

# MT. SAN ANTONIO COLLEGE

## BIDDER'S PRE-QUALIFICATION PACKAGE

### **REQUEST FOR PREQUALIFICATION OF BIDDERS** **(Public Contract Code Section 20651.5)**

Each contractor wishing to bid as a prime contractor for projects at Mt. San Antonio College must fully complete this questionnaire and provide all materials requested herein. The contractor's pre-qualification status will remain current for 12 months from the notice of qualification, and its public works rating, or financial rating may be updated at any time. The contractor will receive advance notice from the District of upcoming projects for which it has been deemed prequalified to bid, and may choose to bid any or all of the projects for which it is prequalified.

Answers to questions contained in the attached Standard Form of Questionnaire and Financial Statement are required, including a complete statement of prospective bidder's financial ability and experience in performing public works. These documents will be the basis of rating bidders in respect to the size and scope of contracts upon which each bidder is qualified to bid. The District reserves the right to check other sources available.

In addition to disqualification for failure to meet the District's criteria, a Contractor may be automatically disqualified for any one of the following: (1) omission of requested information; (2) falsification of information; (3) excessive stop notices and/or prevailing wage violations; (4) debarment from the Division of Labor Standards Enforcement.

The questionnaire responses and financial statements are not public records and are not open to public inspection. All information provided will be kept confidential to the extent permitted by law. The District reserves the right to reject any and all prequalification questionnaires and to waive any irregularities in the information contained therein.

Each questionnaire must be signed under penalty of perjury by an individual who has the legal authority to bind the contractor on whose behalf that person is signing. If any information provided by a contractor becomes inaccurate, the contractor must immediately notify the awarding body and provide updated accurate information in writing and under penalty of perjury.

### **SUBMISSION OF COMPLETED STATEMENTS**

Mail completed Contractor's Statement of Experience and Financial Condition along with the following (see pages 1 through 17, attached):

- Reviewed or Audited Financial Statement (Projects less than \$10,000,000)
- Audited Financial Statement (Projects \$10,000,000 or greater)
- Letter of Bondability
- Certificate of Insurance issued to Mt. San Antonio College
- Accountant's Release Letter
- Letter of Credit (optional)

Mail To: Mt. San Antonio College  
1100 North Grand Avenue  
Walnut, CA 91789  
Attn: Purchasing Dept Bldg 4, Procurement Specialist

**Please mark envelope "Confidential"**

## Quick Check

### Should I fill out this package?

The following are screening statements which should be used to determine whether or not you pass the test to require you to enter the prequalification process.

**You must be able to answer “YES” to each statement below.**

1. I am bidding as the prime contractor.
2. I am appropriately licensed, insured and bondable.
3. I have an audited or reviewed financial statement, (as appropriate), that is less than 14 months old.
4. I have completed at least 2 public works building projects within the last 5 years. (Public Works is defined as facilities built for government agencies including school districts, special districts, local, county, state and federal agencies requiring prevailing wage rates paid to workers.)
5. I am eligible to bid a Public Works contract as per Section 1777.1 of the Labor Code.

If you can answer yes to all of the above statements, please proceed with submission of this package.

## DISTRICT PREQUALIFICATION STANDARDS

- (1) Contractor's Statement of Experience
- (2) Appropriate California Contractor's License
- (3) Contractor's Financial Condition and Bondability
- (4) Certificate of Insurance
- (5) Certificate of Licensed Public Accountant
- (6) Accountant's Release Letter
- (7) Affidavit

Only one copy of the prequalification is required to be submitted. A new and current submittal shall be required each year. Additionally, the District may, at any time, specifically request a new statement, in which case, the Contractor must comply within thirty (30) days, or the rating on file may, at the discretion of the District, be considered expired. A contractor may also file new statements at more frequent intervals if there is substantial change in the Contractor's financial status, and a new rating based on the latest statement will be issued. In no case will prequalification remain in effect longer than 18 months from the date submitted by the contractor for review. The following items must be provided or the qualification submittal will not be accepted.

