Pre-Qualification Documents

Science and Engineering 2
Project Number 900020
PREQUALIFICATION QUESTIONNAIRE

For

SCIENCE & ENGINEERING 2

Project Number 900020

As used herein, the term “entity” means the prospective Contractor submitting this Prequalification Questionnaire regardless of whether the entity is an individual company, joint venture, or partnership. Please note that the term “prospective Contractor” may sometimes be used interchangeably with the term “entity.”

SUBMITTED BY:

(Entity Name. If a Joint Venture, state name of JV Entity)

(Contact Name)

(Address)

(City, State, Zip Code)

(Telephone Number) (Facsimile Number)

(E-mail)

Each prospective Contractor must answer all of the following questions and provide all requested information. Any prospective Contractor failing to do so will be deemed to be not responsive and not prequalified with respect to this Prequalification. Notification of Prequalification status will be posted on the UC Merced Web Site (http://www.ucmerced.edu/community/rfprfq.asp). Contractors that have submitted a Prequalification Questionnaire may also contact Physical Planning Design and Construction at (209) 228-4479 to request written notification. Prospective contractors that affirmatively respond (i.e. answer YES) to all questions requiring a “yes” or “no” (items 1-12), submit all required information and supporting data, obtain less than 3 points on item #13 Claims History AND are determined to have accurately responded to the questions will be prequalified. Only those Contractors that have been determined to be prequalified will be eligible to submit a bid for this Project.

If the prospective Contractor is determined by the University not to be prequalified, the prospective Contractor may request a review by the Campus. Any such request must be received by the Facility within 3 calendar days after receipt by the prospective Contractor of the determination. The decision resulting from such review 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 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.

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.

WHERE NECESSARY, COPY THE FORMS IN THIS PACKAGE. USE ONLY THESE FORMS.

June 30, 2008
Revision 2
Contractor: PQ

Prequalification Questionnaire
1. **LICENSE(S)**
   
   A. Does the entity hold the California contractor's license(s) required per the Exhibit 1 Work Category(ies) for which you are requesting prequalification? Is(are) the license(s) current, active, and in good standing with the California Contractor's State License Board?
      
      YES ☐ NO ☐

      List the Work Categories for which the entity is requesting prequalification below:

      Work Category/ Prime Trade Package No. Work Category Description

      ____________________________________________________________

   (NOTE - The entity submitting this prequalification questionnaire must be the holder of the requisite license. If the entity submitting is a Joint Venture, the joint venture must hold the license or have applied for the license(s).

   B. If yes, provide the following information about the entity's contractor's license:
      
      1. Name of license holder exactly as on file with the California Contractor's State License Board:

      2. License Classification(s): ________________________________

      3. License Code(s): ________________________________

      4. License Number(s): ________________________________

      5. Date(s) Issued: ________________________________

      6. Expiration Date(s): ________________________________

   C. Can you truthfully state that the entity's contractor's license has not been suspended or revoked by the California Contractor's State License Board within the last 5 years?

      YES ☐ NO ☐

2. **SURETY**

   Prospective Contractor shall obtain and submit the Surety Declaration in the form shown below, signed by an authorized representative of the surety proposed to be used for this project and notarized.

   A. Is the surety to be used for this project authorized by the Insurance Commissioner to transact business in the State of California as an admitted surety insurer (as defined in the California Code of Civil Procedure Section 995.120)?

      YES ☐ NO ☐

   B. Is the entity able to obtain bonding for for the Work Category value(s) listed in Exhibit 1?

      YES ☐ NO ☐

   C. Can the entity truthfully state that no surety has paid out any monies on claims on the performance bond issued by a surety for the benefit of the Owner arising out of the construction activities of the entity within the last 5 years?

      YES ☐ NO ☐
D. Can the entity truthfully state that **no** surety has paid out any monies on claims on the payment bond issued by a surety for the benefit of the Owner arising out of the construction activities of the entity within the last 5 years?

YES ☐  NO ☐
D. Surety Declaration:

PROVIDE THIS DECLARATION TO YOUR SURETY(IES) FOR COMPLETION. DO NOT HAVE THE SURETY SUBMIT THIS INFORMATION DIRECTLY TO THE UNIVERSITY.

