

STATEMENT OF BIDDER'S QUALIFICATION

This proposal is submitted in the name of:

_____ *(print or type legal name of organization)*

The undersigned hereby designates his business address, to which all notices, directions and/or other communications shall be served or mailed, to be:

STREET _____
CITY _____
STATE _____
TELEPHONE # _____
FACSIMILIE # _____

The undersigned hereby declares that he has the legal status check below:

- Individual
- Individual Doing Business Under an Assumed Name
- Co-Partnership, the assumed name of the co-partnership is registered in the County of _____, State of _____.
- Corporation, incorporated under the laws of the State of _____ the corporation is:
 ___ licensed to do business in the State of _____.
 ___ not licensed to do business in the State of _____.

Date of Organization/Corporation: _____

The names, titles and home address of all persons who are officers/partners in the organization:

<u>NAME AND TITLE</u>	<u>HOME ADDRESS</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

General type of work performed by your organization:

Background and experience of principal members of your organization:

Financial data submitted: *Check one below and attach to this Statement.*

- Annual Financial Statement, certified by a C.P.A.
- Letter of Credit from a Bank showing collateral required in extending such Line of Credit.
- Other documentation substantiating financial ability to perform the Contract.

Specify Types: _____

Major equipment available for this Contract:

Recent Contracts Completed: *(Include all contracts completed in the last five (5) years)*

<u>Project</u>	<u>Owner</u>	<u>Amount</u>	<u>Completion Date</u>

Contract Completed: *(Include all contracts in progress)*

<u>Project</u>	<u>Owner</u>	<u>Amount</u>	<u>Award Date</u>

Has your organization ever failed to complete and/or defaulted on any contracts awarded to your organization?

_____ No
_____ Yes, see attached detailed statement as to where, why, when, and with whom the uncompleted and/or defaulted contract was with. (*Attach Statement*)

Will you, upon request, fill out a detailed Financial Statement and furnish the **Owner** any other information that he may deem necessary?

_____ No
_____ Yes

Does any member or responsible employee of your organization serve in any official capacity, appointed and/or elected, for the owner?

_____ No
_____ Yes--(*List names and positions of all such members and/or employees*)

THE UNDERSIGNED, HEREBY AUTHORIZES AND REQUESTS ANY PERSON, FIRM AND/OR CORPORATION TO FURNISH ANY INFORMATION REQUESTED BY THE OWNER IN VERIFICATION OF THE RECITALS SET FORTH IN THIS STATE OF BIDDER'S QUALIFICATIONS

Signed by: _____
Title: _____
Date: _____

Subscribed and sworn to before me on the _____ day of _____, 20____,
a Notary Public in and for the County of _____, State of _____.

My commission expires: _____, 20____.

Notary Public