

**MEDFORD WATER COMMISSION
PREQUALIFICATION FORM SUPPLEMENT**

(Note: The information on this form may be used by Medford Water Commission to consider whether a bidder has met the standards of responsibility as set forth in ORS 279C.375. Bidder authorizes MWC to contact any person listed on this form for the purpose of investigating responsibility. Failure to provide complete information shall be grounds for bid rejection.)

- 1) List foreman or personnel that are experienced in the installation of ductile iron water pipe, who will be on the job and wish to be prequalified:

| | |
|--|--|
| | |
| | |
| | |
| | |
| | |

- 2) List previous projects of similar size and scope where your firm and/or personnel have successfully completed ductile iron waterline work:

| NAME OF PROJECT | ADDRESS | WATERLINE WORK DESCRIPTION | NAME OF REFERENCE | TELEPHONE NUMBER |
|-----------------|---------|----------------------------|-------------------|------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

BUSINESS STRUCTURE: Complete section 1, 2, 3, 4, or 5 as applies

| | |
|--|-----------------------------|
| 1 If an Oregon corporation, complete this section | <input type="checkbox"/> NA |
|--|-----------------------------|

Date Corporation was registered with Secretary of State _____

President _____ Secretary _____

1st Vice President _____ Treasurer _____

CONTRACT EXECUTION - List of Authorized Personnel

A) President and Secretary (**Both** President **and** the Secretary of the corporation are **required** to sign ODOT contracts and performance and payment bonds unless certified, true and correct copy of corporate bylaws, resolutions, or minutes state otherwise and **are attached to this prequalification.**) *Signatures are preferred in blue ink.*

| | |
|---------------------------|-----------|
| Printed name of President | Signature |
|---------------------------|-----------|

| | |
|---------------------------|-----------|
| Printed name of Secretary | Signature |
|---------------------------|-----------|

B) Are other officers besides the President and Secretary of your company authorized to execute contracts?
 Yes No **If yes, list below and attach certified, true and correct copy of corporate bylaws, resolutions, or minutes stating that authority.**

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

C) Are any of the officers (listed above in A & B) authorized to sign and execute contracts and bonds on **behalf of the company without the signature of others?** Yes No

IF YES, YOU MUST ATTACH CORPORATE BYLAWS, RESOLUTIONS, OR MINUTES STATING THIS AUTHORITY TO SIGN ALONE ON BEHALF OF THE CORPORATION.

BID EXECUTION - List of Authorized Personnel

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including any officers listed above and those individuals with a digital ID used for submitting an electronic bid through BidExpress®. *Signatures are preferred in blue ink*

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

| | |
|------------------------|-----------|
| Printed name and title | Signature |
|------------------------|-----------|

(Additional documentation may be required by the public contracting agency)

2 If a foreign (out of state) corporation, complete this section

NA

When incorporated _____

President _____ Secretary _____

1st Vice President _____ Treasurer _____

CONTRACT EXECUTION - List of Authorized Personnel

A) President and Secretary (**Both** President **and** the Secretary of the corporation are **required** to sign ODOT contracts and performance and payment bonds unless certified, true and correct copy of corporate bylaws, resolutions, or minutes state otherwise and **are attached to this prequalification.**) *Signatures are preferred in blue ink*

Printed name of President _____ Signature _____

Printed name of Secretary _____ Signature _____

B) Are other officers besides the President and Secretary of your company authorized to execute contracts?
 Yes No **If yes, list below and attach certified, true and correct copy of corporate bylaws, resolutions, or minutes stating that authority.**

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

C) Are any of the officers (listed above in A and B) authorized to sign and execute contracts and bonds on **behalf of the company without the signature of others?** Yes No

IF YES, YOU MUST ATTACH CORPORATE BYLAWS, RESOLUTIONS, OR MINUTES STATING THIS AUTHORITY TO SIGN ALONE ON BEHALF OF THE CORPORATION.

