REQUEST FOR CONTRACTOR PRE-QUALIFICATION

RFPQ NO. **16-EEP-** SCO # 09-07804-01

SCO NO. SCO # 09-07804-01

PROJECT TITLE: **Watts Wetland and Stream Restoration Project**

PRE-QUALIFICATION RESPONSE DUE DATE: **August 21, 2013 at 4:00 pm**

IMPORTANT NOTICE TO ALL APPLICANTS

Read this document in its entirety and submit the required information in the format described in this Request For Pre-Qualification.

CONTRACTOR ELIGIBILITY:
This prequalification is open to those Contractors that satisfy the minimum qualifications stated herein.

Failure to answer all of the following questions may result in disqualification. If general contractor has any questions, contact the person listed below under "Submitted to." Completing this questionnaire does not guarantee pre-qualification. The State agency/institution reserves the unqualified right to reject any or all submittals and to waive informalities. The State agency/institution has developed a plan to meet or exceed goals set by GS 143-128 for the participation of Historically Underutilized Businesses (HUB) in public construction contracts. Contractors are expected to be familiar with these initiatives and to comply with program requirements.

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INTRODUCTION

1.1 DEFINITIONS.

Definitions for the purposes of this RFPQ include:

Agency. The NC Ecosystem Enhancement Program (NCEEP). The NCEEP is a program of the NC Department of Environment and Natural Resources.

Business Days. The normal days of operation for the NCEEP; specifically Monday, Tuesday, Wednesday, Thursday, and Friday.

Designer. Individual, company, or firm responsible for the project design, construction management, and administration of construction contracts associated with this pre-qualification.

Contractor. Individual or company, or firm submitting a pre-qualification package for this project. Only those contractors deemed pre-qualified will be eligible to submit a bid for the construction of this project.

Request for Pre-Qualifications (RFPQ). Formal procurement document in which services needed are identified and firms are invited to provide their qualifications to provide the services.

Submittal. A Contractor's submitted response to this RFPQ.

1.2 PURPOSE AND BACKGROUND.

The NC Ecosystem Enhancement Program (hereinafter, "AGENCY") is soliciting statements of qualifications from CONTRACTORS interested in providing construction services. Pursuant to NC Session Law 2011-343 only CONTRACTORS who have prequalified under procedures established by the AGENCY shall be eligible to bid AGENCY construction projects. Construction contracts issued under this subdivision shall be exempt from the requirements of Article 8B of Chapter 143 of the General Statutes.

1.3 OBJECTIVE.

The objective of the Request for Pre-Qualification (RFPQ) is to identify multiple estimates for a minimum of three or more responsible CONTRACTORS who meet the AGENCY's qualification requirements to provide the goods and/or services outlined in this RFPQ to the AGENCY. All qualified CONTRACTORS are invited to participate by submitting responses, as further defined within this RFPQ.

This RFPQ will not result in contract award. Instead, this RFPQ will establish a list of multiple (at least three) or more qualified CONTRACTORS who will be eligible to submit bids on future solicitation for this project.

1.4 MINIMUM QUALIFICATIONS.

The CONTRACTOR must be currently licensed to do business in the state of North Carolina and at a minimum have General Contractors License: **Highway**.

CONTRACTORS who do not meet these minimum qualifications will be rejected as non-responsive and will not receive further consideration. Any submittal that is rejected as non-responsive will not be evaluated or scored.

1.5 REFERENCES.

The Department of Environment and Natural Resources, Ecosystem Enhancement Program reserves the right to request and verify references. Upon request references must submit within 3 business days. Failure to provide references will cause your proposal to be rejected.

2 PRE-QUALIFICATION PROCEDURES

2.1 AGENCY CONTRACT ADIMISTRATOR.

The AGENCY Contract Administrator is the sole point of contact in the AGENCY for this pre-qualification. All communication between the CONTRACTOR and the AGENCY upon receipt of this RFPQ shall be with the AGENCY Contract Administrator.

NOTE: All inquiries regarding the bidding of a construction contract as a result of this pre-qualification process should be directed to the Project Manager named in Section 3.1 of this document.

Direct all inquiries concerning this Request for Pre-Qualification in writing via email or fax to:

Name: Jeff Schaffer

Street Address: NC Ecosystem Enhancement Program
1652 Mail Service Center
Raleigh, NC 27699-1652

Fax Number: 919-715-0710

E-Mail Address: jeff.schaffer@ncdenr.gov

Any other communication will be considered unofficial and non-binding by the AGENCY. CONTRACTORS are to rely on written statements issued by the AGENCY Contract Administrator Communication directed to parties other than the AGENCY Contract Administrator may result in disqualification of the CONTRACTOR.