The undersigned declares under penalty of perjury that the bonding capacity indicated above is true and correct and that this declaration was executed in

________________________________ (County), _______________________, (State)

on ______________________________ (Date).

__________________________________________ (Signature)

__________________________________________ (Name and Title - Printed or Typed)

__________________________________________ (Representing [Surety Name])

__________________________________________ (Entity Name)

__________________________________________ (Address)

__________________________________________ (City, State, Zip Code)

__________________________________________ (Telephone Number)  __________________________________ (Facsimile Number)

__________________________________________ (E-mail)

(ATTACH NOTARIZATION of SURETY REPRESENTATIVE’S SIGNATURE)
3. INSURER

This project will be subject to the University of Controlled Insurance Program (UCIP) which is mandatory for all projects over $20 Million in value. The UCIP will cover the Prospective Contractor for all onsite risks with the exception of Automobile and Contractor’s tools and equipment. The Prospective Contractor shall obtain and submit the Insurance Declaration(s) in the form shown below, for all offsite risks and for Automobile and Contractor’s tools and equipment while on site. These declarations shall be signed by an authorized representative of its insurer and notarized. These limits are minimums and do not necessarily represent the limits required by any individual Prime Trade Contract (If more than one insurer, submit a completed form for each insurer). Please see Exhibit 1A (under separate cover) for more information on the UCIP.

A. Is the entity able to obtain insurance in the following limits for this construction contract?

YES ☐ NO ☐

<table>
<thead>
<tr>
<th>Commercial Form General Liability Insurance* - Limits of Liability</th>
<th>Minimum Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each Occurrence - Combined Single Limit for Bodily Injury and Property Damage</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Products - Completed Operations Aggregate</td>
<td>$2,000,000</td>
</tr>
<tr>
<td>Personal and Advertising Injury</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>General Aggregate</td>
<td>$2,000,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business Automobile Liability Insurance* - Limits of Liability</th>
<th>Minimum Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Each Accident - Combined Single Limit for Bodily Injury and Property Damage</td>
<td>$2,000,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Workers Compensation and Employer’s Liability Insurance**</th>
<th>Minimum Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workers Compensation: (as required by Federal and State of California law)</td>
<td></td>
</tr>
<tr>
<td>Employer’s Liability:</td>
<td></td>
</tr>
<tr>
<td>Each Employee</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Each Accident</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>Each Policy</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>

*This insurance must be (i) issued by companies with a Best rating of A- or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody's) or (ii) guaranteed, under terms consented to by the University (such consent to not be unreasonably withheld), by companies with a Best rating of A- or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody's). Further, the deductible, or retained limit, for each coverage shall not be more than $100,000.

**This insurance must be issued by companies (i) that have a Best rating of B+ or better, and a financial classification of VIII or better (or an equivalent rating by Standard & Poor or Moody's); or (ii) that are acceptable to the University.
Insurance Declaration:

**PROVIDE THIS DECLARATION TO YOUR INSURANCE CARRIER FOR COMPLETION. DO NOT HAVE THE CARRIER SUBMIT THIS DECLARATION DIRECTLY TO THE UNIVERSITY.**

The undersigned declares under penalty of perjury that below named insurer is currently willing to provide the insurance listed above and that this declaration was executed in

______________________________ (County), __________________________, (State)
on ______________________________ (Date).

________________________________________
(Signature)

________________________________________
(Name and Title - Printed or Typed)

________________________________________
(Representing [Insurer Name])

________________________________________
(Entity Name)

________________________________________
(Address)

________________________________________
(City, State, Zip Code)

________________________________________
(Telephone Number) ______________________ (Facsimile Number)

________________________________________
(E-mail)

**(ATTACH NOTARIZATION of INSURER REPRESENTATIVE’S SIGNATURE)**
4. **CONSTRUCTION EXPERIENCE** (IN COMPARABLE PROJECTS)

Has the entity successfully **completed** at least 3 comparable projects within the last 7 years, all of which were constructed in the United States of America, at least 2 of which were constructed in the State of California and at least 1 of which was characterized as a Research Laboratory for Higher Education or a Hospital?

| YES ☐ | NO ☐ |

A. Subject to the above qualifications, a “comparable project” is defined as having ALL of the following:

1. A construction cost at the bid date of at least 90% of the estimated construction value listed in Exhibit 1 for the applicable Work Category; AND

2. Delivery method(s): Lump Sum

3. Constructed by the entity submitting this Prequalification Questionnaire. (Note: Projects completed by present employees of the contractor for former employers are **not acceptable**.)