## FINANCIAL INFORMATION

### ***A. Audited & Reviewed Statement Requirements***

Reviewed or audited statements will be required for projects under \$10 million. Audited statements will be required for all construction projects totaling \$10 million or greater. Note: A compilation is not acceptable.

### ***B. Financial Capacity***

Prospective bidders will be prequalified to bid on projects up to a maximum dollar amount based on the lesser of ten times working capital (current assets less current liabilities) or ten times net worth (total assets less liabilities) whichever is less. Financial rating may be augmented by submission of a Letter of Bank Credit on the form included on Page 16. Particular attention is called to the fact that the certificate of the certified public accountant or licensed public accountant must express an unqualified opinion or a qualified opinion which does not negate an opinion on the statements as a whole in order to receive a "financial capacity" qualification. Note: Statements with a "negative quick asset" amount may not be augmented.

Working capital and net worth are important factors in determining the bidding capacity of a Contractor; therefore, the accountant must furnish, by a supplementary schedule or as a part of the accountant's certificate, any information not specifically called for by the statement which, in the accountant's opinion, might properly be taken into consideration.

In the event that the Contractor's job income and expenditures are accounted on a completed contract basis and the balance sheet includes an item reflecting the excess of costs to date over billing to date, or vice versa, the elements of "Accumulated Cost" and "Billings to Date" must be shown in support of the balance sheet item.

### **C. Accountant's Certificate and Release**

The certificate of a licensed Certified Public Accountant will be required in all cases. The forms of certificate for both an audit and a review are included on Page 14. Use whichever is appropriate to your submittal. It will be acceptable for the accountant to submit a certificate in the accountant's own words. However, such qualifications shall not be so extensive as to nullify the value of the statement or its usefulness to the District.

Accountant's Release Letter will be required. The responsible accountant must verify the validity of the applicant's financial statement. Use the form included on Page 15.

### **D. Term of Financial Statements**

A Contractor's financial information is valid until the date shown is more than one year old. Statements will be held on file until the financial information is 18 months old at which time it will be destroyed. The District reserves the right to reject statements in which the financial information is more than six months old. All applicable portions of the form should be completed with schedules attached if the space provided does not suffice.

## **PUBLIC WORKS REQUIREMENTS**

Projects estimated at less than \$10,000,000 require the successful completion of at least two public works projects with an actual cost of construction totaling 75% cumulative average, completed in the State of California in the past five (5) years.

Projects estimate at \$10,000,000 or greater require the successful completion of at least two public works projects with an actual cost of construction totaling 50% cumulative average completed in the State of California in the past five (5) years. For example - Project 1 contract value of \$1,627,511 plus Project 2 contract value of \$1,437,026 equals an average contract value of \$1,532,269. Take this value multiply by 1.33 (allowing for a growth factor) reaches the sum of \$2,037,917. This figure is rounded to the nearest \$100,000 for a rating of \$2,000,000. This process only obtains the Public Works Rating and does not necessarily set the final rating.

## **INSURANCE**

A minimum combined comprehensive single limit liability insurance of \$2,000,000 or an amount equal to or greater than the coverage as identified in the District's bid documents is required. A Certificate of Insurance must be issued to Mt. San Antonio College which states levels and dates of coverage.

## **BONDABILITY**

The bonding surety is required to be an admitted surety in the State of California with an A- rating or better. The surety will be contacted to confirm willingness to bond to a particular limit. It is required that the contractor include a letter of bondability from the surety indicating its support levels.

In the event that the contractor is unable to obtain a letter of bondability in the time prescribed by the District, the Contractor may be suspended from the qualified contractors' list and not be allowed to bid on District projects until proof of bondability is provided.

## **AFFIDAVIT**

An affidavit as to the veracity, accuracy and completeness of the Prequalification Application being submitted must be completely executed by an authorized agent of the company. Use the form included on Page 17.