2.2 SCHEDULE OF PRE-QUALIFICATION ACTIVITIES

The AGENCY reserves the right to revise the following schedule:

Activity	Number of Business Days	Date
Issue Request for Qualifications	0	
Pre-qualification submittals due	21	
Notification of pre-qualification results	10	

2.3 PRE-QUALIFICATION SUBMITTALS.

CONTRACTORS are required to submit three (3) original hardcopies, and one (1) digital copy of their RFPQ submittal. CONTRACTORS may submit the digital copy on a CD or thumb drive; PDF format is preferred. The submittal, whether mailed or hand delivered, **must arrive at the AGENCY no later than 4:00 p.m., Eastern Standard Time, on the submittal due date.**

2.3.1. Preparing a Response

When preparing a response, the supplier must consider the following instructions:

1. Use the provided worksheets to prepare your response. Enter your responses directly into the worksheet. Unless otherwise directed, **do not insert** “see attached file” (or similar statements) in the worksheet to reference separate documents.
2. Answer each question in sufficient detail for evaluation while using judgment with regards to the length of response.
3. Proofread your response and make sure it is accurate and readily understandable.
4. The RFPQ response must provide information in the same order as presented in this document with the same headings. This will not only be helpful to the evaluators, but should assist the CONTRACTOR in preparing a thorough response.

The CONTRACTOR's RFPQ submittal must be prepared on eight and one-half inch by eleven inch (8 ½" x 11") paper with tabs separating the major sections. The three major sections are to be submitted in the order noted below:

1. Request for Pre-Qualifications with a completed Pre-qualification Form for Single Prime Contractors
2. Mandatory attachments
    a. NC General Contractors License
    b. Surety Letter
    c. Insurance Certificate
3. Other attachments
    a. Financial Balance Sheet
    b. OSHA 300 Log
    c. Historically Underutilized Business (HUB) Plan

The CONTRACTOR's RFPQ submittal is to be sent to the AGENCY Contract Administrator at the address noted in Section 2.1. The envelope should be clearly marked to the attention of the AGENCY Contract Administrator.

CONTRACTORS mailing their RFPQ submittal should allow normal mail delivery time to ensure timely receipt of their submittals by the AGENCY Contract Administrator. CONTRACTORS assume the risk for the method of delivery chosen. The AGENCY assumes no responsibility for delays caused by any delivery service.

RFPQ submittals sent to the AGENCY via facsimile (FAX) machine, telephone, and electronic means, including but not limited to email, in response to this RFPQ will not be accepted.

Late submittals will not be accepted and will be automatically disqualified from further consideration.

2.4 CONFIDENTIALITY.

All submittals and any accompanying documentation become the property of the AGENCY and will not be returned. All information received shall remain confidential until a contract resulting from this RFPQ is executed by the successful CONTRACTOR and the State of North Carolina.

Any information in the submittal that the CONTRACTOR desires to claim as proprietary and exempt from disclosure under the provisions of NCAC T01:05B.1501 or other state or federal law that provides for the non-disclosure of your document, must be clearly designated. Each page containing the information claimed to be exempt from disclosure must be clearly identified by the words "CONFIDENTIAL" or "PROPRIETARY INFORMATION" printed on the lower right hand corner of the page. Marking the entire submittal Confidential or as Proprietary Information will not be honored.

2.5 RESPONSIVENESS.

All submittals will be reviewed by the AGENCY Contract Administrator to determine compliance with administrative requirements and instructions specified in this RFPQ. The CONTRACTOR is specifically notified that failure to comply with any part of the RFPQ may result in rejection of the submittal as non-responsive.

The AGENCY also reserves the right, however, at its sole discretion to waive minor administrative irregularities.

2.6 COSTS TO PROPOSE.

The AGENCY will not be liable for any costs incurred by the CONTRACTOR in preparation of a submittal, in conduction of a presentation, or any other activities related to responding to this RFPQ.

2.7 NO OBLIGATION TO CONTRACT.

This RFPQ does not obligate the State of North Carolina or the AGENCY to contract for services specified herein. The pre-qualified CONTRACTORS will receive a separate bid solicitation for the construction of the project.

2.8 REJECTION OF SUMBITTALS.

The AGENCY reserves the right, at its sole discretion, to reject any and all submittals received without penalty and not issue a contract or multiple contracts as a result of this RFPQ.

2.9 AGENCY'S RIGHT TO AMEND AND/OR CANCEL THE RFPQ.

The Agency reserves the right to amend this RFPQ prior to the end date and time. Amendments will be made in writing and publicly posted as one or more addenda to the NC Interactive Purchasing System (IPS) website. Each CONTRACTOR is individually responsible for reviewing addenda and any other posted documents, and making any necessary or appropriate revisions, additions or deletions to the CONTRACTOR's response. All CONTRACTORS are encouraged to frequently check the IPS for additional information. Finally, the Agency reserves the right to cancel this RFPQ at any time.

