

**CLARK COUNTY SCHOOL DISTRICT
PRE-QUALIFICATION APPLICATION FORM
Rolling Two Year Period
www.ccsd.net/facilities/construction_management.html
(Jan2007)**

Contractors who wish to bid as **prime contractors** for Clark County School District new school construction, additions, renovation / modernization, and specialty construction (low voltage systems, HVAC, electrical, general engineering, asbestos / environmental abatement, roofing) must complete this Pre-Qualification Application Form and **mail or deliver to: Clark County School District, Facilities Division, Attn: Contractor Prequalification Panel at 4828 South Pearl Street, Las Vegas, NV 89121.** The Panel will review the information provided and make a determination within 45 days of receiving this form and will notify the Contractor in writing of the Contractor's qualification for future public works projects for a **period up to two years.** If the determination is to deny qualification, the written notice will set forth the reasons for the denial and inform the Contractor of their right to appeal the determination before the Board of School Trustees. **This form shall be submitted in triplicate, 3-hole punched.** (NO BINDERS OR STAPLES PLEASE) For all information required, please provide original copies, as facsimile copies are not acceptable. **ORIGINAL SIGNATURES SHALL BE BY AN OFFICER OF THE COMPANY OR A CORPORATE RESOLUTION AUTHORIZING A PERSON WHO IS NOT AN OFFICER TO SIGN MUST BE INCLUDED IN THE APPLICATION.**

PART I - GENERAL INFORMATION

1. Application Date: _____
2. Construction Company Name: _____
- 3 (a.) Location: (No PO Boxes): _____
(Address, City, State and Zip)
- (b.) Mailing Address: _____
(Address and/or PO Box, City, State and Zip)
4. Contact Name and Title: _____
5. Phone Number: _____ Fax Number: _____
6. E-Mail Address: _____
7. (a) Attach a current copy (less than 30 days old) of your contracting license information from the Nevada State Contractors' Board website [<http://www.state.nv.us/nscb/>]. On that page, access this information through one of the searches under "Contractor License Search ", click on your license number and print the information.

List your License classification(s) and monetary limit(s) _____
- (b) Asbestos Abatement Contractors – In addition to your Nevada State Contractors' Board license, provide a copy of your current asbestos contractor license issued by the Nevada Occupational Safety and Health Agency.
- (c) Lead-Based Paint Abatement Contractors – In addition to your Nevada State Contractors' Board license, provide a copy of your firm's EPA certificate or approval letter for lead-based paint hazard abatement.
8. Has your license ever been suspended or revoked by the NV State Contractors' Board? YES NO
9. If YES, please explain including dates, reason: _____