## **NOTIFICATION OF PREQUALIFICATION RESULT**

Completed prequalification forms should be submitted 30 days prior to bid, or as advertised. *(All in accordance with Public Contract Code 20651.5)* Contractors will be notified of their prequalification rating as soon as possible via fax, but not later than 24 hours prior to bid opening.

## **PROCEDURE FOR APPEAL OF PREQUALIFICATION RESULTS**

If the contractor chooses to challenge a disqualification, the contractor shall request a hearing by providing a written request within two (2) working days after notification of disqualification. The written request shall set forth in detail all grounds for the request including without limitation all facts, supporting documentation, legal authorities and arguments in support of the grounds for the request; any matters not set forth in the written request shall be deemed waived. All factual contentions must be supported by competent, admissible and creditable evidence.

The District shall establish a committee for the hearing to review the facts and reconsider the disqualification. The committee shall render a final and binding decision within five (5) working days of the hearing.

If a clerical error, or an error of omission, is discovered after a contractor is notified of the review committee's results, the contractor may submit the additional information for final consideration by the committee.

District counsel may be in attendance or on call during the appeal. The contractor or his/her representative is invited to appear in person to bring before the committee any additional or new information. The committee advises the contractor on the points where its rating has fallen below required limits, and allows the contractor to speak to the issues. The contractor is then released from the meeting and the committee members come to consensus on whether or not to allow the contractor to prequalify. The contractor is faxed notification of the committee's decision at least 24 hours prior to bid opening.

# CONTRACTOR'S STATEMENT OF EXPERIENCE AND FINANCIAL CONDITION

Please Type or Print Clearly

## SECTION 1 - GENERAL INFORMATION

Contractor: \_\_\_\_\_  
(as name appears on license)

Contact Person: \_\_\_\_\_ Check One: Corporation \_\_\_\_\_

Title: \_\_\_\_\_ Partnership \_\_\_\_\_

Address: \_\_\_\_\_ Sole Prop. \_\_\_\_\_  
(Street Address)

\_\_\_\_\_ Joint Ven. \_\_\_\_\_  
(City, State, Zip Code)

Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

License No. \_\_\_\_\_ Class(es): \_\_\_\_\_ Exp. Date: \_\_\_\_\_

DIR Registration No. \_\_\_\_\_

Have you ever been licensed in California under a different name or different license number?

Yes  No -- If yes, list all name(s) and license number(s) on a separate sheet.

District Use Only:

Verified by \_\_\_\_\_ on \_\_\_\_\_ by speaking with \_\_\_\_\_.

License Clear: Yes \_\_\_\_\_ No \_\_\_\_\_ (1-800-321-2752 for computer or (626) 815-8468 for local office)

Tax ID Number: \_\_\_\_\_ Date Business Formed: \_\_\_\_\_

Please check the following if they apply to your firm:

- \_\_\_\_\_ DVBE Certified
- \_\_\_\_\_ Large Business (500 or more employees)
- \_\_\_\_\_ Small Business (Under 500 employees)
- \_\_\_\_\_ Disadvantaged Business (Minority Owned)
- \_\_\_\_\_ Woman-Owned & Operated
- \_\_\_\_\_ Sheltered Workshop
- \_\_\_\_\_ Local (Office within 10 miles of the District)

1. In the past 10 yrs., what other business have the principal or corporate officers been involved in? \_\_\_\_\_

2. Has there been any recent change in control of company? (If yes, explain on separate signed page.)

Yes  No

3. Is the company or its owners connected with other companies as a subsidiary, parent, holding or affiliate? (If yes, explain on separate signed page, listing companies, business addresses, and phone numbers.)