3 EVALUATION OF PRE-QUALIFICATION PACKAGES

3.1 EVALUATION.

Responsive submittals will be evaluated in accordance with the requirements stated in this solicitation and any addenda issued. The evaluation of submittals shall be accomplished by an evaluation team to be designated by the AGENCY, which will determine the ranking of the submittals. The pre-qualification evaluation team shall consist of the following project team members:

- the Project Manager, Heather Smith
- the Review Engineer, Lin Xu
- Science and Analysis, Mac Haupt
- And/or Other Designated Evaluation Team Members As Needed

3.2 SCORING .

All pre-qualification submittals will be evaluated using a pre-qualifications matrix. The matrix is divided into three sections:

Section 1. Minimum Requirements	zero points; must meet minimum requirements to proceed to Section 2 (any answer of yes without and acceptable explanation results in disqualification)
Section 2. General Requirements	up to 60 points; Contractor's submittal must earn a minimum of 30 points to proceed to Section 3
Section 3. Project-specific Requirements	up to 40 points

The maximum possible score will be 100 points. Submittals receiving a score of at least 70 points will be deemed pre-qualified.

3.3 NOTIFICATION.

The AGENCY shall publish the results of the pre-qualification on the NC Interactive Purchasing System (IPS) website. The results will also be posted on the AGENCY website.
NOTE: Request for information regarding the bidding of any construction contract as a result of this pre-qualification process must be directed to the Project Manager named in Section 3.1 of this document.

3.4 DEBRIEFING OF UNSUCCESSFUL CONTRACTORS.

Upon request, a debriefing conference will be scheduled with an unsuccessful CONTRACTOR. The request for a debriefing conference must be received by the AGENCY Contract Administrator within five (5) business days after the results are posted to the NC Interactive Purchasing (IPS) website. The AGENCY will conduct a debriefing conference within five (5) business days of the request.

Debriefing conferences may be conducted in person or on the telephone and will be scheduled for a maximum of one (1) hour. Discussion will be limited to a critique of the requesting CONTRACTOR's RFPQ submittal. Comparisons between submittals or evaluations of other submittals received and/or evaluated will not be allowed.

3.5 PROTEST PROCEDURE.

Upon completing a debriefing conference, the CONTRACTOR is allowed five (5) business days to file a protest with the AGENCY Contract Administrator. Protests may be submitted by facsimile, but must be followed by the original document within two (2) business days.

CONTRACTORS protesting the results of the prequalification shall follow the procedures described below. Protests that do not follow these procedures shall not be considered. This protest procedure constitutes the sole administrative remedy available to CONTRACTORS under this pre-qualification.

All protests must be in writing and signed by the protesting party or an authorized Agent. The protest must state the grounds for the protest with specific facts and complete statements of the action(s) being protested. A description of the relief or corrective action being requested shall also be included. All protests shall be addressed to the AGENCY Contract Administrator.

Only protests stipulating an issue of fact concerning the following subjects shall be considered:

- A matter of bias, discrimination or conflict of interest on the part of the evaluator
- Errors in computing the score
- Non-compliance with procedures described in the pre-qualification document or AGENCY policy

Protests not based on procedural matters will not be considered. Protests will be rejected as without merit if they address issues such as:

- An evaluator's professional judgment on the quality of a submittal
- AGENCY'S assessment of its own and/or other agencies' needs or requirements.

Upon receipt of a protest, a protest review will be held by the AGENCY. The protest review team shall consist of the following AGENCY staff:

- the Contract Administrator
- the Departmental Purchasing Agent
- the Contracting/Business Manager
- And/or Other Designated Protest Team Members As Needed

The protest review team will consider the record and all available facts and issue a decision within ten (10) business days of receipt of the protest. If additional time is required, the protesting party will be notified of the delay.

In the event a protest may affect the interest of another CONTRACTOR that provided a submittal, such CONTRACTOR will be given an opportunity to submit its views and any relevant information on the protest to the AGENCY Contract Administrator.

The final determination of the protest shall:

- Find the protest lacking in merit and uphold the AGENCY's action.
- Find only technical or harmless errors in the AGENCY's acquisition process and determine the AGENCY to be in substantial compliance and reject the protest.
- Find merit in the protest and provide the AGENCY options which may include:

- Correct the errors and re-evaluate all submittals
- Cancel the Original Pre-Qualification process and re-issue the solicitation document to begin a new process
- Make other findings and determine other courses of action as deemed fair, reasonable and appropriate

If the AGENCY determines that the protest is without merit, the AGENCY will notify the CONTRACTOR of the rejection and no further action will be taken by the AGENCY regarding the protest. If the protest is determined to have merit, one of the alternatives noted in the preceding paragraph will be taken.

