**Purchasing Office** 

191 South East St Frederick, Maryland 21701 301-644-5208 phone 301-644-5213 fax



Stephen P. Starmer, C.P.M., CSBA, Purchasing Manager

Kim Miskell, Asst. Purchasing Manager Billie Laughland, Purchasing Agent Bill Meekins CPPB, CPCP, Purchasing Agent Shane Ryberg, Purchasing Agent

RFP NUMBER/RFQ NAME: 17MISC6, Request for Pre-Qualifications for Large Construction Projects

RFP ISSUE DATE: May 24, 2017

RFP CONTRACT MANAGER: Kim Miskell, Assistant Purchasing Manager, kim.miskell@fcps.org

RFP CONTRACT ADMINISTRATOR: Roger Fritz, Director, Planning and Construction Management,

roger.fritz@fcps.org

PRE-QUALIFICATION MEETING DATE: N/A

QUESTIONS: Questions due no later than 4:00 P.M., local time, on June 7, 2017.

Submit questions in writing to the Contract Manager listed above with a copy

to the Contract Administrator.

OBTAINING DOCUMENTS: To view and/or download this solicitation package please visit our webpage at:

www.fcps.org/bidlist. If you have problems downloading this bid or applicable

addenda, contact: amy.beall@fcps.org

BONDS REQUIRED: NO

MBE REQUIREMENTS: NO

RFP DUE: 10:00 A.M., local time, on June 21, 2017

Faxed or emailed bids are not acceptable.

SEALED RFP DELIVERED TO: Frederick County Public Schools

Attn: Purchasing Department

191 South East Street Frederick, MD 21701

(Parking is available at Deck #5 on All Saints Street)

RFP must be properly marked with vendor's business name, address, RFP

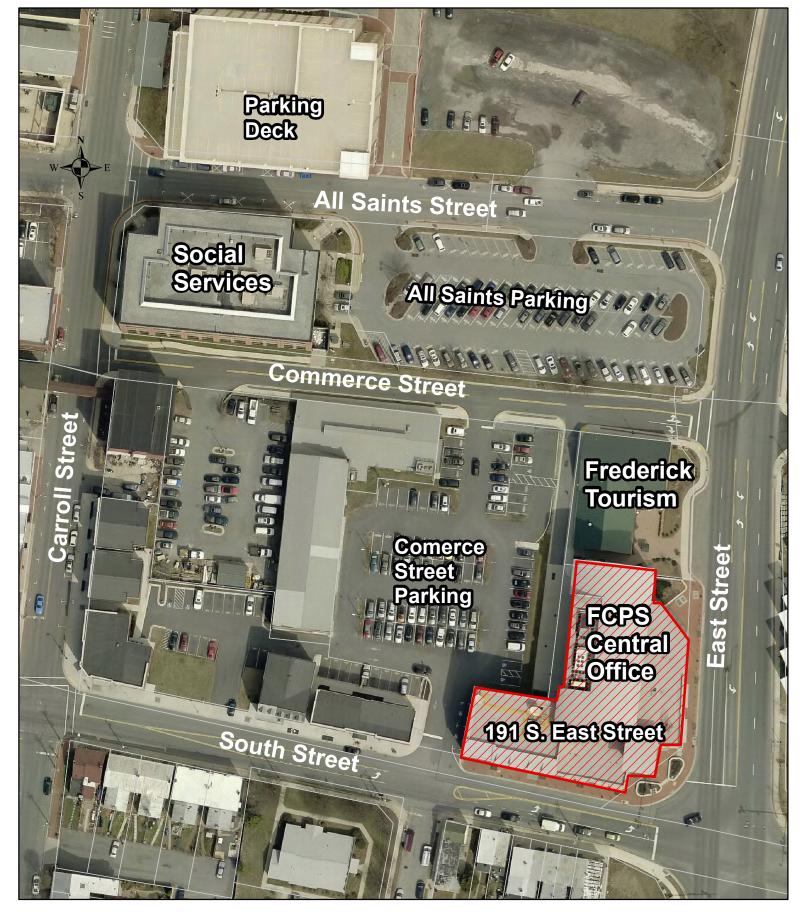
Name and Number on the envelope or package.

TENTATIVE AWARD DATE: BOE Work Session, scheduled on: July 12, 2017

ELIGIBILITY TO BID: All Frederick County Public School vendors and or contractors interested in

bidding on FCPS projects must register at www.emarylandmarketplace.com.

FCPS will no longer accept bidder's applications.





# Frederick County Public Schools 191 S. East Street



#### Frederick County Public Schools, MD, School Year 2016-17 Calendar

#### August 2016

08 Mon New Teachers Report—New-Hire Symposium

16 Tue Teachers Report to Work: Training and Preparation

22 Mon First Day of School for Students

#### September 2016

05 Mon Schools Closed. Labor Day

22 Thu 2-Hour Early Dismissal for Students: Teacher Mid-Term Work Session

23 Fri Schools Closed. Fair Day

#### October 2016

03 Mon Schools Closed. Rosh Hashanah

12 Wed Schools Closed. Yom Kippur

21 Fri Schools Closed for Students: Teacher Professional Development Day

28 Fri End of Term 1

31 Mon Schools Closed for Students: Teacher Work Day

#### November 2016

01 Tue Term 2 Begins

08 Tue Schools Closed: Election Day

09 Wed Elementary Evening Parent-Teacher Conferences: Elem Schools Open 4 Hours Late; Middle and High Schools Are Full Day