BID EXECUTION - List of Authorized Personnel

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including any officers listed above and those individuals with a digital ID used for submitting an electronic bid through BidExpress® *Signatures are preferred in blue ink*

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Name and address of registered agent in Oregon:

Date of authorization by Oregon Secretary of State to transact business in Oregon:

Has applicant filed with Oregon Department of Revenue (DOR) forms required by ORS 279A.120? Yes No

Sec. of State
Phone: 503-986-2200

Website: www.filinginoregon.com

Department of Revenue
Phone: 503-378-4988

Website:
www.oregon.gov/dor/pages/index.aspx

3 If a limited liability company, limited liability partnership or a limited partnership

complete this section

NA

Check One: Limited liability company Limited liability partnership Limited partnership

Have you registered with the Oregon Secretary of State, Corporation Division, Business Registry?

Yes No

Name and address of organizer:

SUBMIT ARTICLES OF ORGANIZATION AND OPERATING AGREEMENTS THAT INDICATE THE AUTHORITY TO SIGN CONTRACTS AND BONDS. If the Contractor is an LLP, or LP, an authorized representative of **each** Entity comprising it shall sign the Contract, Performance Bond, and Payment Bond. **If any representative is authorized to execute contracts without the signature of others, this must be stated in the Articles of Organization and Operating Agreements.**

Printed names, titles and signatures (*Signatures are preferred in blue ink*) of personnel authorized to **EXECUTE CONTRACTS**:

Printed name and title

Signature

Printed name and title

Signature

Are other representatives besides those listed above able to execute contracts? Yes No

If yes, submit names, titles and signatures separately.

Printed names, titles and signatures of personnel authorized to **EXECUTE BIDS**

Signatures of all individuals (**INCLUDING ANY OFFICERS LISTED ABOVE**) authorized to execute **Bids** on behalf of the company shall be listed in this section, including any listed above and those individuals with a digital ID used for submitting an electronic bid through BidExpress®. *Signatures are preferred in blue ink.*

Printed name and title

Signature

Printed name and title

Signature

Printed name and title

Signature

Printed name and title

Signature

Printed name and title

Signature

4 If a general partnership, complete this section

NA

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? Yes No N/A

Names and addresses of partners:

If the Contractor is a partnership or limited liability partnership, an authorized representative of **each** Entity comprising it shall sign the Contract, Performance Bond, and Payment Bond, and an authorization to sign shall be attached. **If only one partner is signing, then bylaws or minutes must include the authority to sign without the signature of others.**

Printed names, titles and **signatures** of partners authorized to **EXECUTE CONTRACTS**. *Signatures are preferred in blue ink.*

Printed name of partner _____ Signature _____

Printed name of partner _____ Signature _____

Bylaws or Minutes Submitted: (Check one) Yes No (Only submit if signatures differ from above)

Printed names, titles and **signatures** of personnel authorized to **EXECUTE BIDS**
Signatures of all individuals **(INCLUDING ANY OFFICERS LISTED ABOVE)** authorized to execute **Bids** on behalf of the company shall be listed in this section, including any officers listed above and those individuals with digital ID used for submitting an electronic bid through BidExpress®. *Signatures are preferred in blue ink.*

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

Printed name and title _____ Signature _____

(Additional documentation may be required by the public contracting agency)

| | |
|---|-----------------------------|
| 5 If doing business as a sole proprietorship, complete this section | <input type="checkbox"/> NA |
| Name of individual liable for all obligations of the business: _____ | |
| If applicant is a sole proprietor using an assumed business name, please list name below: _____ | |
| Secretary of State registration date: _____ Expiration date: _____ | |
| Printed name and title _____ | Signature _____ |

