ADVERTISEMENT FOR CONTRACTOR PREQUALIFICATION

Subject to conditions prescribed by the University of California Office of the President, responses to the University’s prequalification documents for a Design-Build contract are sought from prospective bidders for the following project:

Exterior Maintenance System Installation Project
Project No: TBD

PREQUALIFICATION OF PROSPECTIVE BIDDERS

The University has determined that bidders who submit bids on this project must be prequalified. Prequalified bidders will be required to have the following California contractor’s license: “B” General Contractor, and/or Specialty C-61/D21, D34, D39, as required for the project scope.

GENERAL DESCRIPTION OF WORK

The University of California Office of the President (UCOP) is located in 1111 Franklin Street, Oakland, California. Its building is a 12-story office building with a basement with multiple parking levels from the basement to the 4th floor. The approximate overall gross square floor is 353,200 SF with roof areas of approximately 26,400 SF.

The existing exterior maintenance systems (window and façade washing systems) are in need of retrofitting to comply with applicable codes and regulations. UCOP seeks qualified contractors to submit responses to this advertisement by responding to the attached prequalification questionnaire.

The proposed scope of work will be to:
1. Furnish labor and materials to design, fabricate and install complete exterior maintenance equipment systems per the bridging documents consisting of drawings and performance specs to be issued at the time of bidding.
2. Furnish labor and materials to design, fabricate and install OSHA required safety features on the roofs per the bridging documents consisting of drawings and performance specs to be issued at the time of bidding.

Estimated Construction Cost: $350,000.00

PREQUALIFICATION SCHEDULE

The Prequalification Questionnaire available in this advertisement. Refer to Attachment A.

On or before August 19, 2022, at 2:00 P.M., the completed Prequalification Questionnaire and associated documents must be received by Building and Administrative Services Center/Office of the President. The completed Prequalification Questionnaire and other required materials are to be submitted electronically via e-mail addressed to:

Jihee Lee, AIA, LEED AP, CASp
Facilities Project Manager
E-Mail: jihee.lee@ucop.edu

August 4, 2022
The Prequalification Questionnaire and associated documents is due at time stated above. However, the University reserves the right to accept late submissions and to request, receive, and evaluate supplemental information after the above time and date at its sole determination.

Level 2 interviews will be conducted after review of the Prequalification Questionnaire and associated documents for those prospective bidders that achieve Level 1 Prequalification status.

The exact dates, times, and location of the Bid Opening will be set forth in the Bidding Documents and an Announcement to Prequalified Bidders.

The University reserves the right to reject any or all responses to Prequalification Questionnaires and to waive non-material irregularities in any response received.

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

Every effort will be made to ensure that all persons have equal access to contracts and other business opportunities with the University within the limits imposed by law or University policy. Each Proposer may be required to show evidence of its equal employment opportunity policy. The successful Bidder and its subcontractors will be required to follow the nondiscrimination requirements set forth in the Bidding Documents and to pay prevailing wage at the location of the work.

The work described in the contract is a public work subject to section 1771 of the California Labor Code.

THE REGENTS OF THE UNIVERSITY OF CALIFORNIA
University of California Office of the President
Building and Administrative Services Center

August 4, 2022
CONTRACTOR PREQUALIFICATION QUESTIONNAIRE FOR

Exterior Maintenance System Installation Project

Project No: TBD

BUILDING AND ADMINISTRATIVE SERVICES CENTER
UNIVERSITY OF CALIFORNIA OFFICE OF THE PRESIDENT
OAKLAND, CALIFORNIA

Each prospective bidder must have the appropriate contractor's license required by the State of California, and must complete and submit all portions of this Prequalification Questionnaire.

Each prospective bidder must answer all applicable questions and provide all requested information. Any prospective bidder failing to do so may, at the sole discretion of the University of California, be deemed to be not responsive and not responsible with respect to this Prequalification, and its bid rejected.

The undersigned declares under penalty of perjury that the Prequalification information submitted with this form is correct, complete and not misleading and that this declaration was executed

in ____________ County, California, on ________________.

