

FINANCIAL PROJECT NO.: 427552-7-52-01

CONTRACT NO.: E9089

PROJECT NAME: Burns Building Switch and Transformer Replacement

PROJECT LOCATION: Florida Department of Transportation, Hayden Burns Building, 605 Suwannee St., Tallahassee, FL 32399-0450

PREQUALIFICATION: Each bidder must meet the following qualifications and submit proof to the Department of Transportation, Contracts Administration Office:

1. Prime Contractor has been in business for at least five (5) years.
2. Project Manager and Superintendent has minimum of five (5) years' experience in construction in occupied building.
3. The Prime Contractor and sub-contractor combination has completed at least two (2) projects in the past five (5) years, on projects of similar size and scope
4. The Prime Contractor will submit a financial statement that shows a positive net worth. *Financial Statements will remain confidential and are not subject to Public Records Requests per Florida Statute 119.0714(c).*
5. The Bidder and/or sub-contractor will have applicable State of Florida licenses to pull required permits. Include copies of applicable licenses in the qualifications package submittal.

Firms must submit their qualifications no later than November 9, 2016 at 2 P.M. to the Florida Department of Transportation, Contracts Administration Office, 605 Suwannee St., Tallahassee, FL 32399-0450.

Prequalification submissions will be reviewed by the Qualifications Review Committee. **The list of Bidders deemed to be Qualified to Bid will be posted at 4 P.M. on November 14, 2016 at statements wwwfdot.gov/contracts/FCO/FCO.shtm.** Financial statements are exempt from public record and will be kept confidential per Florida Statute (FS) 119.0714(c).

**CONTRACTOR'S EXPERIENCE QUESTIONNAIRE
AND FINANCIAL STATEMENT**

Project Name: Burns Building Switch and Transformer Replacement

Project Location: Florida Department of Transportation, Hayden Burns Building, 605 Suwannee St., Tallahassee, FL 32399-0450

Insert code number of trade or trades for which you are qualified to bid on the basis of previous experience in accordance with attached detailed instructions, each on the respective line shown below:

1. _____

2. _____

3. Is your organization currently pre-qualified with any governmental agency? _____

If so, please list. _____

4. Have you, in the previous five years, been denied a contract award on which you submitted the low bid in competitive bidding, or been refused prequalification? _____

If so, please list and describe: _____

5. Submitted by: _____ Date: _____

Address: _____

6. Check appropriate box:

- A Corporation A Co-Partnership An Individual A Joint Venture

The Contractor acknowledges that this Experience Questionnaire and Financial Statement is made for the express purpose of inducing the Owner to whom it is submitted to award a contract to the contractor, and further the Contractor acknowledges that the agency may at its discretion, by means which the Owner may choose, determine the truth and accuracy of all statements made by the Contractor herein.

SECTION "A" - FINANCIAL STATEMENT

As of _____ (Date)

ASSETS

7. CASH* \$ _____

ACCOUNTS RECEIVABLE

- 8. From Government Contracts Completed _____
- 9. From Non-Government Contracts Completed _____
- 10. Claims included in 8 and 9 not yet approved or in litigation \$ _____
- 11. From Government Contracts in Process _____
- 12. From Non-Government Contracts in Process _____
- 13. Claims included in 11 and 12 not yet approved or in litigation _____
- 14. Retainage included in 11 and 12 _____
- 15. Other** (list) _____

NOTES RECEIVABLE

- 16. Due within 90 days** _____
- 17. Due after 90 days** _____

INVESTMENTS

- 18. Listed securities - present market value _____
- 19. Unlisted securities - present value _____

BID DEPOSITS

- 20. Recoverable within 90 days _____
- 21. Recoverable after 90 days _____

ACCRUED INTEREST

- 22. Receivable on notes _____
- 23. Receivable on Investments _____
- 24. Other (list) _____

25. REAL ESTATE (Book Value or Market, whichever is less) _____

26. INVENTORIES (Not included in receivable billing & at present value) _____

27. EQUIPMENT-NET BOOK VALUE
(Supply list by cost, depreciation, net book value) _____

OTHER ASSETS

- 28. Contract Costs in excess of Billings \$ _____
- 29. Cash Surrender Value of Life Insurance _____
- 30. Receivables from Officers and Employees _____