B. An entity wishing to use a predecessor business to satisfy prequalification requirements must demonstrate with written information submitted with this Prequalification Questionnaire that it is substantially the same organization (in terms of who is managing Contractor) as the predecessor business. An entity may meet the requirement of the preceding sentence by demonstrating that the same person is the qualifying individual (under California Contractor’s License Law) for:

1. Contractor’s license of Contractor which shall be the same type as license required for the Contract; and

2. Contractor’s license of predecessor business which shall also be the same type as the license required for the Contract.

**COMPLETE AND SUBMIT THE FOLLOWING PROJECT DATA SHEET FOR EACH COMPARABLE PROJECT SUBMITTED AS EVIDENCE OF THE ENTITY’S EXPERIENCE. SUBMIT NOT MORE OR LESS THAN THE NUMBER PROJECT DATA SHEETS CORRESPONDING TO THE REQUIRED NUMBER OF COMPARABLE PROJECTS LISTED ABOVE. SUBMIT DATA SHEETS FOR EACH WORK CATEGORY FOR WHICH THE ENTITY IS REQUESTING PREQUALIFICATION.**
**PROJECT DATA SHEET**

*(A separate sheet(s) must be prepared for each project submitted.)*

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Project Name: ________________________________________________________________</td>
</tr>
<tr>
<td>2.</td>
<td>Project Location (including full address, if any):</td>
</tr>
<tr>
<td></td>
<td>City: ___________ State: ___________ Zip: ___________</td>
</tr>
<tr>
<td>3.</td>
<td>Project Description: _________________________________________________________</td>
</tr>
<tr>
<td>4.</td>
<td>Construction Type: _________________________________________________________</td>
</tr>
<tr>
<td>5.</td>
<td>Size (gross sq. ft.): ________________</td>
</tr>
<tr>
<td>6.</td>
<td>Business name of entity which constructed this project:</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Who was the General Contractor for the project? Name: ______________________</td>
</tr>
<tr>
<td></td>
<td>Address: __________________________________________________________________</td>
</tr>
<tr>
<td></td>
<td>City: ___________ State: ___________ Zip: ___________</td>
</tr>
<tr>
<td></td>
<td>(Telephone Number) _________________________________________________________</td>
</tr>
<tr>
<td>8.</td>
<td>Cost at Bid: $____________________</td>
</tr>
<tr>
<td>9.</td>
<td>Was construction of the project begun and completed within the last 7 years?</td>
</tr>
<tr>
<td></td>
<td>YES ☐ NO ☐</td>
</tr>
<tr>
<td>10.</td>
<td>Project Owner Name: ________________________________________________________</td>
</tr>
<tr>
<td>11.</td>
<td>Project Owner Address: ____________________________________________________</td>
</tr>
<tr>
<td></td>
<td>City: ___________ State: ___________ Zip: ___________</td>
</tr>
<tr>
<td></td>
<td>(Telephone Number) ________________ (Facsimile Number) ______________________</td>
</tr>
<tr>
<td></td>
<td>E-mail Address-optional: _________________________________________________</td>
</tr>
<tr>
<td>12.</td>
<td>Design Professional (e.g. the name of the Architect or Engineer of record)</td>
</tr>
<tr>
<td></td>
<td>Subconsultants (including structural engineer and mechanical engineer, if any):</td>
</tr>
<tr>
<td></td>
<td>Structural Engineer</td>
</tr>
<tr>
<td></td>
<td>Contact Name: ___________________ (Telephone Number) ________________________</td>
</tr>
<tr>
<td></td>
<td>Design Professional</td>
</tr>
<tr>
<td></td>
<td>Contact Title:</td>
</tr>
<tr>
<td></td>
<td>E-mail Address:</td>
</tr>
<tr>
<td></td>
<td>Mechanical Engineer</td>
</tr>
<tr>
<td></td>
<td>Contact Name: ___________________ (Telephone Number) ________________________</td>
</tr>
<tr>
<td></td>
<td>Design Professional</td>
</tr>
</tbody>
</table>
Contact Title: ____________________________________________________________
E-mail Address: ________________________________________________________