10 Thu Elem & Middle School Evening Parent-Teacher Conferences: Those Schools Open 4 Hours Late; High School Is Full Day

11 Fri Elem & Middle School Afternoon Parent-Teacher Conferences: Those Schools Dismiss 3.5 Hours Early; High School Is Full Day

23 Wed Schools Closed: Thanksgiving Break

24-25 Thu-Fri Schools Closed: Thanksgiving and American Indian Heritage Day

#### December 2016

09 Fri 2-Hour Early Dismissal for Students: Teacher Mid-Term Work Session

23-30 Fri-Fri Schools Closed: Winter Break

#### January 2017

02 Mon Schools Closed: Winter Break

03 Schools Re-Open

16 Mon Schools Closed: Dr. Martin Luther King Jr. Day

20 Fri End of First Semester and Term 2

23 Mon Schools Closed for Students: Teacher Work Day

24 Tue Second Semester and Term 3 Begin

#### February 2017

20\* Mon Schools Closed: Presidents' Day

21 Tue Schools Closed for Students: Teacher Professional Development Day27 Mon 2-Hour Early Dismissal for Students: Teacher Mid-Term Work Session

#### March 2017

13 Mon 2-Hour Late Start for Students: Teacher Work Session

30 Thu End of Term 3

31 Fri Schools Closed for Students: Teacher Work day

#### **April 2017**

03 Mon Term 4 Begins

14 Fri Schools Closed: Good Friday
 17 Mon Schools Closed: Easter Monday
 18-21\* Tue-Fri Schools Closed: Spring Break

#### May 2017

12 Fri 2-Hour Early Dismissal for Students: Teacher Mid-Term Work Session

26 Fri 2-Hour Early Dismissal for Students: Teacher Work Session

29 Mon Schools Closed: Memorial Day

#### June 2017

16\* Fri 2-Hour Early Dismissal/Last Day of School for Students: Teacher Work Session

19\* Mon Last Day of School for Teachers

<sup>\*</sup>Includes 6 days for snow or other emergency closings. If no snow days are used, the last day for students is June 8. If some but not all days are needed, the school year will be shortened by the number of unused days to provide 180 days for students. If more days are needed, we will make them up in this order: February 20, April 18, 19, 20, 21 and/or at the end of the school year; dates are subject to BOE revision.

\*\*BOE Approved December 16, 2015\*\*

# FREDERICK COUNTY PUBLIC SCHOOLS (FCPS) TERMS AND CONDITIONS

## 1. SCOPE

The intent of this solicitation is to pre-qualify contractors for all capital improvement projects with a budget in excess of \$250,000.00.

Contractors who submit a bid and are not prequalified shall not be awarded a contract unless they are prequalified prior to the contract award date.

## 2. CONTRACT PERIOD

The initial qualification period will be effective for a three-year period from date of approval through June 30, 2020 and may be renewed for two additional three-year periods.

If FCPS renews the contract, Letters of Intent to Renew will be issued to the Qualified Contractors for an updated application. Failure to submit the updated application may be grounds for revoking the contractor's pre-qualification status.

#### 3. MINIMUM REQUIREMENTS FOR PREQUALIFICATION

A contractor applying for Prequalification must meet the following minimum requirements:

- a. Complete the attached application in full and submit the required documentation
- b. Licensed to perform business in the State of Maryland as a contractor
- c. Meet FCPS minimum insurance requirements
- d. Meet the minimum aggregate bonding capacity of \$1,000,000.

## 4. APPLICATION PROCEDURE FOR PREQUALIFICATION

- a. Submit one original completed application, along with an electronic copy on CD or USB Flash Drive, in a sealed envelope, properly labeled on the outside with the bidder's name, bid number and name. Only originals will be accepted; emails and faxes will not be accepted and reviewed.
- b. Applications for Prequalification must be received prior to the due date and time designated on the solicitation cover sheet. Applications received after the due date and time will not be considered for prequalification. Applicants will have the option to submit a new application during the open enrollment period.
- c. Applications received after the designated date and/or time will not be accepted, regardless of when they were mailed to given to a delivery carrier.
- d. In order for the Application for Pre-qualification to be considered, it must contain the following:
  - 1. Contractor's Qualification Application Form and Questionnaire, completely filled out, signed by an individual with legal authority to sing on behalf of the contractor
  - 2. Certificate of Insurance
  - 3. Maryland State Contractor's License
  - 4. Proof of bonding capacity issued on the letterhead of an approved surety bonding company that is named in the most current Circular 570 "Surety Companies Acceptable on Federal Bonds" as issued by the U.S. Treasury, Bureau of Government Finance Operations, Division of Banking and Cash Management, Washington, D.C.
  - 5. Current Financial Statement

- 6. Federal W9 form
- 7. Signature Page
- 8. Statutory Affidavit and Non-Collusion Certification
- 9. Certification of Compliance
- 10. Four completed Reference Inquiry/Project Information Forms received from the Reference for each identified Work Classification Category.
- e. An incomplete application package will not reviewed and will be discarded.
- f. The prequalification application includes reference rating forms that a contractor shall forward to unrelated third parties for whom a contractor has previously worked. The Reference Form Part 1 shall be completed by the contractor and shall identify the work classification(s) they performed on each prior project for which they are seeking a reference. The Reference completes Part 2 of the form and shall return the completed form directly to FCPS via US mail. Reference forms will not be accepted by email or fax. Contractor's reference rating forms will be kept confidential to the extent permitted by law, but may be subject to Freedom of Information Act.
- g. FCPS reserves the right to re-evaluate a prequalified contractor at any time. Additionally, FCPS retains the right to modify the pre-approval requirements, which may include rescinding or changing a contractor's approval status at any time.
- h. Subcontractors are not required to be prequalified to perform on projects unless otherwise stated in the bid solicitation. However, before subcontractors are permitted to work on a project, the subcontractors may be subject to approval by FCPS.
- i. A list of prequalified contractor's will be maintained by the Operations division.