Part I – General Information Continuation

10. (a) Provide a NV State Contractors’ Board five-year license history status for your firm. The NV State Contractors’ Board Investigations Division provides this document. Your explanation of any disciplinary board action taken must also be provided.
- (b) Has your firm been disciplined or fined by another state or federal agency for conduct that relates to contracting or construction? YES NO
If yes, please provide details for each instance. Identify document as “Item 10b” and attach to this form.
11. Is your firm a disadvantaged business enterprise (DBE), minority business enterprise (MBE), woman-owned business enterprise (WBE), or a small business enterprise (SBE)? YES NO
If yes, please provide a copy of the certificate or letter of certification.
12. Provide a statement from Nevada State Labor Commissioner regarding wage violations by your firm or any of its Principals for the previous 5 years.
13. (a) Have you established a written safety program that complies with NRS 618.383? YES NO
(b) Provide name and title of the company person in charge of safety and health. _____
(c) Submit OSHA inspection and violation data for previous five calendar years. This documentation is available from OSHA as follows: Go to OSHA’s website at: <http://www.osha.gov/cgi-bin/est/est1>. Enter your company’s name [“Establishment”] and the search dates [five previous years.] Provide the inspection detail printout for any and all violations.
14. Attach certificate(s) of insurance on “ACORD” forms for general, excess and automobile liability insurance. Applicant must obtain and maintain coverage for public liability and property damage including personal injury, accidental death and damage to property that may arise in connection with Clark County School District construction projects. ***The comprehensive general liability insurance must include coverage for medical expenses in an amount not less than \$10,000 per person. The automobile coverage must cover any/all autos.***
- (a) Provide a copy of the “A. M. Best” rating document for each insurer listed on the certificate(s), excluding workers compensation. **The minimum A.M. Best rating for each liability insurance company listed on the certificate shall be: at least A-, Financial Size Category (FSC) at least VIII.**
- (b) Insurance certificate(s) shall indicate: “Clark County School District, For Prequalification Only”
- (c) If you do not have \$5,000,000 excess liability insurance coverage, provide a letter from insurance agency that the required coverage is available and will be provided if your firm is awarded a contract of **\$100,000 or more.** N/A
- (d) Attach a copy of your insurance **agent/agency’s** current license issued by the Nevada Division of Insurance.
15. Attach evidence of statutory minimum coverage for workers compensation insurance.
16. **Bonds are mandatory for all projects above \$50,000.** Attach a letter from your **SURETY COMPANY** (not the agent) of its intent to issue bonds. This letter shall include your **single** and **aggregate** bonding limits. Letter must be dated. Undated letters will not be considered.
List your bonding limit for **both**: Single: _____ Aggregate: _____
17. Attach a copy of your **surety** company’s **Certificate of Authority** issued by the Nevada Division of Insurance. Clark County School District does not accept reinsurance or coinsurance for bonds.
18. Name of your surety/bonding agency: _____
Attach a copy of your surety company’s **agent/agency’s** current license issued by the Nevada Division of Insurance.

Part I – General Information Continuation

19. Provide proof that your surety company is listed/approved by the U.S. Department of the Treasury. Provide a current, less than 30 days old, copy of the page that lists your surety from Department Circular 570. This listing can be accessed at: [<http://www.fms.treas.gov/c570/index.html>], then click on "Treasury Circular 570".
20. Provide a statement from your **surety** company (**not the agent**) regarding any claims filed against your company. The surety company shall certify a list of all such claims. **If your surety company has been doing business with your company less than 3 years, provide this information from both your current and previous surety companies.**
21. Please indicate each category of project your company is applying for pre-qualification as a Prime Contractor:

A. GENERAL BUILDING CONSTRUCTION: (LICENSE CLASSIFICATIONS AB, B, B-2 ONLY)

- | | | | |
|----|--------------------------|-------------------------|----------------------------|
| 1. | <input type="checkbox"/> | Modernization Projects: | Up to \$100,000 |
| 2. | <input type="checkbox"/> | Modernization Projects: | Over \$100,000 |
| 3. | <input type="checkbox"/> | New Addition Projects: | Less than \$20,000,000 |
| 4. | <input type="checkbox"/> | New Elementary Schools: | Approximately \$20,000,000 |
| 5. | <input type="checkbox"/> | New Middle Schools: | Approximately \$35,000,000 |
| 6. | <input type="checkbox"/> | New High Schools: | Approximately \$70,000,000 |

B. SPECIALTY CONSTRUCTION: INDICATE DOLLAR VALUE REQUESTED \$ _____

- | | | |
|-----|--------------------------|---|
| 7. | <input type="checkbox"/> | Environmental Remediation (Asbestos/Lead/Mold)_____ |
| 8. | <input type="checkbox"/> | Electrical _____ |
| 9. | <input type="checkbox"/> | General Engineering _____ |
| 10. | <input type="checkbox"/> | HVAC _____ |
| 11. | <input type="checkbox"/> | Low Voltage Systems (SPECIFY TYPE) _____ |
| 12. | <input type="checkbox"/> | Roofing _____ |
| 13. | <input type="checkbox"/> | OTHER (PLEASE LIST) _____ |

INITIALED
BY OFFICER: _____

DATE: _____

End of PART I – General Information

**PART II – SECTION C - FINANCIAL ABILITY
“SUBSTANTIAL COMPLETION INFORMATION”**

1. Complete this Part II – Section C form, **one per project**, for any and all contracts, or subcontracts, your company was awarded but **failed to achieve Substantial Completion** within the scheduled contract time. Failure to answer all questions will delay review of your application.