(Additional documentation may be required by the public contracting agency)

| | |
|--|-----------------------------|
| 6 If doing business under an assumed business name, complete this section | <input type="checkbox"/> NA |
| Assumed business name: _____ | |
| Owner's name and address: _____ | |
| Oregon Secretary of State Corporation Division's Registration Number: (https://sos.oregon.gov/business/pages/default.aspx) | Renewal Date: |
| Assumed business name: _____ | |
| Owner's name and address: _____ | |
| Oregon Secretary of State Corporation Division's Registration Number: (https://sos.oregon.gov/business/pages/default.aspx) | Renewal Date: |
| If you have additional assumed business names, attach a sheet with business information. | |

7 OWNERSHIP AND CONTROL (A, B, and C)

- A) Are there any parent companies, corporations, or individuals with at least 10% ownership interest in applicant's firm? Yes No If yes, please list below in space provided

- B) Are there any subsidiary companies or corporations owned or controlled by the applicant 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.
 Yes No If yes, please list below in space provided

- C) Are there any 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?
 Yes No If yes, please list below in space provided.

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

8 LICENSES AND REGISTRATIONS

**Oregon Secretary of State Corporation
Division – Active Business Registry No.:**
<https://sos.oregon.gov/business/pages/default.aspx>
Phone: 503-986-2200

Required for Legal Business Name, Assumed Business Name (page 1, Section B),
Corporations, LLCs, LLPs, and LPs. Required prior to contract execution.

Oregon Construction Contractors Board No.:
www.oregon.gov/CCB/Pages/Index.aspx
Phone: 503-378-4621

Required prior to bid opening for state-funded projects or prior to contract execution for
federally-funded projects (not required for Aggregate Production or Landscaping work
categories).

W-9 Taxpayer Identification Number:
Submit a current dated W-9 with application.

Required with all Applications.

**Oregon Business Landscape Contractors
License No. and company name:
Individual Landscape Contractor License No.
and name:**
www.oregon.gov/LCB/pages/index.aspx Phone:
503-967-6291

**Oregon Electrical Contractor License No.
and company name:
Supervisor's License No. and name :**
www.oregon.gov/BCD/pages/index.aspx
Building Codes Division phone: 503-378-4133

**Oregon Plumbing Business License No. and
company name:
Journeyman's License No. and name:**

**Oregon Boiler/Pressure Vessel Business
License No. and company name:**
www.oregon.gov/BCD/pages/index.aspx
Building Codes Division phone: 503-378-4133

Other License No. and name or type:

City of Medford Business License #:

9 SUPPLEMENTAL QUESTIONS

- A) Within the last five years has the applicant, or any parent, subsidiary or affiliate, been denied prequalification or had prequalification suspended or revoked by any state, local or federal agency in this or any other state?
 Yes No **If yes, please attach an explanation.**
- B) Within the last five years has the applicant, or any parent, subsidiary or affiliate, been debarred from bidding on contracts by any state, local or federal agency in this or any other state under any state or federal law?
 Yes No **If yes, please attach an explanation.**
- C) Has any officer or partner of the applicant, or of any parent, subsidiary or affiliate, ever applied for prequalification with ODOT under a different name?
 Yes No **If yes, please attach an explanation.**
- D) Within the last five years has the applicant, or any parent, subsidiary or affiliate, failed to complete a state, local or federal public improvement (works) contract?
 Yes No **If yes, please attach an explanation.**
- E) Within the last five years has any officer or partner of the applicant, or of any parent, subsidiary or affiliate, been found in breach of a local, state or federal contract?
 Yes No **If yes, please attach an explanation.**
- F) Within the last five years 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-Bacon and related Acts and 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 other state or federal agency, or by any court of competent jurisdiction?
 Yes No

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

- G) Within the last five years 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, US Fish and Wildlife Service, Department of Fish and Wildlife, US 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?
 Yes No

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

Comments:

10 CLASSES OF WORK

Fill in the classes of work on which you wish to be pre-qualified to bid. Classes of work include, but are not limited to, work listed in parentheses. A more detailed listing of bid items can be found at:

<https://www.oregon.gov/ODOT/Business/Specs/2021-Bid-Item-List.xlsx>

For Each Class of Work:

An applicant who wishes to add a new class or classes of work in which they have not been previously prequalified must provide at least three references for each new work class. Reference instructions and forms can be found at:

https://www.oregon.gov/odot/business/procurement/pages/bid_award.aspx

List all other states where applicant is currently qualified to perform work or has been qualified within the last three (3) years.

| Class of Work | States qualified within the last (3) years |
|--|--|
| <input type="checkbox"/> (AB) Aggregate Bases | _____ |
| <input type="checkbox"/> (AC) Rock Production (Aggregate Crushing, Sanding Rock) | _____ |
| <input type="checkbox"/> (ACP) Asphalt Concrete Paving and Oiling (Paving, Chip Sealing, Crack Sealing, Slurry Sealing, Fog Sealing) | _____ |
| <input type="checkbox"/> (BLD1) Buildings (Toilets, Bathhouses, Maintenance, Sand Sheds) | _____ |
| <input type="checkbox"/> (EART) Earthwork and Drainage (Clearing, Earthwork, Blasting, Riprap, Culverts, Manholes, Inlets, Storm Sewers, Sanitary Systems) | _____ |
| <input type="checkbox"/> (ELEC) Electrical (Traffic Signals, Illumination, Ramp Meters, Roadway Weather Information Systems (RWIS), Variable Message Signs (VMS), Traffic Cameras) | _____ |
| <input type="checkbox"/> (LS) Landscaping (Roadside Seeding, Lawns, Shrubs, Trees, Irrigation Systems, Topsoil, Temporary and Permanent Erosion Control) | _____ |
| <input type="checkbox"/> (MHA) Miscellaneous Highway Appurtenances (Guardrail, Barrier, Curbs, Walks, Fences, Protective Screening, Impact Attenuators, Cold Plane Pavement Removal, Rumble Strips) | _____ |
| <input type="checkbox"/> (PAI1) Painting (Bridges and Buildings) | _____ |
| <input type="checkbox"/> (PAVE) Pavement Markings (Permanent - Painted, Durable, Markers, Delineators) | _____ |
| <input type="checkbox"/> (PCP) Portland Cement Concrete Paving | _____ |
| <input type="checkbox"/> (REIN) Bridges and Structures (Concrete, Steel, and Timber Bridges; Retaining Walls and Sound walls; Seismic Retrofit; Box Culverts; Structural Plate Pipe, and Pipe Arches) | _____ |
| <input type="checkbox"/> (SIGN) Signing (Permanent) | _____ |
| <input type="checkbox"/> (TTC) Temporary Traffic Control (All Temporary Traffic Control Items Including Flaggers and Pilot Cars) | _____ |
| <input type="checkbox"/> (OTH1) Other (List specific class) | _____ |

You may list "OTHER" (OTH1) classes of work; however, ODOT does not normally solicit bids under this class. This class of work is typically used by Local Agencies (Cities, Counties, etc.)

11 **EXPERIENCE**

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

As a prime contractor? _____ As a subcontractor? _____

B. How many years' experience in construction work has applicant had?

As a prime contractor? _____ As a subcontractor? _____

12 **EXPERIENCE** – Continued

What is the construction experience of all owners, officers, partners and principal individuals in applicant's organization?

(Attach additional sheets, if needed)

| Individual's Name | Present Position or Office | Years of Construction Experience | Magnitude and Type of Work |
|-------------------|----------------------------|----------------------------------|----------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

13 **GENERAL REMARKS**

Use the following space for general remarks and explanations pertaining to the foregoing prequalification statements. Explain here any claimed experience of a business organization or entity other than the applicant or principals, including that of any business entity which was a predecessor of applicant or which has been acquired by applicant.

14 AFFIDAVIT

STATE OF _____)

County of _____)

ss.

I, _____ being first sworn, state that I am

_____ of the applicant herein and that the statements made in
(Title of individual authorized to execute bids and/or contracts) 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 days prior to the bid opening, and 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)

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

*Notary Seal
or
Stamp*

Original Notary Public Signature

My commission expires _____