Yes  No



## **SECTION 2 – RATING QUESTIONS**

**Highest Possible Rate = 86 Points.**

**A score less than 70 points disqualifies you from bidding projects proposed by Mt. San Antonio College that use this prequalification process as a condition of bidding.**

Question	Response	Points (For Office Use Only)
1. How many years has your firm been in business in California as a contractor under your present business name and license number? (less than 3 Yrs. = 1 pt., 3-6 Yrs. = 3 pts., 6+ = 5 pts.)	_____ Years	_____ pts.
2. How many years' experience does your RMO/RME have as a licensed contractor? (less than 3 Yrs. = 1 pt., 3-6 Yrs. = 3 pts., 6+ = 5 pts.)	_____ Years	_____ pts.
3. Is your firm and RMO/RME in good standing with the Contractors State License Board, or have they ever had their contractor's licenses suspended, put on probation, or revoked? (Check One) (Revoked = 0 pts., suspended = 2 pts., probation = 3 pts., good standing = 5 pts.)	_____ Good Standing _____ Suspended _____ Probation _____ Revoked	_____ pts.
4. How many years has your firm performed construction work under the California Division of the State Architect (DSA) rules and regulations? (less than 3 Yrs. = 1 pt., 3-6 Yrs. = 3 pts., 6+ = 5 pts.)	_____ Years	_____ pts.
5. How many stop notices have been defended in court by your firm and proceeded to judgment against your firm and/or the owner? (0 = 6 pts., 1-3 = 4 pts., >3 = 0 pts.)	_____ Stop Notices	_____ pts.
6. How many legal proceedings, including arbitration, has your firm initiated against an owner? (0 = 6 pts., 1-3 = 4 pts., >3 = 0 pts.)	_____ Legal Proceed	_____ pts.
7. Has an owner ever declared your firm in default on a project in the past 5 years? (Yes = 0 pts., No = 5 pts.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ pts.
8. Has your firm been assessed liquidated damages in the past 5 years? (Yes = 0 pts., No = 6 pts.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ pts.
9. Has an owner ever made a demand on your payment or performance bonds? (Yes = 0 pts., No = 6 pts.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ pts.



<p>10. Has your firm ever had insurance terminated by a carrier in the past 5 years due to an excessive claims history and/or nonpayment of premium? (Yes = 0 pts., No = 5 pts.)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>_____ pts</p>
<p>11. How many OSHA citations has your firm received in the last 5 years? (0 = 5 pts., 1-3 = 3 pts., &gt;3 = 0 pts.)</p>	<p>_____ Citations</p>	<p>_____ pts</p>
<p>12. Does your firm currently have a safety plan which complies with the current OSHA standards? (Yes = 2 pts., No = 0 pts.)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>_____ pts</p>
<p>13. What is your current Worker's Compensation Experience Modification Rate (EMR)? (&lt;1 = 5 pts., 1.0 – 1.5 = 3 pts., 1.6 – 2.0 = 2 pts., &gt;2 = 0 pts.)</p>	<p>_____ Rate</p>	<p>_____ pts</p>
<p>14. How many school projects has your firm completed in California in the past 5 years? (5+ = 5 pts., 4 = 4 pts., 3 = 3 pts., 2 = 2 pts., 1 or less = 0 pts.)</p>	<p>_____ School Work</p>	<p>_____ pts</p>
<p>15. Within the past 5 years, have any of your employees or another entity filed a complaint against your firm with the California Contractors State License Board? If yes, how many complaints were filed? (No = 5 pts., 1 = 4 pts., 2 = 3 pts., 3 = 2 pts., &gt;3 = 0 pts.)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No _____ Complaints</p>	<p>_____ pts</p>
<p>16. Within the past 5 years, have any of your employees filed a complaint with the Labor Board? If yes, how many complaints were filed? (No = 5 pts., 1 = 4 pts., 2 = 3 pts., 3 = 2 pts., &gt;3 = 0 pts.)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No _____ Complaints</p>	<p>_____ pts</p>
<p>17. Has your firm or any principals of your firm* been cited or found guilty of violating any federal, state or local law, rule or regulation regarding a construction contract? (Yes = 0 pts., No = 5 pts.)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>_____ pts</p>
		<p>TOTAL POINTS</p>

\* Principals of the firm are defined as any officers, directors, partners, RMO/RMEs, or any others having an ownership interest in the firm.