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4.

NC Ecosystem Enhancement Program

Pre-Qualification Form for Single Prime Contractors

Submitted to:

Name	Jeff Schaffer
Mailing Address	NC Ecosystem Enhancement Program 1652 Mail Service Center Raleigh, NC 27699
Fax Number	919-715-0710
E-Mail Address	jeff.schaffer@ncdenr.gov

Project:

Project Name	Watts Wetland and Stream Restoration Project
AGENCY	NCDENR Ecosystem Enhancement Program
Location	Perquimans, North Carolina
Designer	Ecological Engineering
Project Description	The Watts project is located near the Little River in Perquimans County, North Carolina. The proposed construction activities involve the restoration of 1,500 linear feet (LF) and restoring 20.4 acres of non-riparian wetlands.

NCEEP Pre-Qualification Form for Single Prime Contractors

Section 1. MINIMUM REQUIREMENTS

1.a. General Company information. Provide the following company information.

Company Name			
Physical Address			
Mailing Address:			
City:		State/ Zip:	
Telephone:		Fax:	
Primary Contact Name:			
Primary Contact Email:			
Secondary Contact Name:			
Secondary Contact Email:			

1.b. Business type. Check the appropriate box and provide the company officer information.

___ Corporation

___ Partnership

___ Limited Liability Company

___ Sole Proprietor

___ Joint Venture

Title	Full Name	Years of Service

1.c. Licensing information. Does your company meet the minimum licensing requirement for this project?

__No
__Yes If yes attach a copy of your NC General Contractors License(s)

1.d. Bonding. Your surety company bond rating shall be rated “A” or better under the A.M. Best Rating system or The Federal Treasury List. Provide a letter from your bonding company, on the bonding company's letterhead, indicating the following:

- your company's name
- your company’s address
- your company's aggregate work capacity (the maximum amount of work your company is capable of undertaking for any and all projects)
- your company’s single limit (the estimated cost of a single project that your company is capable of undertaking)
- surety company’s bond rating
- bonding company's representative’s contact information

1.d.(1) Have you provided a letter from your surety company describing your company's bonding capacity?

__Yes
__No

1.d.(2) In the last five years have any funds been expended by a surety company on your firm's behalf?

__No
__Yes If yes, provide an explanation:

1.d.(3) List all surety companies that have provided bonds for your company for the past five (5) years, provide explanation, required, if more than one company.

Surety Company	Project Name	Bond Value	Date of Bond

1.e. Litigation/Claims.

1.e.(1) Has your company been involved in any suits or arbitration proceedings within the last five years?

__No
__Yes If yes, provide explanation:

1. e.(2) Are there currently any judgments, claims, arbitration proceedings or suits pending or outstanding against your company, its officers, owners, or agents?

__No
__Yes If yes, provide explanation:

1.f. Insurance. In order to prequalify, firms must indicate that they can provide evidence of insurance coverage as follows:

- Worker's Compensation insurance as required by law and Employer's Liability Insurance coverage with minimum limits of $100,000.
- General liability insurance with minimum limits of $500,000 per occurrence for bodily injury and $100,000 per occurrence/$300,000 aggregate for property damage.

1.f.(1) Have you attached a copy of your insurance certificate?

__Yes
__No

2.a. Completion of Work/Charges/Barred from Bidding/USACE.

2.a.(1) In the last five years, has your company failed to complete work awarded to it?

__No
__Yes If yes, provide the following information

Project Name	Contract Dollar value	Contract year(s)	Owner Contact Information	Designer Contact Information	Reason for not completing the work	Supporting documentation provided?

2.a.(2) Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging?

__No
__Yes If yes, provide the following information

Project Name	Year	Reason

2.a.(3) Has your present company, its officers, owners, or agents ever been barred from bidding public work in North Carolina or any other state?

__No
__Yes If yes, provide the following information

Project Name	Case Number	Year	Reason

2.a.(4) In the last five years, has your company been issued a Cease and Desist Order by the US Army Corps of Engineers?

__No
__Yes If yes, provide the following information

Project Name	Case Number	Reason for Order	Resolution

Section 2. GENERAL REQUIREMENTS.

2.a. Experience.

2.a.(1) Has your company or primary agents or officers operated under any names other than the name(s) listed in Section 1.a. General Company information.