___________________________________________
(Bidder Name)

___________________________________________
(Name and Title of Bidder’s Contact Person)

___________________________________________
(Address)

___________________________________________
(City, State, Zip Code)

___________________________________________
(Telephone) (Fax Number) (Email Address)

___________________________________________
(Signature)

___________________________________________
(Typed Name and Title)

NOTICE

ANY BIDDER WHO FAILS TO MEET THE CRITERIA LISTED IN THIS PREQUALIFICATION QUESTIONNAIRE WILL NOT BE CONSIDERED QUALIFIED AND WILL BE DEEMED AS NOT RESPONSIVE WITH RESPECT TO THIS PREQUALIFICATION, AND ITS BID REJECTED.

All information submitted in response to this Prequalification Questionnaire will be considered official information acquired in confidence, and the University of California will maintain its confidentiality to the extent permitted by law. If the prospective Contractor is determined by the University not to be prequalified, the prospective Contractor may request an informal hearing within three (3) calendar days of receipt of the University's written notice of disqualification, with Jihee Lee, Facilities Project Manager, Building and Administrative Services Center, UCOP, 1111 Franklin Street, Oakland, CA 94607. The decision resulting from such hearing is final and is not appealable within the University of California. Any person or entity not satisfied with the outcome of the prequalification must file a writ challenging the outcome within ten (10) calendar days from the date of the University's written notice regarding prequalification determination. Any assertion that the outcome of the prequalification process was improper will not be a ground for a bid protest.

Each prospective bidder must submit all requested information on these forms only. Attachments are not allowed except for the project lists and the organizational chart are requested.
IN ALL INSTANCES IN THIS FORM, "QUALIFYING PROJECT" MEANS A PROJECT WHICH MUST MEET ALL OF THE FOLLOWING:

1. Project took place in a fully occupied building that remained in operation during construction.
2. Project took place on a roof of a high-rise (10 story or higher) office building.
3. Project work was to install exterior maintenance system for window and façade washing systems.
4. Project was delivered by design-build method.
5. Project had a full-time superintendent present in the above described settings during ALL construction activities – days, evenings, swing, weekends.
6. Project was completed within the last ten (10) years, and accepted as complete prior to August, 2022.
7. Your firm's construction contract cost was at least $300,000 as awarded (excluding change orders).

I. LICENSE

A. Does your firm hold the following California Contractors license, which is current, active and in good standing with the California Contractors State License Board for work you propose to bid?
   i) License Classification: General Building Contractor
      
      License Code: B

      YES: □ NO: □

      If yes, provide the following information about your firm's contractor's license:

      (1) Name of license holder exactly as on file with the California Contractors State License Board:

      (2) License number: ______________

      (3) Date issued: ______________

      (4) Expiration date: ______________

   ii) License Classification: Machinery and Pumps

      License Code: C-61/D21

      YES: □ NO: □

      If yes, provide the following information about your firm's contractor's license:

      (1) Name of license holder exactly as on file with the California Contractors State License Board:

      (2) License number: ________

      (3) Date issued: ______________

      (4) Expiration date: ______________

   iii) License Classification: Scaffolding

      License Code: C-61/D39
If yes, provide the following information about your firm's contractor's license:

(1) Name of license holder exactly as on file with the California Contractors State License Board:

(2) License number: ______________

(3) Date issued: ______________

(4) Expiration date: ______________

iv) License Classification: Prefabricated Equipment

License Code: C-61/D34

If yes, provide the following information about your firm's contractor's license:

(1) Name of license holder exactly as on file with the California Contractors State License Board:

(2) License number: ______________

(3) Date issued: ______________

(4) Expiration date: ______________

B. List other active Contractor License(s) held by your firm: ________________________________

C. Can you truthfully state that your firm's contractor's license(s) listed above has not been suspended or revoked for any reason related to performance of work as a contractor by the California Contractors State License Board within the last ten (10) years?

YES: ☐ NO: ☐

D. Is your firm registered with the Department of Industrial Relations (DIR)?

YES: ☐ NO: ☐

Registration No.: ______________
II. QUALIFYING PROJECT EXPERIENCE

A. Has your firm successfully completed at least two (2) qualifying project(s) in the past ten (10) years? Refer to top of page for the definition of "qualifying project".