**If you answered "Yes" to questions 6-11, and/or 15-17, you must attach an explanation for each on a separate sheet.**

**SECTION 3 - PERFORMANCE**

1. What size projects do you feel your company can undertake:

Single job: \$ \_\_\_\_\_ Total work in progress: \$ \_\_\_\_\_

2. List the two (2) largest public works contracts completed in the past five (5) years:

Owner	Owner Contact Phone # & Email	Job Description	Contract Amount: <u>Original \$</u> Completed \$	Complete Date: <u>Original</u> Actual

3. List all projects completed for School Districts, including community college districts, in the last five (5) years not listed in #2 above: *(Attach separate sheet if needed.)*

Owner	Owner Contact Phone # & Email	Job Description	Contract Amount: <u>Original \$</u> Completed \$	Complete Date: <u>Original</u> Actual

District Use Only:	
Two projects used for rating development: Highest: _____	2nd Highest: _____
Combined Total: _____ x 1.33 = \$ _____	
Public Works Rating: \$ _____ (Above total rounded to the nearest \$100,000)	

4. List at least three (3) current principal Subcontractors:

Company	Material or Service Provided	Contact Name	Phone # & Email

5. List at least two (2) current principal Material Suppliers:

Company	Material or Service Provided	Contact Name	Phone # & Email

<p><b>District Use Only:</b>  <u>Subcontractor/Supplier #1</u>            Co. Name: _____            Pd. at terms: Yes _____ No _____            Comments: _____</p>	<p style="text-align: center;"><b>Supplier - Reference Verification</b></p> Spoke With: _____ Annual Volume: \$ _____ Last usage date: _____ Ver. by _____ on _____
<p><u>Subcontractor/Supplier #2</u>            Co. Name: _____            Pd. at terms: Yes _____ No _____            Comments: _____</p>	Spoke With: _____ Annual Volume: \$ _____ Last usage date: _____ Ver. by _____ on _____

## **SECTION 4 – SAFETY RECORD**

1. List your firm's Workers Compensation Experience Modification Rate (EMR) for the three (3) most recent years. Your EMR should be obtained from your insurance agent.

2017 \_\_\_\_\_ 2016 \_\_\_\_\_ 2015 \_\_\_\_\_

2. Use the three (3) most recent years' OSHA No. 300 log to fill in the following required information:

	<b><u>2017</u></b>	<b><u>2016</u></b>	<b><u>2015</u></b>
Number of fatalities:			
Number of workdays lost:			
No. of lost time due to accidents:			
No. of restricted workday cases:			
No. of medical attention cases:			
Approximate number of employee (direct hire) hours worked <i>(do not include any non-work time even though paid)</i>			

3. Do you hold safety meetings for field supervisors and employees?  Yes  No  
 How often?  Weekly  Bi-Weekly  Monthly  As Needed
4. Does your company conduct project safety inspections?  Yes  No
5. Does your company have a written safety program?  Yes  No
6. Does your company have a safety orientation program for new employees?  Yes  No
7. State any additional areas of your company's safety program and policies that you feel would be appropriate in the District's evaluation.

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## **Interview Questions**

The following questions will be used by the District to interview randomly selected contacts from at least 2 completed projects. No action on your part is necessary; these questions are for your information only. Highest Possible Rate = 110 Points. A score less than 60 points disqualifies you from bidding projects proposed by Mt. San Antonio College that use this prequalification process as a condition of bidding.