## 5. OPEN ENROLLMENT

a. After the initial request for prequalification applications, FCPS will only accept applications to become prequalified during the following open enrollment periods in any year:

> September 15 through September 30 December 15 through December 31 March 15 through March 31 June 15 through June 30

Any requests received outside of the open enrollment dates will not be considered and will be discarded.

- b. Interested contractors are expected to submit their application in accordance with the same requirements stated in these specifications.
- c. All applications for prequalification during the open enrollment period shall be mailed to the office of:

Frederick County Public Schools **Operations Division** Construction Management Department 191 South East Street Frederick Maryland 21701

Attn: Tammie Smith

d. Contractors will be notified in writing by Purchasing of their qualification status no later than ninety days from receipt of their application and will be considered approved as of that notification date.

## 6. MINIMUM INSURANCE REQUIREMENTS

FCPS requires an insurance certificate evidencing the compliance of the following minimum insurance requirements:

# a. Employers' Liability Insurance

E.L. Each Accident \$500,000.00 E.L. Disease - Each Employee \$500,000.00

E.L. Disease - Policy Limit \$500,000.00 each employee

#### b. Commercial General Liability Insurance

Commercial General Liability Insurance including premises and operations, completed operations and products, on a per occurrence basis.

General Aggregate \$2,000,000 Each Occurrence \$2,000,000

Personal & Advertising Injury \$1,000,000 each occurrence

Fire Damage \$50,000

Medical Expense \$10,000 any one person

## c. Comprehensive Automobile Liability

Comprehensive Automobile Liability Insurance including all automotive equipment owned, non-owned and hired, operated, rented, or leased.

Bodily Injury \$1,000,000 per person/\$1,000,000 accident

Property Damage \$1,000,000 each occurrence, or

Combined Single Limit Bodily Injury

and Property Damage Liability \$1,000,000

# 7. EVALUATION CRITERIA

- a. FCPS staff will independently review and evaluate each application package.
- b. The following criteria will be reviewed when considering the application for approval:
  - Financial resources (capital and staffing) to undertake and conduct the work classifications sought by the contractor.
  - Satisfactory performance references on previous projects that have been completed by the company
    for each work classification being requested for approval which includes but is not limited to work
    quality, ability to adhere to schedule and cost limitations.
  - Adequate facilities and equipment to perform the work classifications requested
  - Bonding capability and compatibility of company size to dollar value of proposed projects
  - Proof of licensing from the appropriate authorities, such as the Maryland Department of Assessments and Taxation, Maryland Department of Regulation, or any other applicable local, state or federal licensing authority
  - Satisfactory evaluation of legal history through Maryland Judiciary Case Search
  - A credit history report may be obtained by FCPS
  - Any other criteria deemed pertinent by the committee
- c. An approval/denial letter will be issued following application review.

# 8. APPEAL PROCEDURE

A contractor whose application has been denied or whose status has been suspended or revoked by FCPS shall be given the benefit of reconsideration and appeal as follow:

- a. The aggrieved contractor may, within ten (10) days after receiving notification of such action, request reconsideration in writing. The contractor may submit additional documentation/information it deems relevant at the time of appeal.
- b. The evaluation committee shall review the additional information and make its recommendation to the Purchasing Manager within five (5) calendar days.
- c. The Purchasing Manager will review the evaluation committee's recommendation and issue a final ruling in writing to the contractor. The Purchasing Manager's decision, with respect to the appeal, shall be final.
- d. A Contractor's who application has been denied may not reapply for twelve (12) months following the final decision on the contractor's previous application.

# 9. REVOCATION OR SUSPENSION OF PREQUALIFICATION STATUS

The evaluation committee may, for good cause, suspend a contractor for a specified period of time or revoke their prequalification status. Causes for suspension or revocation shall include, but are not limited to, the following:

- a. Submission of falsified information
- b. Failure to submit additional requested financial information
- c. Failure to perform work in a manner acceptable to FCPS or failure to perform work in accordance with the awarded contract
- d. Failure to secure required bonding;
- e. Failure to comply with applicable federal, state, and local laws, and regulations;
- f. Defaulting on an FCPS contract or any contract with a public body, jurisdiction or state;
- g. Failure to possess the minimum qualifications.
- h. Contractor's license becomes suspended or is revoked by a licensing agency.
- i. Debarment or suspension imposed by any local, state or federal government entity.

The suspension or revocation of prequalification status shall be immediate upon the date of the evaluation committee's written decision to the contractor. The length of suspension or revocation and the conditions for reinstatement of prequalification will be stated in the written decision by the evaluation committee.