__No
__Yes If yes provide the following information:

Company name	Office Location	Company type (Corporation, Partnership, Proprietorship, Other)	State of incorporation	Date of establishment	Number of years in business	Number of full-time permanent employees

2.a.(2) Within the last five years, has your company performed construction work for the State of North Carolina and/or related public agencies and/or this specific agency/institution?

__No
__Yes If yes provide the following information:

State of NC Project ID number	Project Name	Dollar Value	Owner Agency	Design Firm	Completion Date

2.a.(3) Has your organization been pre-qualified to bid on a State agency/institution project and failed to submit a bid without notice of good cause, a minimum of one day before bid date?

__No
__Yes If yes provide the following information:

State of NC Project ID number	Project Name	Bid Opening Date	Reason for not submitting a bid

2.b. Office Location.

2.b.(1) Will this project be managed and directed from an office in NC? An office in NC is defined as "The principal place from which the trade or business of the bidder is directed or managed," per GS 143-59 (c).

__Yes
__No If no provide explanation:

2.c. Workload and Staffing.

2.c.(1) Provide the following information for your firm's current contracts.

Project Name	Owner Agency	Design Firm	Contract Dollar Value	Percent Complete	Description of Work

2.c.(2) List your company's key personnel involved in the above listed projects.

Project Name	Key Personnel Name	Personnel's Role

2.c.(3) Are the key personnel listed in 2.c(2) also proposed on any other projects for which bidding and contracting is pending?

__No
__Yes If yes, describe the general availability and qualifications of potential substitutes:

2.d. Quality Control/Administration.

2. d. (1) Describe the company's work inspection and approval procedures:

2. d. (2) Describe management procedures for processing Requests for Information (RFI's), shop drawings, submittals, value engineering, change orders, proposals, and requests for deviations. Identify key personnel assigned to these or other special issues.

2.d. (3) Describe company's approach to dispute and claims resolution.

2.e. Financials.

As provided by statute, the AGENCY will consider keeping trade secrets which the CONTRACTOR does not wish disclosed confidential. Each page shall be identified in boldface at the top and bottom as "CONFIDENTIAL" by the CONTRACTOR. Cost information shall not be deemed confidential. In spite of what is labeled as a trade secret, the determination whether it is or not will be determined by North Carolina law.

2.e.(1) Attach latest balance sheet and income statement if available, based on company type. Audited statements are preferred. If not available, attach a copy of the latest annual renewal submission to the relevant licensing board. Firm must submit financial data and may clearly indicate a request for confidentiality to avoid this item becoming part of a public record.

Have you attached a balance sheet?

__Yes
__No If no, provide explanation:

2.f. Liquidated Damages/Claims.

2.f.(1) In the last five years, has your company paid liquidated damages on a project?

__No
__Yes If yes, provide the following information

Project Name	Contract dollar value	Contract year(s)	Owner Contact Information	Designer Contact Information	Reason(s) for paying liquida damages	Supporting documentation provided?

2.f.(2) In the last five years has your company filed a claim with the NC State Construction Office?

__No
__Yes If yes, provide the following information

SCO Project ID Number	Project Name	Case Number	Reason for claim(s)	Supporting documentation provided?

2.g. Safety Record.

2.g.(1) List your company's Experience Modification Rate (EMR) for past three years:

____ Current year EMR rate
____ 20_ _ EMR rate
____ 20_ _ EMR rate

2.g.(2) Have you attached OSHA 300 log (Rev. 01/2004)?

__Yes
__No If no, provide an explanation:

2.g.(3) List any OSHA fines and job site fatalities in the past three years with an explanation: (This question is not scored for points but for informational purposes only.)

2.h. Historically Underutilized Business (HUB) Plan.

2.h.(1) Does the company currently have a documented plan for engaging subcontractor participation from Historically Underutilized Businesses?

__No
__Yes If yes, attach a copy of your company's HUB Plan.

2. h. (2) Provide your company's HUB participation percentage level for the five similar projects cited in Section 3.a.

Project Name	HUB %	Services provided by HUB subcontractor(s)

2.i. Permit Compliance.

2.i.(1) In the last five years, has your company been issued a Notice of Violation by the NC Division of Water Quality?

__No
__Yes If yes, provide the following information

Project Name	Case Number	Reason for Order	Resolution

2.i.(2) In the last five years has your company been issued a Notice of Violation by the Land Quality Section of the NC Division of Land Resources?

__No
__Yes If yes, provide the following information

Project Name	Case Number	Reason for NOV	Resolution

Section 3. PROJECT SPECIFIC REQUIREMENTS.

3.a. Project information. Complete information sheets for up to five (5) similar projects. The similar projects should have been completed within the last ten (10) years, at least one of which within the last five (5) years. Firms are strongly encouraged to highlight projects that match the region, watershed type, and work performed identified below in the table below.