1. Are there any outstanding stop notices or liens currently unresolved on contracts that have had notices of completion recorded for more than 90 days? (1 point for each is deducted from overall score.)
2. Did the contractor provide adequate personnel? (Max. 10 points)
3. Did the contractor provide adequate supervision? (Max. 10 points)
4. Was there adequate equipment provided on the job? Max. 10 points)
5. Was the contractor timely in providing submittals, reports and other paperwork, including change order paperwork? (Max. 10 points)
6. Was the contractor timely in completing the project? (Max. 10 points)
7. Were there excessive change orders on the job that can be faulted to the Contractor or his subcontractors? (Max. 10 points)
8. When a change order was issued, did the contractor perform the work well, and did it integrate into the existing work easily? (Max. 10 points)
9. How has the contractor been performing in taking care of warranty items? (Max. 10 points)
10. Did you have difficulty with claims? (Max. 10 points)
11. How would you rate the contractor's overall performance? Would you want to work with them again? (Max 10 points)
12. Does this contractor pay his bills from subcontractor/suppliers on time? (Max 10 points)

**SECTION 5 - INSURANCE**

Do you currently have a minimum of \$1,000,000 Combined Comprehensive Single Limit Liability Insurance?  Yes  No Please provide a Certificate of Insurance as verification

AMOUNT OF INSURANCE \$ \_\_\_\_\_ Years With Ins. Co.: \_\_\_\_\_

Insurance Company Information                      Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: (     ) \_\_\_\_\_  
Contact: \_\_\_\_\_

Note: If under two years with your current insurance company, please list prior insurance companies below, including phone numbers and contact names.

Previous Insurance Company                      Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: (     ) \_\_\_\_\_  
Contact: \_\_\_\_\_  
Years with Ins. Co. \_\_\_\_\_

Previous Insurance Company                      Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: (     ) \_\_\_\_\_  
Contact: \_\_\_\_\_  
Years with Ins. Co. \_\_\_\_\_

District Use Only: Verified by _____ on _____ by speaking with _____ Comments: _____ Certificate of Insurance attached? _____ Yes _____ No                      Expiration date of insurance: _____
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**Exchange this page for a current original certificate of insurance.**

## **SECTION 6 - SURETY INFORMATION**

List all surety companies, not agencies, utilized by your company in the last five (5) years. Please provide a letter stating bondability from surety company.

<b>Company</b>	<b>Contact &amp; Phone# / Email</b>	<b>Largest Bond</b>	<b>List Years Used</b>

Please explain on a separate page, with dates of occurrences, any positive answer to the following questions.

**Has your company, any owner, or affiliated company ever:**

- |   | <b><u>No</u></b>         | <b><u>Yes</u></b>        |
|---|--------------------------|--------------------------|
| 1. Been unable to obtain a bond or been denied a bond for a contract?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Defaulted on a contract forcing a Surety to suffer a loss?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Failed to complete a District contract within the authorized contract time?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Ever declared bankruptcy?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Been in receivership?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Had any arbitration (not litigation) on a contract?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Are there any outstanding liens/stop notices for labor and/or material filed against your firm on any contracts which have been completed or are being completed by your firm? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Is the company involved in litigation related to construction?   | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Have any of the sureties bonding your jobs been required or requested to complete any part of your work during the last five (5) years?  | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. How many projects is your company currently bonded for?   | _____                    |                          |

District Use Only:

Verified by \_\_\_\_\_ on \_\_\_\_\_ by speaking with \_\_\_\_\_

How long has the contractor been a client?: \_\_\_\_\_

Has the contractor ever defaulted on a contract that caused the surety to suffer a loss in the past two years?: \_\_\_\_\_ Yes \_\_\_\_\_ No

Has the contractor ever failed to complete a contract?: \_\_\_\_\_ Yes \_\_\_\_\_ No

Has the contractor ever been suspended, dismissed or declared in default from a project during the past two years?: \_\_\_\_\_ Yes \_\_\_\_\_ No

Has the contractor ever declared bankruptcy or ever been placed in receivership within the past three years?: \_\_\_\_\_ Yes \_\_\_\_\_ No

Are there any positive answers to the prior three questions? If yes, contractor is disqualified.