# **CONTRACTOR'S PREQUALIFICATION APPLICATION**

|                                                          | me:                                                                                                                                                                                                                                                                                                                                 | DBA:                                                                                                                                |
|----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| Address:                                                 |                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                     |
| City:                                                    | State:                                                                                                                                                                                                                                                                                                                              | Zip:                                                                                                                                |
| Phone:                                                   |                                                                                                                                                                                                                                                                                                                                     | _ Fax:                                                                                                                              |
|                                                          | umber: Marylan                                                                                                                                                                                                                                                                                                                      |                                                                                                                                     |
| Purchase Or                                              | ders Email:                                                                                                                                                                                                                                                                                                                         | Website Address:                                                                                                                    |
|                                                          |                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                     |
| טוט בווומוו A0                                           | dress:                                                                                                                                                                                                                                                                                                                              | _ Contact Ivallie                                                                                                                   |
| Check Appr                                               | opriate Category (ies) for the classification of                                                                                                                                                                                                                                                                                    | work you are applying for prequalificati                                                                                            |
|                                                          | - General Construction                                                                                                                                                                                                                                                                                                              |                                                                                                                                     |
| 2                                                        | 2 - Excavation & Site work                                                                                                                                                                                                                                                                                                          |                                                                                                                                     |
| 3                                                        | 3 - Concrete                                                                                                                                                                                                                                                                                                                        |                                                                                                                                     |
| 4                                                        | - Masonry                                                                                                                                                                                                                                                                                                                           |                                                                                                                                     |
| 5                                                        | 5 – Structural Steel & Metals                                                                                                                                                                                                                                                                                                       |                                                                                                                                     |
|                                                          | 5 - Carpentry, Wood & Plastics                                                                                                                                                                                                                                                                                                      |                                                                                                                                     |
|                                                          |                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                     |
|                                                          | <ul> <li>Thermal &amp; Moisture Protection – Roofing * Roo<br/>this</li> </ul>                                                                                                                                                                                                                                                      |                                                                                                                                     |
| 7                                                        |                                                                                                                                                                                                                                                                                                                                     | fing Contractors are not pre-qualified via process for capital improvement projects                                                 |
| 7                                                        | this                                                                                                                                                                                                                                                                                                                                | process for capital improvement projects                                                                                            |
| 8                                                        | this  - Windows & Doors                                                                                                                                                                                                                                                                                                             | process for capital improvement projects amic tile, wood & vinyl)                                                                   |
| 8<br>9<br>1                                              | this  3 - Windows & Doors  9 - Finishes (floors, painting, ceilings, drywall, cera                                                                                                                                                                                                                                                  | amic tile, wood & vinyl) ons, lockers, flag poles)                                                                                  |
| \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | this  3 - Windows & Doors  9 - Finishes (floors, painting, ceilings, drywall, cera  0 - Specialties (visual display boards, toilet partition)                                                                                                                                                                                       | amic tile, wood & vinyl) ons, lockers, flag poles) ens, athletic equipment)                                                         |
| 1<br>1<br>1                                              | this 3 - Windows & Doors 9 - Finishes (floors, painting, ceilings, drywall, cera 0 - Specialties (visual display boards, toilet partition 1 - Equipment (kitchen equipment projection screen 2 - Furnishings (blinds, shades, musical instrument 4 - Conveying Systems (elevators)                                                  | amic tile, wood & vinyl) ons, lockers, flag poles) ens, athletic equipment) ont storage cabinets, systems furniture)                |
| 5 E E E E E E E E E E E E E E E E E E E                  | this 3 – Windows & Doors 9 – Finishes (floors, painting, ceilings, drywall, cera 0 – Specialties (visual display boards, toilet partition 1 – Equipment (kitchen equipment projection screen 2 – Furnishings (blinds, shades, musical instrument 4 – Conveying Systems (elevators) 5 – Mechanical, Plumbing, Fire Sprinkler Systems | amic tile, wood & vinyl) ons, lockers, flag poles) ens, athletic equipment) nt storage cabinets, systems furniture) , Water Heaters |
| 5 E E E E E E E E E E E E E E E E E E E                  | this 3 - Windows & Doors 9 - Finishes (floors, painting, ceilings, drywall, cera 0 - Specialties (visual display boards, toilet partition 1 - Equipment (kitchen equipment projection screen 2 - Furnishings (blinds, shades, musical instrument 4 - Conveying Systems (elevators)                                                  | amic tile, wood & vinyl) ons, lockers, flag poles) ens, athletic equipment) nt storage cabinets, systems furniture) , Water Heaters |