13. What was the project's delivery method? (Lump Sum, Negotiated, T&M etc.) ______________

14. Was the project characterized as a Research Laboratory for Higher Education or a Hospital?

   YES ☐       NO ☐

   (Attach additional pages with other pertinent project information as necessary.)
5. **STAFF EXPERIENCE**

Have the Project Manager, and Project Superintendent successfully *completed* at least 2 comparable projects, as defined in Question 5.

- YES ☐   NO ☐

Will the Project Manager be onsite full time?

- YES ☐   NO ☐

Will the Prospective contractor have dedicated staff for daily site clean-up?

- YES ☐   NO ☐

A. **PROJECT MANAGER:**

1. The name of the Project Manager to be committed to this project on a full time basis and continuously retained throughout this project is:

   (Attach resume)

2. Present position/job function within entity: ________________________________

3. The Project Manager named above was assigned to the following comparable projects:

<table>
<thead>
<tr>
<th>Project</th>
<th>Construction Cost:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
</tbody>
</table>

4. The Project Manager named above worked on the following projects for which Project Data Sheets are submitted: *(NOTE: IF THE ABOVE DESIGNATED INDIVIDUAL DID NOT WORK IN THIS CAPACITY ON AT LEAST 1 COMPARABLE PROJECTS FOR WHICH PROJECT DATA SHEETS WERE SUBMITTED, PROVIDE A PROJECT DATA SHEET FOR 2 OF THE PROJECTS LISTED IN RESPONSE TO A.3 ABOVE.)*

<table>
<thead>
<tr>
<th>Project</th>
<th>Construction Cost:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
</tbody>
</table>

B. **FULL-TIME PROJECT SUPERINTENDENT:**

1. The name of the Project Superintendent to be committed to this project on a full-time basis and continuously retained throughout this project is:

   (Attach resume)

2. Present position/job function within entity: ______

3. The Project Superintendent named above was assigned to the following comparable projects:

<table>
<thead>
<tr>
<th>Project</th>
<th>Construction Cost:</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
</tr>
</tbody>
</table>
4. The Project Superintendent named above worked on the following projects for which Project Data Sheets are submitted: *(NOTE: IF THE ABOVE DESIGNATED INDIVIDUAL DID NOT WORK IN THIS CAPACITY ON AT LEAST 1 COMPARABLE PROJECTS FOR WHICH PROJECT DATA SHEETS WERE SUBMITTED, PROVIDE A PROJECT DATA SHEET FOR 2 OF THE PROJECTS LISTED IN RESPONSE TO B.3 ABOVE.)*
   a. 
   b. 

6. SAFETY PROGRAM
   A. Does the entity have a written Injury and Illness Prevention Program (IIPP) that complies with Title 8 of the California Code of Regulations?
      YES ☐ NO ☐
   B. Does the entity have a written safety program that meets CAL/OSHA requirements?
      YES ☐ NO ☐
   C. Will the entity have personnel permanently assigned and dedicated to Safety on this project?
      YES ☐ NO ☐
   D. Is the entity’s Experience Modification Rate (EMR) less than 1.25 for each of the past 3 premium years?
      YES ☐ NO ☐
      Year: ________ EMR: __________
      Year: ________ EMR: __________
      Year: ________ EMR: __________
      Attach verification of EMR from State of California or from insurance company.
   E. The entity HAS NOT had any Cal-OSHA fines in the Serious, Repeat or Willful categories within the past 5 years?
      YES ☐ NO ☐