What is the largest contract this contractor has had bonded through this surety?: \_\_\_\_\_

What maximum size project would your surety most likely bond this contractor for?: \_\_\_\_\_

Are there any outstanding stop notices or liens currently unresolved on contracts that have been completed that you are aware of? \_\_\_\_\_ No \_\_\_\_\_ Yes \_\_\_\_\_ Qty

I Deduction of one point for each lien or stop notice unresolved. Total Points Deducted: \_\_\_\_\_

Comments: \_\_\_\_\_



**Exchange this page for a current original letter of bondability which clearly shows bonding agency's estimate of largest single bond amount most likely approvable.**

## **SECTION 7 - FINANCIAL INFORMATION**

1. **Financial Statement:** Submit the appropriate financial statement with this completed application. A compilation is not acceptable.

**Reviewed or audited statements** will be required for projects under \$10 million.

**Audited statements** will be required for all construction projects totaling \$10 million and over.

District Use Only:		Financial Capacity	
The maximum dollar rating is determined by the lesser of the following:		A. Ten times <u>working capital</u> (current assets less current liabilities) <u>or</u>	
Inability to meet this rating for a specific project will disqualify a contractor for that project.		B. Ten times the <u>net worth</u> (assets less liabilities)	
Based on an _____ Audit	or	_____ Review	Dated: _____
Circle one: Based on Working Capital	Based on Net Worth	\$ _____	
	Line of Credit:	\$ _____	
	Total	\$ _____	
_____ A. _____		_____ B. _____	

2. **Accountant's Certificate of Audit of Financial Statement:** Your accountant must complete and sign one of the following certificates (page 14), depending on the type of financial statement you are submitting with this application. Include the certificate with your completed application.
3. **Accountant's Release Letter:** Your completion of this form (page 15) permits the District to contact your accountant to verify that the financial statement you have submitted is the most recent one.
4. **Financial Institution Release Letter:** Your completion of this form (page 15) permits the District to contact the financial institution that provided a Letter of Credit for this application. You only need to complete this form if you have submitted a Letter of Credit with your application.
5. **General Letter of Credit:** If you wish the District to consider your line of credit as part of its calculation of your financial capacity, you must submit a Letter of Credit from your financial institution with your application. The financial institution may use the following form (Page 16) or it may use its own letterhead as long as it certifies the credit amount and agrees that the credit will not be withdrawn or reduced without 45 days written notice to the District.

**COMPLETE THIS CERTIFICATE FOR AN AUDIT OF FINANCIAL STATEMENT:**

STATE OF: \_\_\_\_\_

We have examined the Financial Statement of \_\_\_\_\_ as of \_\_\_\_\_. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the accompanying financial statement included on pages \_\_\_ to \_\_\_ inclusive, present fairly, in all material respects, the financial position of \_\_\_\_\_ as of \_\_\_\_\_, and the results of their operations and their cash flows for the year(s) then ended in conformity with generally accepted accounting principles.

\_\_\_\_\_  
Print name of Firm

\_\_\_\_\_  
Accountant's Signature

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
License No.

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**COMPLETE THIS CERTIFICATE FOR A REVIEW ONLY OF FINANCIAL STATEMENT:**

I (we) have reviewed the accompanying financial statement of \_\_\_\_\_ as of \_\_\_\_\_. The information included in the financial statement is the representation of the management of the above firm.

Based on my (our) review with the exception of the matter(s) described in the following paragraphs(s), I am (we are) not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in conformity with generally accepted accounting principles.

\_\_\_\_\_  
Print name of Firm

\_\_\_\_\_  
Accountant's Signature

\_\_\_\_\_  
Telephone No.

\_\_\_\_\_  
License No.

(Note this review consists principally of inquiries of management and appropriate analytical procedures applied to this financial data. It is substantially less in scope than an examination in accordance with **generally accepted** auditing standards, the objective of which is the expression of an opinion regarding the financial statements taken as a whole. Accordingly, we have not expressed such an opinion.)

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*Special note to Accountant: The above Certificates of Accountant shall not be made by any individual who is the regular employ of the individual, partnership or corporation submitting the statement; nor by any individual who is a member of the firm with more than a ten percent financial interest.*

## ACCOUNTANT'S RELEASE LETTER

By signing the form below, I authorize Mt. San Antonio College to contact our company's licensed accounting firm to verify our most recent audited or reviewed financial statement. I understand the financial statement is confidential information and is not open to public inspection.

