated.

Check One	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, designate portions, justification, citation and authority below. Add additional pages as necessary.
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CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

16 Ownership and Control:

(a) List any organization, subsidiary companies or corporations, owned or controlled by the applicant, its officers, directors, partners and anyone owning at least 10%, interest in the firm, or in which the applicant was or is an officer, director, partner, doing business in Oregon under another name. For the purposes of this information, the applicant includes the applicant's officers, directors or partners, or other entity in which the applicant is an officer director or partner. If none, so state.

(b) List those individuals, companies or corporations owning 10% or more of applicant's firm. If none, so state.

(c) List all other personnel in applicant's organization who have a financial interest in or serve as officers or partners in another firm prequalified to bid in this or another state.

Individual's Name	Present Position or Office	Other Firm or Firms	Position in Other Firm(s)	State of Other Firm(s)

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

17 Supplemental Questions:

(a)	Has the applicant, or any parent, subsidiary or affiliate, ever been denied prequalification by any state, local or federal agency in this or any other state?	If Yes, please explain:
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(b)	Has the applicant, or any parent, subsidiary or affiliate, ever been debarred from bidding on contracts by any state, local or federal agency in this or any other state under any State Law or Federal Law?	If Yes, please explain:
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(c)	Has any officer or partner of the applicant, or any parent, subsidiary or affiliate, ever applied for prequalification with the public contracting agency under a different name?	If Yes, please explain:
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(d)	Has the applicant, or any parent, subsidiary or affiliate, ever failed to complete a state, local or federal public improvement (works) contract?	If Yes, please explain:
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(e)	Has any officer or partner of the applicant, or any parent, subsidiary or affiliate, ever been found in breach of a local, state or federal contract?	If Yes, please explain:
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(f)	Has the applicant, or any officer, partner, agent or employee of applicant, or any parent, subsidiary or affiliate, been found to have violated any state or federal prevailing wage statute or regulation (including the federal Davis-Beacon and related Acts or ORS 279C.800 et. seq.), or any provision requiring prompt payment to subcontractors, in any Final Order of the Oregon Bureau of Labor and Industries or the United States Department of Labor, by any court of competent jurisdiction?	If Yes, provide copies of the Final Order(s) or judgment in which this occurred and explain in detail: (a) the circumstances behind any violation, including the amount(s) not paid; (b) whether the amount(s) have now been paid; (c) the reasons for the violation; (d) all efforts undertaken to ensure that future violations will not occur.
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(g)	Has the applicant, or any officer, partner, agent or employee of applicant been found to have violated any state or federal environmental statute or regulation (including but not limited to Environmental Protection Agency, Department of Environmental Quality, U.S. Fish and Wildlife Service, Department of Fish and Wildlife, U.S. Army Corps of Engineers, Division of State Lands, Department of Agriculture or Department of Interior), or any permit issued by one of these agencies, in any agency Final Order or by any court of competent jurisdiction?	If Yes, provide copies of the Final Order(s) or judgment in which this occurred and explain in detail: (a) the circumstances behind any violation, including the amount(s) not paid; (b) whether the amount(s) have now been paid; (c) the reasons for the violation; (d) all efforts undertaken to ensure that future violations will not occur.
Check One	<input type="checkbox"/> Yes <input type="checkbox"/> No	

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

18 Application Contact Person: Name of contact person for information regarding this application.

Name			Title	
Email		Phone		Fax

19 Affidavit:

STATE OF _____)

ss.

COUNTY OF _____)

I, _____ (Name), being first sworn, state that I am _____ (Title of Individual Authorized to Execute Bids and/or Contracts) of the applicant herein and that the statements made in this application are true and I acknowledge that any false, deceptive or fraudulent statements on the application or at a hearing will result in the denial of prequalification, and may subject me to charges of false swearing or perjury; should there be any subsequent material reduction in applicant's ability to carry out any project for which applicant desires to submit a bid, applicant will give written notice of such change to the designated officer to whom this application is submitted at least ten (10) days prior to the bid opening; and that it is understood that such notice may change the eligibility of applicant to submit the bid.

Original Signature of Individual Authorized to Execute Bids and/or Contracts

Title

Subscribed and sworn to before me this _____ day of _____ (Month), _____ (Year)

Notary Seal or Stamp:

Original Notary Public Signature

My commission expires:

CITY OF ASTORIA | PUBLIC WORKS DEPARTMENT
CONTRACTOR'S PREQUALIFICATION APPLICATION
 EQUIPMENT & EXPERIENCE QUESTIONNAIRE | UPDATED 11/10/2021

Reference Form

Applicant completes the (A) Project Information and (B) Prequalification Applicant Information sections. The Reference completes the (C) Reference Responses section. Each reference may be used for multiple classes of work if the project included more than one class of work. The class of work for which the applicant has demonstrated experience may be with their own work force or through project management of subcontractors. Make copies for additional references as needed.

(A) Project Information

Applicant			
Project Title		Location	
Class(es) of Work			
Reference Name		Title	
Company/Agency			
Email		Phone	

Brief Project Description and Applicant's Role:

(B) Prequalification Applicant Information

Company Name			
Contact Name		Alt. Contact Name	
Title		Title	
Email		Email	
Phone		Phone	

(C) Reference Responses

- 1) What was your role in the above project (e.g., project manager, prime contractor, superintendent)?

- 2) What was the applicant's role?
 Prime Sub Manager of a Sub Other | If Other, please explain:

- 3) Did the applicant perform the Class(es) of Work mentioned above?
 Check One Yes No | Comments:

- 4) Was the project completed and accepted?
 Check One Yes; Year of Completion: _____ No | Comments:

- 5) Would you choose to work with this applicant again?
 Check One Yes No | Comments:

- 6) Is there any additional information you (the reference) would like to share about your experience with this prequalification applicant? Attach additional sheets as necessary.

Signature of Reference

Date

Printed Name & Title of Reference