2. Name of the Project: _____

3. List the dollar amount **your** company was contracted for on this project: _____

4. Original Contract Duration in Calendar Days: _____

5 (a.) Notice to Proceed Date: _____ 5(b.) **Contract Substantial Completion Date:** _____

6. **Actual Substantial Completion Date:** _____

7. How late was this project: _____

8. Provide explanation as to why this project was late. _____

9. Did your contract contain liquidated damages or penalty clauses? YES NO

10. If yes, were damages/penalties assessed. YES NO

11. If yes, in what amount? _____

This Section not applicable:

INITIALED
BY OFFICER: _____

DATE: _____

End of PART II – SECTION C

**PART II – SECTION D - FINANCIAL ABILITY
“FINAL COMPLETION INFORMATION”**

1. Complete this Part II – Section D form, **one per project**, for any and all contracts, or subcontracts, your company was awarded but failed to achieve **Final Completion** within 180 calendar days of the Substantial Completion Date. Failure to answer all questions will delay review of your application.

2. Name of the Project: _____

3. List the dollar amount **your** company was contracted for on this project: _____

4. Original Contract Duration in Calendar Days: _____

5 (a.) Notice to Proceed Date: _____ 5 (b.) **Contract Substantial Completion Date:** _____

6. **Final Completion Date:** _____

7. How late was this project? _____

8. Provide explanation as to why this project was late. _____

9. Did your contract contain liquidated damages or penalty clauses? YES NO

10. If yes, were damages/penalties assessed? YES NO

11. If yes, in what amount? _____

This Section not applicable:

INITIALLED
BY OFFICER: _____ *DATE:* _____

End of PART II – SECTION D

**PART II – SECTION E - FINANCIAL ABILITY
“FAILURE TO CARRY OUT THE WORK”**

1. Complete this Part II – Section E form, **one per project**, for any and all projects where your company **failed** to perform any portion of the Work that caused the Owner or Others, (i.e., the surety company, local public works board, etc.) to exercise its right to carry out the Work of a contract during the last five years. Failure to answer all questions will delay review of your application.
2. Name of the Project: _____
3. Address of the Project, include City, State and Zip: _____
4. Contact Name of the Project's Owner: _____
5. Address of the Project's Owner, include City, State and Zip: _____

6. Phone Number of the Project's Owner: _____
7. Building Square Footage of the Project: _____
8. List the scope of work your company was directly responsible for on this project. **As applicable for your license classification, list the type of building construction per IBC (International Building Code) classifications, type of mechanical system, type of electrical system, abatement type, roof systems, and type of general engineering, etc.**

9. List the dollar amount **your** company was contracted for on this project: _____
10. List the portion or portions of work that was performed by the Owner or Others: _____
11. Provide explanation as to why this work was performed by the Owner or Others: _____

12. List the reason for the breach of contract: _____

13. Original Contract Duration in Calendar Days: _____
- 14 (a.) Notice to Proceed Date: _____ 14 (b.) **Contract Substantial Completion Date:** _____
- 15 (a.) **Actual Substantial Completion Date:** _____
- (b.) **Final Completion Date:** _____
16. Did your contract contain liquidated damages or penalty clauses? YES NO
17. If yes, were damages/penalties assessed. YES NO
18. If yes, in what amount? _____

This Section not applicable:

INITIALED
BY OFFICER: _____ *DATE:* _____

End of PART II – SECTION E

**PART II - SECTION F - FINANCIAL ABILITY
“JUDGMENTS, LIENS, BREACHES OF CONTRACT”**

1. The extent of and circumstances surrounding any breach of contract will be considered in the determination of your company’s qualification. Complete this Part II – Section F form, **one per project**, to list any and all information regarding any breach of contract for any reason by your company, including judgments, liens, arbitrations, mediation, and decisions for the past five years. Failure to disclose information regarding any breach of contract may be grounds for disqualification. Indicate disposition or current status. Failure to answer all questions will delay review of your application.
2. Name of the Project: _____
3. Address of the Project, include City, State and Zip: _____
4. Contact Name of the Project's Owner: _____
5. Address of the Project's Owner, include City, State and Zip: _____