Physiographic Region	Coastal Plain
Watershed Type	Agricultural Land Cover
Work Performed	Floodplain grading Stream channel excavation Reforestation

Project Information Sheet

Project Name, County, State: _____

Contract Type	☐ Design Bid Build	☐ Design Build	☐ Full Delivery	☐ Other : _____
Physiographic Region	☐ Mountains	☐ Piedmont	☐ Sandhills	☐ Coastal Plain

Project Watershed Type	☐ Agricultural	☐ Forested	☐ Urban
	Enter % here _____% Agricultural land cover	Enter % here _____% Forested Land cover	Enter % here _____% Urban land cover
Project Type	☐ Stream Restoration	☐ Wetland Restoration	☐ Riparian Buffer Restoration
	Enter l.f. here _____Linear footage	Enter ac. here _____Acreage	Enter ac. here _____Acreage

Project Requirements		Item	Provide a brief description of quantity and/or type of work performed:
	☐	Floodplain, Wetland Grading	
	☐	Stream Construction	
	☐	In-stream Structure Installation	
	☐	Bridge, Culvert, Ford Installation	
	☐	Reforestation, Invasive Vegetation Management	
	☐	Other	

Owner Name/ Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Designer Name/Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Contract Dollar Value	Award Amount:	_____
	Change Order(s) amount:	_____
	Final Contract amount:	_____
Number of Change Orders Approved with Explanation/Reason	Quantity:	_____
	Total Cost:	_____
	Total Additional Days:	_____
	Reason(s):	_____
Project Schedule	Start date:	_____
	Scheduled Completion	_____
	Actual Completion date:	_____
Project Staff	Contract Manager	_____
	Estimator	_____
	Superintendent	_____
	Operator(s)	_____
Sub-Contractor Reference	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____

Project Information Sheet

Project Name, County, State: _____

Contract Type ☐ Design Bid Build ☐ Design Build ☐ Full Delivery ☐ Other : _____

Physiographic Region ☐ Mountains ☐ Piedmont ☐ Sandhills ☐ Coastal Plain

Project Watershed Type ☐ Agricultural ☐ Forested ☐ Urban

Enter % here _____% Agricultural land cover Enter % here _____% Forested Land cover Enter % here _____% Urban land cover

Project Type ☐ Stream Restoration ☐ Wetland Restoration ☐ Riparian Buffer Restoration

Enter l.f. here _____Linear footage Enter ac. here _____Acreage Enter ac. here _____Acreage

Project Requirements	Item	Provide a brief description of quantity and/or type of work performed:
☐	Floodplain, Wetland Grading	
☐	Stream Construction	
☐	In-stream Structure Installation	
☐	Bridge, Culvert, Ford Installation	
☐	Reforestation, Invasive Vegetation Management	
☐	Other	

Owner Name/ Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Designer Name/Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Contract Dollar Value	Award Amount:	_____
	Change Order(s) amount:	_____
	Final Contract amount:	_____
Number of Change Orders Approved with Explanation/Reason	Quantity:	_____
	Total Cost:	_____
	Total Additional Days:	_____
	Reason(s):	_____
Project Schedule	Start date:	_____
	Scheduled Completion	_____
	Actual Completion date:	_____
Project Staff	Contract Manager	_____
	Estimator	_____
	Superintendent	_____
	Operator(s)	_____
Sub-Contractor Reference	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____

Project Information Sheet

Project Name, County, State: _____

Contract Type	☐ Design Bid Build	☐ Design Build	☐ Full Delivery	☐ Other : _____
Physiographic Region	☐ Mountains	☐ Piedmont	☐ Sandhills	☐ Coastal Plain

Project Watershed Type	☐ Agricultural	☐ Forested	☐ Urban
	Enter % here _____% Agricultural land cover	Enter % here _____% Forested Land cover	Enter % here _____% Urban land cover
Project Type	☐ Stream Restoration	☐ Wetland Restoration	☐ Riparian Buffer Restoration
	Enter l.f. here _____Linear footage	Enter ac. here _____Acreage	Enter ac. here _____Acreage

Project Requirements		Item	Provide a brief description of quantity and/or type of work performed:
	☐	Floodplain, Wetland Grading	
	☐	Stream Construction	
	☐	In-stream Structure Installation	
	☐	Bridge, Culvert, Ford Installation	
	☐	Reforestation, Invasive Vegetation Management	
	☐	Other	

Owner Name/ Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Designer Name/Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Contract Dollar Value	Award Amount:	_____
	Change Order(s) amount:	_____
	Final Contract amount:	_____
Number of Change Orders Approved with Explanation/Reason	Quantity:	_____
	Total Cost:	_____
	Total Additional Days:	_____
	Reason(s):	_____
Project Schedule	Start date:	_____
	Scheduled Completion	_____
	Actual Completion date:	_____
Project Staff	Contract Manager	_____
	Estimator	_____
	Superintendent	_____
	Operator(s)	_____
Sub-Contractor Reference	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____