YES: ☐ NO: ☐

IF YES, PROVIDE THE FOLLOWING INFORMATION FOR SUCH PROJECT(S) ON THE FOLLOWING QUALIFYING PROJECT DATA FORM PAGES ONLY (ATTACHMENTS ARE NOT ALLOWED):

PROJECT #1 DATA SHEET

IF PREQUALIFICATION IS FOR A JOINT VENTURE, THE PROJECT LISTED MUST HAVE BEEN COMPLETED BY THE PROSPECTIVE JOINT VENTURE BIDDER WITH AN APPROPRIATE JOINT VENTURE LICENSE AND NOT COMPLETED ONLY BY ONE OF THE PARTNERS.

1. Project Name: ____________________________________________________

2. Project Location (full address): ______________________________________

   City: ______________________ State: ___ Zip: ___

3. Project Description (be specific):

4. Description of Work performed (be specific):

5. Did the project have a full-time superintendent present in the above described settings during ALL construction activities – days, evenings, swing-shift, weekends?

   YES: ☐ NO: ☐

6. Was your firm responsible to design, coordinate, schedule, fabricate, install, and submit formal utility shutdowns and tie-ins, Inspection Requests and coordinate ongoing Inspections during construction?

   YES: ☐ NO: ☐

7. Work Completed as: ☐ Contractor ☐ Subcontractor

   a. Owner Name: _______________________________________________________
   b. Owner Address: ____________________________________________________
   c. Owner Telephone Number: __________________________________________
   d. Owner Contact Person’s Name: _______________________________________
   e. Owner Contact Email Address: _________________________

8. Date Notice of Completion filed for qualifying project: ____________________

9. Original Construction Contract Award amount as awarded (without change orders): ____________________

10. Final Construction Contract Amount: ____________________

11. Original Contract Time (calendar days): ____________________

12. Final Contract Time (calendar days): ____________________
13. Number of Days Liquidated Damages Assessed (calendar days): ________________

14. Name of your Project Manager: ______________________________

15. Name of your Superintendent: _______________________________

# PROJECT #2 DATA SHEET

IF PREQUALIFICATION IS FOR A JOINT VENTURE, THE PROJECT LISTED MUST HAVE BEEN COMPLETED BY THE PROSPECTIVE JOINT VENTURE BIDDER WITH AN APPROPRIATE JOINT VENTURE LICENSE AND NOT COMPLETED ONLY BY ONE OF THE PARTNERS.

1. Project Name: ________________________________________________

2. Project Location (full address): ______________________________________

   City: _________________ State: _____ Zip: _____

3. Project Description (be specific):

4. Description of Work performed (be specific):

5. Did the project have a full-time superintendent present in the above described settings during ALL construction activities – days, evenings, swing-shift, weekends?

   YES: ☐ NO: ☐

6. Was your firm responsible to design, coordinate, schedule, fabricate, install, and submit formal utility shutdowns and tie-ins, Inspection Requests and coordinate ongoing Inspections during construction?

   YES: ☐ NO: ☐

7. Work Completed as: ☐ Contractor ☐ Subcontractor

   a. Owner Name: ________________________________________________
   b. Owner Address: ____________________________________________
   c. Owner Telephone Number: _________________________________
   d. Owner Contact Person’s Name: ______________________________
   e. Owner Contact Email Address: ________________________________

8. Date Notice of Completion filed for qualifying project: ________________

9. Original Construction Contract Award amount as awarded (without change orders): ________________

10. Final Construction Contract Amount: ________________

11. Original Contract Time (calendar days): ________________

12. Final Contract Time (calendar days): ________________

13. Number of Days Liquidated Damages Assessed (calendar days): ________________

14. Name of your Project Manager: ______________________________
15. Name of your Superintendent: _______________________________

III. STAFF EXPERIENCE

A. PROPOSED PROJECT MANAGER CANDIDATE

(1) Name: ______________________________

(2) Years employed by your firm: _____ years

(3) Present position/job function within your firm: _________________________

(4) Years in present position/job function: _____ years

(5) Name of qualifying project successfully completed within the last ten (10) years. Refer to top of page 2 for the definition of "qualifying project".
   (5a) Project Name & Location: ________________________________

   (5b) Project Description: _________________________________________

   (5c) Description of work performed (be specific): _______________________

   (5d) Original Construction Contract Award Amount (as awarded): $_______

   (5e) Project completion date: ________

   (5f) Name, telephone number, and email address of Owner: __________________________

(6) List of other projects successfully completed within the last ten (10) years. (Please attach.)