6. Phone Number of the Project's Owner: _____
7. Building Square Footage of the Project: _____
8. List the nature of the filing: _____
9. List the status of this lien: _____
10. List the final judgment: _____
11. Court where this lien/judgment filed: _____
12. List the dollar amount of this filing: _____
13. Original Contract Duration in Calendar Days: _____
- 14 (a.) Notice to Proceed Date: _____ 14 (b.) **Contract Substantial Completion Date:** _____
15. **Actual Substantial Completion Date:** _____

This Section not applicable:

INITIALED
BY OFFICER: _____ *DATE:* _____

End of PART II – SECTION F

**PART II – SECTION G - FINANCIAL ABILITY
“BANKRUPTCY”**

1. Complete this Part II – Section G form, **one per filing**, for any and all filings under the United States Bankruptcy Code, assignments for the benefit of creditors, or other measures taken for protection against creditors in the previous five years by your company. Indicate disposition or current status. Failure to answer all questions will delay review of your application.
2. Date of Filing: _____
3. Bankruptcy Code/and Name: _____
4. This bankruptcy was filed as (check box): Chapter 7, Chapter 11, Chapter 13
5. List the State, County and City where bankruptcy was filed: _____

6. List assignments for creditors, name(s) and amount(s): _____

7. List any other measures taken for protection against creditors: _____

This Section not applicable:

INITIALLED
BY OFFICER: _____ *DATE:* _____

End of PART II – SECTION G

PART III - PRINCIPAL PERSONNEL

1. The Owner requires information regarding your company's principal personnel. Principal personnel are defined as the owners of the company, the Chief Executive Officer, the Chief Operations Officer, the Chief Financial Officer, **any other officer listed on the contractor's license**, and, if applicable, the Qualified Employee listed on the contractor's license. **Applicant MUST complete a Part III form for each officer.** Duplicate this form as necessary. Failure to answer all questions will delay review of your application.

Please note that at the time of a specific project pre-bid conference and a specific project pre-construction conference, the Owner shall require additional information regarding specific project personnel that include the project manager and project superintendent(s).

2. **Attach an organization chart of the company as it applies to *local operations*.**

3. Name of principal or corporate member: _____

4. Title/position: _____

5. Number of years this person has been with the company: _____

6. **Attach a resume for this person.**

7. List any criminal or civil judgments against this person: _____

8. List any records of any principal personnel violating local, state, and federal discrimination, wage and hour, disability, and occupational and environmental health and safety laws, and/or local and state labor relations and employment laws.

CERTIFICATION

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Certified by:

PRINT NAME: _____

TITLE: _____

OFFICER'S

SIGNATURE: _____

DATE: _____

End of PART III - PRINCIPAL PERSONNEL

PART IV - PRIOR DISQUALIFICATION FROM CONTRACT AWARD

- 1. List any and all information regarding any prior disqualification by your company pursuant to NRS 338.017 and NRS 338.13895. The State Contractors Board and the State Labor Commissioner will be asked to verify this information. (Use additional sheets if required.)

This Section not applicable:

End of PART IV - PRIOR DISQUALIFICATION FROM CONTRACT AWARD

PART V – ACKNOWLEDGEMENTS AND CERTIFICATION OF APPLICATION

The applicant acknowledges by initialing the following:

- **Initial: _____** Failure to provide any portion of the required information listed may be cause for the applicant to be deemed non-responsive and deemed not qualified.
- **Initial: _____** The applicant may be deemed not qualified to bid based upon the evaluation of the information provided.
- **Initial: _____** The Owner will verify information provided, including requesting appropriate local, state, and federal entities to provide information regarding judgments, liens, and records of violations of applicable local, state, and federal laws.

CERTIFICATION

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge and belief.

Certified by:

PRINT NAME: _____

TITLE: _____

OFFICER'S

SIGNATURE: _____

DATE: _____

End of PART V - ACKNOWLEDGEMENTS AND CERTIFICATION OF APPLICATION

END OF APPLICATION