| Has your con<br>Yes | npany ever been party<br>No. If yes, please                                           | to any criminal litig<br>explain (use a sepa | ation as a result of co<br>trate sheet if necessa | onstruction or operat<br>ry). | ing methods, costs, etc.?                           |
|---------------------|---------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------------------------|-------------------------------|-----------------------------------------------------|
|                     |                                                                                       |                                              |                                                   |                               |                                                     |
| FINANCIAL:          |                                                                                       |                                              |                                                   |                               |                                                     |
| Give value of       | all construction equip                                                                | ment fully owned by                          | / company: \$                                     |                               |                                                     |
| Give value of       | current and total asse                                                                | ets of company (incl                         | uding the equipment                               | value above): \$              |                                                     |
|                     | current and total liabi                                                               |                                              | The debt to equity rati                           | io of assets to liabilit      | ies helps determine                                 |
| Give total cor      | ntract value of work ac                                                               | complished by your                           | company in each of                                | the last three years:         |                                                     |
| \$                  |                                                                                       | \$                                           |                                                   | \$                            |                                                     |
| Value               | Date                                                                                  | Value                                        | Date                                              | Value                         | Date                                                |
|                     | presently being accom                                                                 |                                              | •                                                 |                               | sheet of paper if                                   |
| Bonding Cap         | acity: \$                                                                             |                                              | \$                                                |                               |                                                     |
| Domaing Cap         | Inc                                                                                   | dividual Project                             |                                                   | Aggregat                      | е                                                   |
| Please provid       | de the names of the S                                                                 | urety Company and                            | the bonding agent w                               | ho will issue your bo         | onds:                                               |
| Surety Comp         | any:                                                                                  |                                              | Bonding Age                                       | ent:                          |                                                     |
| companies ba        | Experience Modificati ase the amount charg ecrease based on the ned by contacting you | ed to contractors. T number of accident      | he industry average s vs. the number of r         | is 1.0; the EMR for o         |                                                     |
| Year                | EMR Rate                                                                              | Year                                         | EMR Rate                                          | Year                          | EMR Rate                                            |
| EXPERIENC           | <u>E:</u>                                                                             |                                              |                                                   |                               |                                                     |
|                     |                                                                                       |                                              |                                                   |                               | nder present company<br>neet of paper if necessary) |
| Work Classi         | fication Category (as                                                                 | s listed on page 1)                          | Years of E                                        | xperience                     |                                                     |
|                     |                                                                                       |                                              |                                                   |                               |                                                     |
|                     |                                                                                       |                                              |                                                   |                               |                                                     |
| <del></del>         |                                                                                       |                                              |                                                   |                               |                                                     |

| List experience of principal m                                | embers of your comp                              | pany (use a separate sheet of paper if necessary                                                                                                                                      | ):                                                |
|---------------------------------------------------------------|--------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| Name:                                                         |                                                  | Title:                                                                                                                                                                                |                                                   |
| Experience:                                                   |                                                  | Type of work:                                                                                                                                                                         |                                                   |
| In what capacity:                                             |                                                  | Number of years: _                                                                                                                                                                    |                                                   |
| Name:                                                         |                                                  | Title:                                                                                                                                                                                |                                                   |
| Experience:                                                   |                                                  | Type of work:                                                                                                                                                                         |                                                   |
| In what capacity:                                             |                                                  | Number of years: _                                                                                                                                                                    |                                                   |
| List any special qualifications                               | of company's memb                                | ers (Registered Engineer, Surveyor, etc.):                                                                                                                                            |                                                   |
|                                                               |                                                  | ee years including the work classification and                                                                                                                                        | I their monetary value (use                       |
| separate sheet of paper if neo                                | cessary).                                        |                                                                                                                                                                                       |                                                   |
| Project                                                       |                                                  | Work Classification Category                                                                                                                                                          | Date Value                                        |
| ,                                                             |                                                  |                                                                                                                                                                                       |                                                   |
| REFERENCES:                                                   |                                                  |                                                                                                                                                                                       |                                                   |
| category selected for prequal preferred, but not required. (I | ification. At least thre<br>Use a separate sheet | company within the past three years for each ee of the references should be over \$250,00 tof paper if necessary). Reference Inquiry For category selected in order to be considered. | 0. School projects are Forms must be received for |
| Work Classification Category                                  | :                                                | ·                                                                                                                                                                                     |                                                   |
| Name of Project:                                              |                                                  | Contract Value\$                                                                                                                                                                      | Year:                                             |
| Name of Owner/Customer Co                                     | ontact:                                          |                                                                                                                                                                                       |                                                   |
| Customer Address:                                             |                                                  |                                                                                                                                                                                       |                                                   |
| Phone #:                                                      | Fax #:                                           | Email:                                                                                                                                                                                |                                                   |
| Brief Description of Project: _                               |                                                  |                                                                                                                                                                                       |                                                   |
|                                                               |                                                  |                                                                                                                                                                                       |                                                   |
|                                                               |                                                  |                                                                                                                                                                                       |                                                   |
| Name of Project:                                              |                                                  | Contract Value\$                                                                                                                                                                      | Year:                                             |
| Name of Owner/Customer Co                                     | ontact:                                          |                                                                                                                                                                                       |                                                   |

| Customer Address:              |                     |                                                                                                                  |       |
|--------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------|-------|
| Phone #:                       | _ Fax #:            | Email:                                                                                                           |       |
| Brief Description of Project:  |                     |                                                                                                                  |       |
| Work Classification Category:  |                     |                                                                                                                  |       |
| Name of Project:               |                     | Contract Value\$                                                                                                 | Year: |
| Name of Owner/Customer Contact | t:                  |                                                                                                                  |       |
| Customer Address:              |                     |                                                                                                                  |       |
| Phone #:                       | _ Fax #:            | Email:                                                                                                           |       |
| Brief Description of Project:  |                     |                                                                                                                  |       |
| Work Classification Category:  |                     |                                                                                                                  |       |
| Name of Project:               |                     | Contract Value\$                                                                                                 | Year: |
| Name of Owner/Customer Contact | t:                  |                                                                                                                  |       |
| Customer Address:              |                     |                                                                                                                  |       |
| Phone #:                       | _ Fax #:            | Email:                                                                                                           |       |
| Brief Description of Project:  |                     |                                                                                                                  |       |
|                                | rsigned shall abide | n contained within this application is true ar<br>e by and be subject to all applicable federa<br>may be issued. |       |
| Authorized Signature           |                     | Date                                                                                                             |       |
| Print Name                     |                     | Title                                                                                                            |       |