7. QUALITY CONTROL/QUALITY ASSURANCE PROGRAM (QC/QA)
   A. Does the entity have a written quality control/quality assurance program?
      YES ☐ NO ☐
      If YES, submit a copy of your QC/QA program with this submission.
   B. Will the entity have personnel permanently assigned and dedicated to QC/QA on this project?
      YES ☐ NO ☐

8. BUSINESS CONSTRUCTION REVENUE
   For the purposes of this Prequalification Questionnaire, “business construction revenue” shall be defined as payments to entity for construction services.
   Can you truthfully state that the entity has had an annual business construction revenue of at least

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2.5 times the value stipulated in Exhibit 1 for the Work Category for which prequalification is being requested for each and every one of the last 3 consecutive calendar years?

[ ] YES [ ] NO

9. LIQUIDATED DAMAGES

A. In the last five years, the entity HAS NOT been assessed liquidated damages on a construction contract with either a public or private owner?

[ ] Yes [ ] No

10. DISCIPLINARY MEASURES HISTORY

Can you truthfully state that the entity (nor any member of the entity if a joint venture or partnership) has not been disqualified or otherwise barred from doing business with a public agency (e.g., federal, state, county, city, University of California System, California State University System, school district,) within the last 10 years?

[ ] YES [ ] NO

11. FALSE CLAIMS HISTORY

Can you truthfully state that the entity (nor any member of the entity if a joint venture or partnership) has not been found in a final decision of a court to have submitted a false claim to a public agency (e.g., federal, state, county, city, University of California System, California State University System,) within the last 10 years?

[ ] YES [ ] NO

12. TERMINATION

Can you truthfully state that the entity (nor any member of the entity if a joint venture or partnership) HAS NOT been terminated for cause by an Owner after construction commenced within the last 5 years?

[ ] YES [ ] NO

13. CLAIMS HISTORY

Each prospective Contractor will be evaluated to determine if the prospective Contractor and/or persons or entities associated with prospective Contractor have a history of having unmeritious claims asserted by or on their behalf in litigation or arbitration and/or of having had meritorious design or construction claims asserted against them in litigation or arbitration.

In order to be evaluated, each prospective Contractor must complete the Claims History portion of this questionnaire. Based on the information provided, each prospective Contractor will be assigned a Claims History score.

One point will be assessed for each qualifying lawsuit or arbitration, commenced within 5 calendar years preceding the deadline for submission of the prequalification questionnaire, in which prospective Contractor and/or persons or entities associated with prospective Contractor, had design or construction claims asserted by or on their behalf that were resolved by trial court judgment, arbitration award or settlement calling for receipt of less than 50% of the total amount of claims asserted in the lawsuit or arbitration.

Additionally, one point will be assessed for each qualifying lawsuit or arbitration, commenced within 5 calendar years preceding the deadline for submission of the prequalification questionnaire, in which prospective Contractor and/or persons or entities associated with
prospective Contractor, had design or construction claims asserted against them, that were resolved by trial court judgment, arbitration award or settlement calling for receipt of more than 50% of the total amount of claims asserted in the lawsuit or arbitration.

**Any prospective Contractor with a score of 3 or more points will presumptively be considered not prequalified because the prospective Contractor and/or persons or entities associated with prospective Contractor have been a party to 3 or more lawsuits or arbitrations in which they either asserted, or had asserted on their behalf, unmeritorious design or construction claims or they had meritorious design or construction claims asserted against them.**

The presumption may be rebutted if the University determines, after investigating any explanation offered in providing the Claims History, that the prospective Contractor and/or persons or entities associated with prospective Contractor have not been a party to 3 or more lawsuits or arbitrations in which they either asserted, or had asserted on their behalf, unmeritorious design or construction claims or they had meritorious design or construction claims asserted against them.

If the presumption is not rebutted, the prospective Contractor will be deemed to have an unacceptable Claims History, and will not be prequalified for the Project that is the subject of this prequalification process.

As used herein:

"Lawsuit" means any lawsuit commenced within 5 calendar years preceding the deadline for submission of the prequalification questionnaire

"Arbitration" means any binding arbitration commenced within 5 calendar years preceding the deadline for submission of the prequalification questionnaire

"Claim" means a claim (excluding claims solely for the enforcement of stop notices) arising from design and/or construction work and includes, without limitation, claims for extra compensation and damages (including delay, disruption and acceleration damages, but excluding claims for personal injury or death), and claims for defective design or construction work.