B. PROPOSED SUPERINTENDENT CANDIDATE

(1) Name: ______________________________

(2) Years employed by your firm: _____ years

(3) Present position/job function within your firm: _________________________

(4) Years in present position/job function: _____ years

(5) Name of qualifying project successfully completed since within the last ten (10) years. Refer to top of page 2 for the definition of "qualifying project".
   (5a) Project Name & Location: ________________________________

   (5b) Project Description: _________________________________________

   (5c) Description of work performed (be specific): _______________________


(5d) Original Construction Contract Award Amount (as awarded without Change Orders): $___________

(5e) Project completion date: ________________________________

(5f) Name, telephone number, and email address of Owner: ________________________________

(6) List of other projects successfully completed within the last ten (10) years. (Please attach.)

C. Provide an organizational chart with personnel titles and names specific to this project.

IV. MANAGEMENT PLAN

A. Will your firm have a written project management plan that you will commit to using for this project?
   YES: ☐ NO: ☐

V. QUALITY ASSURANCE/QUALITY CONTROL (QA/QC)

A. Will your firm have a written Quality Assurance/Quality Control program that you will commit to using for this project?
   YES: ☐ NO: ☐

VI. PRIOR DISQUALIFICATION

A. Has your firm been formally disqualified from performing work for any public entity for poor performance or alleged fraud within the last ten (10) years?
   YES: ☐ NO: ☐

VII. CLAIMS HISTORY

A. Has your firm had four (4) or more unsuccessful claims within the last ten (10) years?

   As used in the preceding sentence, an unsuccessful claim means:

   (a) a claim in excess of $50,000 filed against Contractor, its surety, subcontractor, supplier and/or manufacturer by Owner for damages, defects, breach of contract, breach of warranty, poor workmanship, incomplete performance or delays which were resolved by arbitration, litigation, or other type of proceeding where disputes are submitted to a third party for binding decision or by settlement after the commencement of arbitration, litigation, or other type of proceeding where disputes are submitted to a third party for binding decision with the result that Contractor, its surety, insurer, subcontractor, supplier and/or manufacturer was required to make payment (payments include amounts deducted from back-charged or credited against Contractor's Contract and are calculated by adding together the total amounts paid by Contractor, sureties, insurers, subcontractors, suppliers and manufacturers) to Owner in an amount equal to or exceeding eighty percent of the amount claimed, OR
(b) a claim in excess of $50,000 filed against an Owner by Contractor, its surety, insurer or subcontractor, excluding claims to the extent such claims seek enforcement of a stop notice against Contractor's undisputed Contract Balance, which was resolved by arbitration, litigation, or other type of proceeding where disputes are submitted to a third party for a binding decision or by settlement after the commencement of arbitration, litigation, or other type of proceeding where disputes are submitted to a third party for a binding decision with the result that the total amount received by Contractor, its surety, insurer and subcontractor did not equal or exceed twenty percent of the amount claimed.

References to subcontractors, suppliers and manufacturers in paragraphs (a) and (b) above include all tiers, whether or not the subcontractor, supplier or manufacturer has a contract directly with the Contractor.

YES: ☐ NO: ☐

VIII. SAFETY
A. Does your firm have a written safety program that you will commit to using for this project?

YES: ☐ NO: ☐

B. Do you conduct and document project safety inspections?

YES: ☐ NO: ☐

If yes, who conducts and documents the inspection (Name and Title): ____________________________

How often? Weekly Biweekly Monthly

Name of Company Safety Director: ____________________________

Safety Director will report directly to (Name and Title): ____________________________

IX. COMPLETED QUESTIONNAIRE
A. Have you answered all questions and provided all information required in this PREQUALIFICATION QUESTIONNAIRE?

YES: ☐ NO: ☐

B. Have you signed the Declaration on the front page of this PREQUALIFICATION QUESTIONNAIRE?

YES: ☐ NO: ☐

[END PREQUALIFICATION QUESTIONNAIRE]