# REFERENCE INQUIRY FORM

The contractor must complete the front of the form only and forward both pages to the reference for whom the work was done. Both pages are to be returned directly to Frederick County Public Schools via U.S. mail by the Reference <u>only</u>. Any forms returned to the contractor will not be accepted.

|                                             |                        | (Name of Reference)                                                                                                      |                                                            |                  |  |
|---------------------------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|------------------|--|
| From:                                       |                        |                                                                                                                          |                                                            |                  |  |
|                                             |                        | (Name of Contractor/Applicant)                                                                                           | <del></del>                                                |                  |  |
|                                             |                        |                                                                                                                          |                                                            |                  |  |
|                                             |                        | ng for Prequalification with Frederick Co<br>ence in light of our work on the referenc                                   | -                                                          |                  |  |
| you as                                      | areiei                 | ence in light of our work off the reference                                                                              | Led project title below for Work Classif                   | ication category |  |
|                                             |                        | Work C                                                                                                                   | lassification Category                                     |                  |  |
|                                             | 1                      | General Construction                                                                                                     |                                                            |                  |  |
|                                             | 2                      | Excavation & Site Work                                                                                                   |                                                            |                  |  |
|                                             | 3                      | Concrete                                                                                                                 |                                                            |                  |  |
|                                             | 4                      | Masonry                                                                                                                  |                                                            |                  |  |
|                                             | 5                      | Structural Steel & Metals                                                                                                |                                                            |                  |  |
|                                             | 6                      | Carpentry, Wood & Plastics                                                                                               |                                                            |                  |  |
|                                             | 7                      | Thermal & Moisture Protection – Roofing                                                                                  | g (For Projects Up to \$250,000)*                          |                  |  |
|                                             | 8                      | Windows & Doors                                                                                                          |                                                            |                  |  |
|                                             | 9                      | Finishes (floors, painting, ceilings, drywa                                                                              |                                                            |                  |  |
|                                             | 10                     | Specialties (visual display boards, toilet p                                                                             |                                                            |                  |  |
|                                             | 11                     | Equipment (kitchen equipment, projection                                                                                 |                                                            |                  |  |
|                                             | 12                     |                                                                                                                          | ument storage cabinets, systems furniture)                 |                  |  |
|                                             | 14                     | Conveying Systems (elevators)                                                                                            |                                                            |                  |  |
|                                             | 15                     | Mechanical, Plumbing, Fire Sprinkler Sys                                                                                 | stems, Water Heaters                                       |                  |  |
|                                             | 16                     | Electrical, Lightning Protection, Telecom                                                                                | munications, Data, Fire Alarm Systems, Se                  | curity Systems   |  |
| _                                           |                        |                                                                                                                          |                                                            |                  |  |
| L                                           |                        |                                                                                                                          |                                                            |                  |  |
| PR∩IF                                       | CT INFO                | DRMATION:                                                                                                                |                                                            |                  |  |
| PROJE                                       | CT INFO                | DRMATION:                                                                                                                |                                                            |                  |  |
|                                             |                        |                                                                                                                          |                                                            |                  |  |
|                                             |                        | DRMATION:                                                                                                                |                                                            |                  |  |
| Projec                                      | t Title:               |                                                                                                                          |                                                            | Year             |  |
| Projec                                      | t Title:               |                                                                                                                          |                                                            | Year             |  |
| Projec<br>Projec                            | et Title: <sub>.</sub> | etion Date:                                                                                                              |                                                            | Year             |  |
| Projec                                      | et Title: <sub>.</sub> |                                                                                                                          |                                                            | Year             |  |
| Projec                                      | et Title: <sub>.</sub> | etion Date:                                                                                                              |                                                            | Year             |  |
| Projec<br>Projec                            | et Title: <sub>.</sub> | etion Date:                                                                                                              |                                                            | Year             |  |
| Project Project DESCF                       | et Title: _            | etion Date:                                                                                                              | Contract Value: \$                                         |                  |  |
| Project Project DESCF                       | et Title: _            | etion Date:                                                                                                              | Contract Value: \$                                         |                  |  |
| Project Project  DESCF  ——— Please          | et Title:              | etion Date:  OF WORK:  ete this evaluation form and return both                                                          | Contract Value: \$  pages directly to Frederick County Pub |                  |  |
| Project Project  DESCF  ——— Please          | et Title:              | etion Date:                                                                                                              | Contract Value: \$  pages directly to Frederick County Pub |                  |  |
| Project Project  DESCF  Please envelo       | et Title:et Comp       | etion Date:  OF WORK:  ete this evaluation form and return both                                                          | Contract Value: \$  pages directly to Frederick County Pub |                  |  |
| Project Project  DESCF  Please envelo       | et Title:et Comp       | etion Date:  OF WORK:  ete this evaluation form and return both ked "Pre-Qualification Application Refe                  | Contract Value: \$  pages directly to Frederick County Pub |                  |  |
| Project Project  DESCF  Please envelo Thank | et Title:et Comp       | etion Date:  OF WORK:  ete this evaluation form and return both ked "Pre-Qualification Application Refe your assistance. | Contract Value: \$  pages directly to Frederick County Pub |                  |  |

(Phone Number and email address)

(Printed Name and Title)

#### PART B: TO BE FILLED OUT BY REFERENCE

Instructions: Part A of this Reference Inquiry Form is to be completed by the Applicant. Part B is to be completed by the person/firm providing the reference for the Applicant. The Applicant is required to provide four references for each Work Classification Category for which that are seeking prequalification. The reference company shall mail the completed forms directly to Frederick County Public Schools via U.S. mail properly marked with RFP 17MISC16, the Applicants Name, and labeled "Prequalification Reference". Reference forms emailed or faxed will not be accepted.