"Pass-Through Claim" has the meaning commonly ascribed to it in the construction industry and also includes (i) any claim that was or is asserted by a person or entity, in whole or in part, against an Owner on behalf of a different person or entity; and (ii) any claim that was or is asserted by an Owner against a person or entity, and that was subsequently reasserted, in whole or in part, against a different person or entity

"Entity" means all entities and individuals who are intended to work as a part of, for, or under the prospective Contractor on the Project that is the subject of this prequalification process and includes, without limitation, such entities or individuals who are prime contractors, and if a joint venture, all members of the joint venture.

Whenever a person or entity is referred to, the reference includes the person or entity and all partners, affiliates, subsidiaries, heirs, executors, administrators, assigns, predecessors and successors in interest of or to the person or entity. For instance, a reference to a Contractor includes the prospective Contractor and all partners, affiliates, subsidiaries, heirs, executors, administrators, assigns, insurers, predecessor businesses and successor businesses of the Contractor.
A. Can entity truthfully state that the entity has **not** been assigned non-prequalified status, in part or in whole, within the past five (5) years, for failure to provide requested information regarding past litigation or arbitration history?

YES ☐ NO ☐

B. 1. Lawsuits And Arbitrations By Entity:

Can entity truthfully state that, within the past 5 years, the entity has **not** been a party to any lawsuits or arbitrations, where the total amount of Claims (including Pass-Through Claims) asserted **by or on behalf of** the entity exceeded $50,000?

YES ☐ NO ☐

If no, how many? ____________

For each such claim, complete a copy of Claim Data Sheet and attach it to the entity’s prequalification questionnaire.

2. Lawsuits And Arbitrations Against Entity:

Can entity truthfully state that, within the past 5 years, the entity has **not** been a party to any lawsuits or arbitrations where the total amount of Claims (including Pass-Through Claims, and claims for indemnity or contribution) **against** the entity exceeded $50,000?

YES ☐ NO ☐

If no, how many? ____________

For each such claim, complete a copy of Claim Data Sheet and attach it to the entity’s prequalification questionnaire.

(A separate data sheet must be prepared for each Lawsuit or Arbitration as required above. If the claims were made against the entity and were resolved for more than 50% of the highest amount sought, state why the claims should not be considered meritorious design or construction claims asserted against prospective Contractor and/or persons or entities associated with prospective Contractor:
CLAIM DATA SHEET

(Make Copies of this CLAIM DATA SHEET as Needed.)

Case Name and Number including Name and Location of Court or Arbitration Service:

________________________________________________________________________________

Date Arbitration or Litigation Commenced: ____________________________________________

Project or Contract Number: _______________________________________________________

Project Name: ___________________________________________________________________

Project or Contract Number: _______________________________________________________

Project Location: __________________________ City) __________________________ (State)

Name of Owner: __________________________________________________________________

Contact Person and Title: __________________________________________________________________

Owner’s Telephone Number: _______________________________________________________

Description of Claims: __________________________________________________________________

Highest Amount Sought For All Claims: $ ____________ (Amount in Figures)

Amount Recovered: $ _______________________ (Amount in Figures)

Date of Claim Resolution: __________

Method of Resolution (check one):

☐ Judgment ☐ Arbitration Award ☐ Settlement

☐ Other – Describe: __________________________________________________________________

June 30, 2008
Revision 2
Contractor: PQ
PREQUALIFICATION DECLARATION

I, ______________________________ (Printed Name),

hereby declare that I am the ______________________________ (Title)

of ______________________________ (Name of Entity)

submitting this Prequalification Questionnaire; that I am duly authorized to sign this
Prequalification Questionnaire on behalf of the above named entity; and that all
information set forth in this Prequalification Questionnaire and all attachments hereto are,
to the best of my knowledge, true, accurate and complete as of its submission date.