SECTION "A" - FINANCIAL STATEMENT

31. Other (list)	_____

32. TOTAL ASSETS	\$ _____
*Do not include deposits for bids or other Guarantees	
**Do not include receivables from officers and employees	
ACCOUNTS PAYABLE	
33. Due within 1 year	_____
34. Due after 1 year	_____
NOTES PAYABLE	
35. Due within 1 year	_____
36. Due after 1 year	_____
37. Officers and Employees	_____

38. TAXES PAYABLE	_____
39. ACCRUED AND ACTUAL PAYROLL PAYABLE	_____
40. MORTGAGES PAYABLE	_____
OTHER LIABILITIES	
41. Federal Income Tax Provision	_____
42. Deferred Income	_____
43. Other (list)	_____

NET WORTH	
44. (If individual proprietorship or partnership)	_____
CAPITAL STOCK	
45. Common Issued and Outstanding	_____
46. Preferred Issued and Outstanding	_____
47. Treasury Stock	\$ _____
CAPITAL SURPLUS	
48. Earned Surplus Prior Years	_____
49. Earned Surplus Current Year	_____
50. TOTAL LIABILITIES AND NET WORTH	\$ _____

NOTE: IF ADDITIONAL SPACE IS REQUIRED, PLEASE NOTE AND ATTACH SCHEDULE TO STATEMENT

51. Dated this _____ day of _____, YR _____.

Name of Organization

By: _____
Signature/Title

SECTION 'B' - EXPERIENCE QUESTIONNAIRE

52. If a Corporation, answer this:

Date of incorporation _____

In what State _____

Name of Officers:

President _____

Vice President _____

Vice President _____

Secretary _____

Treasurer _____

If a Partnership or Individual Proprietorship, answer this:

Date of organization _____

If a partnership, state whether partnership is general, limited association _____

Name and Address of Partners:

53. a. How many years has your organization been in the construction business?

b. How many years under your present business name?

c. How many years under previous business name? (List other names)

<i>SUBSIDIARY OR AFFILIATED COMPANIES IN WHICH PRINCIPALS HAVE FINANCIAL INTEREST</i>

NAME AND ADDRESS OF SUBSIDIARY
OR AFFILIATED COMPANIES

EXPLAIN IN DETAIL THE
PRINCIPAL'S INTEREST IN THIS
COMPANY AND NATURE OF
BUSINESS

NUMBER OF FULL TIME PERSONNEL WITHIN YOUR ORGANIZATION

- | | | | |
|---|-------|-------|-------|
| 54. a. Clerical Personnel | _____ | _____ | _____ |
| b. Engineers & Architects | _____ | _____ | _____ |
| c. Supervisors, Foremen, or Superintendents | _____ | _____ | _____ |
| d. Skilled Employees including Technicians | _____ | _____ | _____ |
| e. Unskilled Employees | _____ | _____ | _____ |
| f. Estimators | _____ | _____ | _____ |
| g. Total number of full time personnel | _____ | _____ | _____ |

55. WHAT IS THE CONSTRUCTION EXPERIENCE OF THE PRINCIPALS AND SUPERVISORY PERSONNEL OF YOUR ORGANIZATION? (Asterisk any personnel likely to be assigned to project being bid.)

PRINCIPAL'S NAME	TITLE	YEARS OF CONSTRUCTION EXPERIENCE	IN WHAT CAPACITY AND WITH WHOM
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56. SUPERVISORY PERSONNEL	TITLE	YEARS OF CONSTRUCTION EXPERIENCE	IN WHAT CAPACITY AND WITH WHOM
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57. Within the previous 3 fiscal years has your organization or predecessor organizations ever failed to complete a project? If so, state name of organization and reason thereof.

58. Within the previous 3 fiscal years has your organization been involved in litigation? _____. If so, please list and explain nature and current status.

STATUS OF UNCOMPLETED CONTRACTS

As of: _____ (date)

62. Give full information about all of your present contracts. In Column C insert "S" if a subcontractor or "P" if a prime contractor, whether in progress or awarded but not yet begun; and regardless of with whom contracted.

A	B	C	D	E
Project Description Location & Owner	Design Architect And/Or Design Engineer	Total Amount of Your Contract (Or Subcontract)	Amount In Column C Sublet To Others	Uncompleted Amount of Contract
Total				

COMPLETE THE FOLLOWING:

Net Total Billings for Previous 3 Fiscal years:

Average Backlog for Previous 3 Fiscal Years: (Estimated total value of uncompleted work on outstanding contract)

YR _____ \$ _____

YR _____ \$ _____