This reference should be based on the project and work classification category as listed in Part A of this form. A follow-up call or email may be placed upon receipt of this reference.

| A.       | <b>EXPERIENCE &amp; QUALITY OF WORK</b>           |                                                                                                                                   |    |
|----------|---------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----|
|          | Experience of Personnel                           | (20 points maximum)                                                                                                               |    |
|          | 2. Quality of Work                                | (20 points maximum)                                                                                                               |    |
|          | 3. Ability to Perform                             | (20 points maximum)                                                                                                               |    |
|          | 4. Timeliness                                     | (20 points maximum)                                                                                                               |    |
| В.       | <u>EQUIPMENT</u>                                  |                                                                                                                                   |    |
|          | Effective of Operation                            | (10 points maximum)                                                                                                               |    |
| c.       | GENERAL PERFORMANCE                               | (10 points maximum)                                                                                                               |    |
|          | (Including subcontractors)                        |                                                                                                                                   |    |
| D.       | GENERAL COMMENTS                                  |                                                                                                                                   |    |
|          | Please provide any additional information rega    | rding this firm, which may be of assistance in evaluating the quality                                                             | of |
|          | their work.                                       |                                                                                                                                   |    |
|          |                                                   |                                                                                                                                   | _  |
|          |                                                   |                                                                                                                                   |    |
|          |                                                   |                                                                                                                                   | -  |
|          |                                                   |                                                                                                                                   | _  |
|          |                                                   |                                                                                                                                   | _  |
|          |                                                   |                                                                                                                                   | -  |
|          |                                                   |                                                                                                                                   | _  |
|          |                                                   |                                                                                                                                   | -  |
|          |                                                   |                                                                                                                                   |    |
|          |                                                   |                                                                                                                                   |    |
|          | •                                                 | m, I have evaluated their performance in the work classification                                                                  |    |
|          | • • • •                                           | em in comparison with other contractors performing similar work. I ion supplied here shall be considered "Strictly Confidential." | t  |
| 15 11    | iy understanding that all of the above illiormati | ion supplied here shall be considered "strictly confidential."                                                                    |    |
|          |                                                   |                                                                                                                                   |    |
|          | <br>nature of Reference)                          | (Name of Firm)                                                                                                                    |    |
| לטוב     | mature of Nerelefice)                             | (Name of Film)                                                                                                                    |    |
| <br>(Pri | nted Name and Title)                              | (Address of Firm)                                                                                                                 |    |
|          |                                                   |                                                                                                                                   |    |
| (Da      | te)                                               | (Phone Number and email address)                                                                                                  |    |

# RFP 17MISC6, REQUEST FOR PRE-QUALIFICATIONS FOR LARGE CONSTRUCTION PROJECTS FREDERICK COUNTY PUBLIC SCHOOLS STATUTORY AFFIDAVIT AND NON-COLLUSION CERTIFICATION

Special Instructions: An authorized representative of the bidder needs to complete the following affidavit and insert an answer to paragraphs 1 and 3.

|    | BID  | DERS: The submission of the following Affidavit at the time of the bid openin                                                                                                                                                                    | g is:                      |
|----|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| X  | requ | nested to be completed but not required to be notarized.                                                                                                                                                                                         |                            |
|    | requ | nired to be completed and notarized.                                                                                                                                                                                                             |                            |
| I, |      | , being duly sworn, depose and                                                                                                                                                                                                                   | state:                     |
| 1. | I am | the (officer) and duly authorized representa                                                                                                                                                                                                     | ative of the firm of       |
|    | the  | organization named(Name of Corporation)                                                                                                                                                                                                          |                            |
|    | poss | sess the authority to make this affidavit and certification on behalf of myself and ng.                                                                                                                                                          | d the firm for which I am  |
| 2. | any  | ept as described in paragraph 3 below, neither I, nor to the best of my knowledge of its officers, directors, or partners, or any of its employees who are directly informing contracts with any public bodies has:                              |                            |
|    | a.   | been convicted of bribery, attempted bribery, or conspiracy to bribe, under the federal government;                                                                                                                                              | ne laws of any state or of |
|    | b.   | been convicted under the laws of the state, another state, or the United States incident to obtaining, attempting to obtain, or performing a public or private embezzlement, theft, forgery, falsification or destruction of records, or receive | contract; or fraud,        |
|    | c.   | been convicted of criminal violation of an antitrust statute of the State of Marthe United States;                                                                                                                                               | ryland, another state, or  |
|    | d.   | been convicted of a violation of the Racketeer influenced and Corrupt Organ<br>Fraud Act, for acts in connection with the submission of bids or proposals for<br>contract;                                                                       |                            |
|    | e.   | been convicted of any felony offenses connected with obtaining, holding, or business enterprise certification, as prohibited by Section 14-308 of the State Article;                                                                             |                            |
|    | f.   | been convicted of conspiracy to commit any act or omission that would consciously conviction under any of the laws or statutes described in Paragraph (a) through                                                                                |                            |

3. The only conviction, plea, or admission by any officer, director, partner, or employee of this firm to involvement in any of the conduct described in Paragraph 2 above is as follows:

g.

contract.