Name	Contractor's Signature
Title	
Company Name	
Date	

District Use Only: Verified by _____ on _____ by speaking with _____.
--

## FINANCIAL INSTITUTION RELEASE LETTER (For use only when augmenting financial rating with a Letter of Credit)

By signing the form below, I authorize Mt. San Antonio College to contact our financial institution to verify our line of credit information. I understand this information is confidential information and is not open to public inspection.

Name	Signature
Title	
Company Name	
Date	

District Use Only: Verified by _____ on _____ by speaking with _____.
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*The following form may be completed by your financial institution to augment your financial rating. If it prefers, your institution may issue a Letter of Credit on its own letterhead, provided the Letter of Credit contains substantially the same provisions, and is addressed to the District and bears an original signature. A letter of credit is optional, not mandatory. It may be used to increase your financial capacity by the value of the letter of credit.*

*General lines of credit are not accepted. A letter of credit must be issued specifically to the District as outlined below to be used.*

TO: **Mt. San Antonio College**  
**1100 North Grand Avenue**  
**Walnut, CA 91789**

ATTENTION: **Teresa Patterson, Director, Purchasing**

SUBJECT: **GENERAL LETTER OF CREDIT**

Reference is made to the prequalification of: \_\_\_\_\_  
Name of Contractor

Under Board Rules of the Board of Trustees pertaining to the construction, alteration and maintenance of School District Facilities, we certify that the above Contractor has been extended an unqualified line of credit not to exceed \$\_\_\_\_\_ and that such credit will not be withdrawn or reduced without 45 days written notice to the District.

\_\_\_\_\_  
Name of Financial Institution Institution No. Code

Address: \_\_\_\_\_  
\_\_\_\_\_

Signature/Date: \_\_\_\_\_

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

**SECTION 8 - AFFIDAVIT**

**DECLARATION**

I, \_\_\_\_\_, hereby declare that I am the  
(printed name)  
\_\_\_\_\_ of \_\_\_\_\_  
(title) (name of applicant firm)

submitting this Prequalification Statement; that I am duly authorized to execute this Prequalification Statement on behalf of the above named firm; and that all information set forth in this Prequalification Statement and all attachments hereto are, to the best of my knowledge, true, accurate, and complete as of its submission date.

I declare, under penalty of perjury, that the foregoing is true and correct and that this declaration was

Subscribed at \_\_\_\_\_ (location and city), County of \_\_\_\_\_  
\_\_\_\_\_, State of \_\_\_\_\_

on \_\_\_\_\_ (date).

Signature of Applicant: \_\_\_\_\_

(If signed by other than the sole proprietor, a general partner, or corporate officer, attach original notarized power of attorney or corporate resolution.)

All information submitted for prequalification evaluation will be considered official information acquired in confidence and the District will maintain its confidentiality to the extent permitted by law.

The submitter of the foregoing statement of experience and financial condition has read the same and it is true to the best of his knowledge. The statement is for the purpose of inducing the District to supply the submitter with plans and specifications and any depository, vendor, or other agency named therein is hereby authorized to supply the District with any information necessary to verify the statement. Should the foregoing statement at any time cease to properly and truly represent the financial condition of the submitter in any substantial respect, the submitter will refrain from further bidding on District work until a revised and corrected statement is submitted.

District Use Only:

ATTACH PAST PERFORMANCE - REFERENCES VERIFICATION SHEETS

**Exchange this page a copy of the Secretary of State indicating the standing of the corporation or limited liability company.**

**Go to <https://businesssearch.sos.ca.gov/> to conduct a search and print page.**

**Exchange this page for all other appropriate attachments mentioned herein, such as financial statement, certificate of incorporation and minutes, etc., as well as any additional information you wish to add.**