Project Information Sheet

Project Name, County, State: _____

Contract Type	☐ Design Bid Build	☐ Design Build	☐ Full Delivery	☐ Other : _____
Physiographic Region	☐ Mountains	☐ Piedmont	☐ Sandhills	☐ Coastal Plain

Project Watershed Type	☐ Agricultural	☐ Forested	☐ Urban
	Enter % here _____% Agricultural land cover	Enter % here _____% Forested Land cover	Enter % here _____% Urban land cover
Project Type	☐ Stream Restoration	☐ Wetland Restoration	☐ Riparian Buffer Restoration
	Enter l.f. here _____Linear footage	Enter ac. here _____Acreage	Enter ac. here _____Acreage

Project Requirements		Item	Provide a brief description of quantity and/or type of work performed:
	☐	Floodplain, Wetland Grading	
	☐	Stream Construction	
	☐	In-stream Structure Installation	
	☐	Bridge, Culvert, Ford Installation	
	☐	Reforestation, Invasive Vegetation Management	
	☐	Other	

Owner Name/ Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Designer Name/Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Contract Dollar Value	Award Amount:	_____
	Change Order(s) amount:	_____
	Final Contract amount:	_____
Number of Change Orders Approved with Explanation/Reason	Quantity:	_____
	Total Cost:	_____
	Total Additional Days:	_____
	Reason(s):	_____
Project Schedule	Start date:	_____
	Scheduled Completion	_____
	Actual Completion date:	_____
Project Staff	Contract Manager	_____
	Estimator	_____
	Superintendent	_____
	Operator(s)	_____
Sub-Contractor Reference	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____

Project Information Sheet

Project Name, County, State: _____

Contract Type ☐ Design Bid Build ☐ Design Build ☐ Full Delivery ☐ Other : _____

Physiographic Region ☐ Mountains ☐ Piedmont ☐ Sandhills ☐ Coastal Plain

Project Watershed Type

☐ Agricultural — Enter % here _____% Agricultural land cover

☐ Forested — Enter % here _____% Forested Land cover

☐ Urban — Enter % here _____% Urban land cover

Project Type

☐ Stream Restoration — Enter l.f. here _____Linear footage

☐ Wetland Restoration — Enter ac. here _____Acreage

☐ Riparian Buffer Restoration — Enter ac. here _____Acreage

Project Requirements		Item	Provide a brief description of quantity and/or type of work performed:
	☐	Floodplain, Wetland Grading	
	☐	Stream Construction	
	☐	In-stream Structure Installation	
	☐	Bridge, Culvert, Ford Installation	
	☐	Reforestation, Invasive Vegetation Management	
	☐	Other	

Owner Name/ Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Designer Name/Representative	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____
Contract Dollar Value	Award Amount:	_____
	Change Order(s) amount:	_____
	Final Contract amount:	_____
Number of Change Orders Approved with Explanation/Reason	Quantity:	_____
	Total Cost:	_____
	Total Additional Days:	_____
	Reason(s):	_____
Project Schedule	Start date:	_____
	Scheduled Completion	_____
	Actual Completion date:	_____
Project Staff	Contract Manager	_____
	Estimator	_____
	Superintendent	_____
	Operator(s)	_____
Sub-Contractor Reference	Firm/Organization:	_____
	Name of Representative:	_____
	Phone Number:	_____
	Email address:	_____

Section 4. Signature

By signing this document, you are acknowledging that all answers are true to the best of your knowledge. You acknowledge that you understand all AGENCY policies and procedures regarding contractor pre-qualification.

Submitted by:_____

Company Name (as licensed in NC)_____

Physical Address_____

Mailing Address_____

a. Dated this day of: _____

Submitted by: _____
Print Title of Authorized Officer

_____
Signature by Authorized Officer

Phone: _____
Contact person's phone number

Email: _____
Contact person's email address

b. Notary Certification:
North Carolina
_____County

I, a Notary Public of the County and State aforesaid, certify that _____, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official seal, this the _____ day of _____, 20____.