If none, write "None" below. If involvement, list the date, count, or charge, official or administrative body,

been found civilly liable under an antitrust statute of this State, another state, or the United States for

acts or omissions in connection with the submission of bids or proposals for a public or private

the individuals involved, their position with the firm, and the sentence or disposition of the charge.

(you may attach an explanation if necessary)

- 4. I affirm that this firm will not knowingly enter into a contract with a public body under which a person or business debarred or suspended under Maryland State Finance and Procurement Title 16, subtitle 3, <a href="Maryland">Annotated Code of Maryland</a>, as amended, will provide, directly or indirectly, supplies, services, architectural services, construction-related services, leases of real property, or construction.
- 5. I affirm that this proposal or bid to the Board of Education of Frederick County is genuine and not collusive or a sham; that said bidder has not colluded, conspired, connived and agreed, directly or indirectly, with any bidder or person to put in a sham bid or to refrain from bidding and is not in any manner, directly or indirectly, sought by agreement of collusion or communication or conference, with any person to fix the bid prices of the affidavit or any other bidder, or to fix any overhead, profit or cost element of said bid price, or that if any bidder, or to secure an advantage against the Board of Education of Frederick County or any other person interested in the proposed contract; and that all statements in the proposal or bid are true. I acknowledge that, if the representations set forth in this affidavit are not true and correct, the Board of Education of Frederick County may terminate any contract awarded and take any other appropriate action.

I DO SOLEMNLY DECLARE AND AFFIRM under the penalties of perjury that the contents of this affidavit are true and correct, that I am executing this Affidavit in compliance with Section 16-311 of the State Finance and Procurement Article, <u>Annotated Code of Maryland</u>, and in compliance with requirements of the Board of Education of Frederick County, and that I am executing and submitting this Proposal on behalf of and as authorized by the bidder named below.

| (Legal Name of Company)      |                                                                  |              |
|------------------------------|------------------------------------------------------------------|--------------|
| (dba)                        |                                                                  |              |
| (Address)                    |                                                                  |              |
| (City)                       | (State)                                                          | (Zip)        |
| (Telephone)                  | (F                                                               | Fax)         |
| (Print Name)                 | (Title)                                                          | (Date)       |
| (Signature)                  | (Title)                                                          | (Date)       |
|                              | siness in the State of Maryland as a: Partnership ( ) Individual | ( ) Other    |
| If required to be notarized: |                                                                  |              |
| (Witness)                    |                                                                  | (Title)      |
| SUBSCRIBED AND SWORI         | N to before me on thisda                                         | ny of, 20    |
| My Commission Expires:       | N                                                                | OTARY PUBLIC |

Revised 01.20.2016

# RFP 17MISC6, REQUEST FOR PRE-QUALIFICATIONS FOR LARGE CONSTRUCTION PROJECTS CERTIFICATION OF COMPLIANCE

- 1. All Contractors, subcontractors or vendors must abide by FCPS Board policies and regulations while working on FCPS property.
- 2. Maryland Law requires that any person who enters into a contract with a county board of education may not knowingly employ an individual to work at a schools (or FCPS facility) if the individual is a registered sex offender. Please reference §11-113 of the Criminal Procedure Article of Maryland Code for penalty.
- 3. Be advised that individuals who are registered sex offenders are not eligible to work on any FCPS project. The Contractor must initially check the Maryland Department of Public Safety & Correctional Services' MARYLAND SEX OFFENDER REGISTRY and search for the name of any employee to be assigned to work on this project. This applies to subcontractors and material/equipment suppliers as well.
- 4. In the event that a registered sex offender is discovered to be working on a FCPS project, whether through employment by the prime Contractor, subcontractor or vendor, the site superintendent will immediately remove the individual from the premises and permanently terminate his work assignment. FCPS may terminate this contract as a result if the Contractor is unable to demonstrate he has exercised care and diligence in the past in checking the Maryland registry.
- 5. Effective July 1, 2015, amendments to §6-113 of the Education Article of the Maryland Code further require that a contractor or subcontractor or vendor for a local school system may not knowingly assign an employee to work on school premises with direct, unsupervised, and uncontrolled access to children, if the employee has been convicted of, or pled guilty or nolo contendere to, a crime involving:
  - a. A sexual offense in the third or fourth degree under §3-307 or §3-308 of the Criminal Law Article of the Maryland Code.
  - b. Child sexual abuse under §3-602 of the Criminal Law Article of the Maryland Code or any other State; or
  - c. A crime of violence as defined in §14-101 of the Criminal Law Article of the Maryland Code or any other State
- 6. Under recent amendments to §5-561 of the Family Law Article of the Maryland Code, each contractor, subcontractor or vendor shall certify by signing this affidavit that any individuals in its work-force including sub-contractors, have undergone a criminal background check, including fingerprinting, if the individuals will work in a FCPS school facility in circumstances where they have direct, unsupervised, and uncontrolled access to children.

By my signature below, I affirm under penalties of perjury that the contents of this Certification of Compliance are true to the best of my knowledge, information and belief.

| Signature                         | Date |  |
|-----------------------------------|------|--|
| Print name and title of signatory |      |  |
| Print name of company             |      |  |