(Official Notary Seal or Stamp)

_____
Signature of Notary Public

My commission expires _____, 20 ___

5. NCEEP PRE-QUALIFICATION RATINGS MATRIX for SINGLE PRIME CONTRACTORS

Contractor Name:		**Date of Evaluation:**	
1. MINIMUM REQUIREMENTS (Must meet minimum requirements to proceed to Section 2.)		**YES**	**NO**
1.a.	Was the General Information section complete?		
1.b.	Was the Business Type section complete?		
1.c.	Was the Minimum Licensing Requirement met?		
1.d.(1)	Was the Bonding Letter acceptable?		
1.d.(2)	Funds Expended by Surety? If yes is the explanation acceptable?		
1.d.(3)	Was a list of the Surety Companies from the past 5 yrs provided?		
1.e.(1)	Lawsuits or Arbitrations Involvement in past 5 Years? If yes is the explanation acceptable?		
1.e.(2)	Judgements, Claims, Arbitrations, Lawsuits Pending? If yes is the explanation acceptable?		
1.f.	Was the Evidence of Insurance acceptable?		
2.a.(1)	Has your company failed to complete a construction contract? If yes is the explanation acceptable?		
1.a.(2)	Has your company been Convicted of charges? If yes is the explanation acceptable?		
2.a.(3)	Has your company been Barred from bidding? If yes is the explanation acceptable?		
2.a.(4)	Has your company been issued a US Army Corps of Engineers Cease and Desist Order? If yes is the explanation acceptable?		
4. Signature Form			
4.a.	Signed/Dated		
4.b.	Notary Certification		
2. GENERAL REQUIREMENTS (Must have a minimum of 30 points to proceed to Section 3.)		**Points Available**	**Points Rec'd**
2.a.(2)	Previous NC construction experience (SCO exp=5, NC public =3, NC private=1)	*5*	
2.a.(3)	Prequalified and failed to submit bid w/o notice of good cause (no=5, yes with good cause=3, yes without cause=0)	*5*	
2.b.(1)	NC office management (yes=5, no=0)	*5*	
2.d.(1)	Work inspection and approval processes (well described=5, poorly described=0)	*5*	
2.d.(2)	Management procedures (well described=5, poorly described=0)	*5*	
2.e.(1)	Financials - Listed/attached (provided=5, not provided=0)	*5*	
2.f.(1)	Paid liquidated damages? (no=5, yes with sufficient explanation=2, yes=0)	*5*	
2.f.(2)	Filed claim(s) w/SCO in past 5 yrs (no=3, yes with good cause=4, yes without cause=0)	*4*	
2.g.(1)	EMR rate (EMR less than or equal to 1.0= 2, EMR greater than 1.0 = 0)	*2*	
2.g.(2)	OSHA 300 log (provided=2 , not provided=0)	*2*	
2.h.(1)	Documented HUB Plan (yes=2, no=0)	*2*	
2.h.(2)	Typical % HUB participation (greater than 10%=5, less than 10%=0)	*5*	
2.i.(1)	NC Division of Water Quality NOV (no=5, yes=0)	*5*	
2.i.(2)	NC Land Quality NOV (no=5, yes=0)	*5*	
	Subtotal	***60***	
3. PROJECT SPECIFIC REQUIREMENTS			
3.a.(1)	Similar Project #1 (greater than 3,000 l.f.=8, 2,000-3,000 l.f.=5, 1,000-2,000 l.f.=3)	*8*	
3.a.(2)	Similar Project #2 (greater than 3,000 l.f.=8, 2,000-3,000 l.f.=5, 1,000-2,000 l.f.=3)	*8*	
3.a.(3)	Similar Project #3 (greater than 3,000 l.f.=8, 2,000-3,000 l.f.=5, 1,000-2,000 l.f.=3)	*8*	
3.a.(4)	Similar Project #4 (greater than 3,000 l.f.=8, 2,000-3,000 l.f.=5, 1,000-2,000 l.f.=3)	*8*	
3.a.(5)	Similar Project #5 (greater than 3,000 l.f.=8, 2,000-3,000 l.f.=5, 1,000-2,000 l.f.=3)	*8*	
	Subtotal	***40***	
	TOTAL POINTS (Must have a minimum of 70 points to pre-qualify)	***100***	

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CONFIDENTIAL INFORMATION

Company Name: _____

THIS PAGE IS TO BE FILLED OUT AND RETURNED WITH YOUR RESPONSE.

ATTENTION:

Federal Employer Identification Number or alternate identification number (e.g., Social Security Number) is used for internal processing, including bid tabulation.

Enter ID number(s) BELOW:

US Company: Federal Employer Identification No._____

Company D-U-N-S No. _____
(D-U-N-S = Data Universal Numbering System)

US Citizen: Social Security No. {DO NOT INCLUDE IF YOU HAVE A FEDERAL EMPLOYEE ID NO.}_____

Outside US: Business ID No._____

Pursuant to N.C.G.S. 132-1.10(b) this identification number shall not be released to the public.

This page will be removed and shredded, or otherwise kept confidential, before the procurement file is made available for public inspection.