The undersigned declares under penalty of perjury that all of the prequalification information
submitted with this form is true and correct and that this declaration was executed in
_________ (County), _________ (State) on __________ (Date).

________________________________________
(Signature)

________________________________________
(Printed Name)

________________________________________
(Address)

________________________________________
(City, State, Zip Code)

__________________________  __________________________
(Telephone Number)          (Facsimile Number)

__________________________
(E-mail - optional)

June 30, 2008
Revision 2
Contractor: PQ

Prequalification Questionnaire
<table>
<thead>
<tr>
<th>EXHIBIT 1 - WORK CATEGORIES</th>
<th>WC EST VALUE</th>
<th>REQ'D CA LICENSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work Category No. 1 – Demolition, Earthwork, Paving, Shoring and Tiedowns</td>
<td>$2,050,000</td>
<td>C-12</td>
</tr>
<tr>
<td>Work Category No. 2 – Site Utilities</td>
<td>$1,950,000</td>
<td>C-42</td>
</tr>
<tr>
<td>Work Category No. 3 – Structural Steel</td>
<td>$3,600,000</td>
<td>C-51</td>
</tr>
<tr>
<td>Work Category No. 4 – Structural Concrete and Shotcrete</td>
<td>$1,975,000</td>
<td>C-8</td>
</tr>
<tr>
<td>Work Category No. 5 – Precast Concrete</td>
<td>$900,000</td>
<td>C-8</td>
</tr>
<tr>
<td>Work Category No. 6 – Site Concrete</td>
<td>$1,500,000</td>
<td>C-8</td>
</tr>
<tr>
<td>Work Category No. 7 – Reinforcing Steel</td>
<td>$600,000</td>
<td>C-50</td>
</tr>
<tr>
<td>Work Category No. 8 – Metal Decking</td>
<td>$650,000</td>
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<tr>
<td>Work Category No. 9 – Miscellaneous Steel and Stairs</td>
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<tr>
<td>Work Category No. 10 – Architectural Woodwork</td>
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<tr>
<td>Work Category No. 11 – Rough Carpentry and General Work (General Conditions)</td>
<td>$1,850,000</td>
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<tr>
<td>Work Category No. 12 – Waterproofing</td>
<td>$700,000</td>
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<tr>
<td>Work Category No. 13 – Building Insulation</td>
<td>$175,000</td>
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<tr>
<td>Work Category No. 14 – Alum Curtain Wall, Skylights, Sunshades, Metal Panels &amp; Plaster</td>
<td>$7,550,000</td>
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<tr>
<td>Work Category No. 15 – Roofing</td>
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<tr>
<td>Work Category No. 16 – Metal Stud Framing and Drywall</td>
<td>$3,125,000</td>
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<tr>
<td>Work Category No. 17 – Metal Panels, Sheet Metal Trim, Louvers, Exp Jt. and Flashing</td>
<td>$750,000</td>
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<tr>
<td>Work Category No. 18 – Fire Proofing</td>
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<tr>
<td>Work Category No. 19 – Doors, Frames and Hardware</td>
<td>$900,000</td>
<td>C-61, D-16, D-28</td>
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<tr>
<td>Work Category No. 20 – Ceramic Tile</td>
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<tr>
<td>Work Category No. 21 – Acoustical Tile Ceilings</td>
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<tr>
<td>Work Category No. 22 – Resilient Floor, Wood Floor, Carpet and Base</td>
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<tr>
<td>Work Category No. 23 – Laboratory Casework and Equipment</td>
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<tr>
<td>Work Category No. 24 – Environmental Rooms</td>
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<tr>
<td>Work Category No. 25 – Painting</td>
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<tr>
<td>Work Category No. 26 – Signage</td>
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<tr>
<td>Work Category No. 27 – Elevators</td>
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<tr>
<td>Work Category No. 27 – Fire Protection</td>
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<td>Work Category No. 28 – Mechanical</td>
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<tr>
<td>Work Category No. 29 – Plumbing</td>
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<tr>
<td>Work Category No. 30 – Electrical</td>
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<td>C-7 &amp; C-10</td>
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<td>Work Category No. 31 – Building Automation System</td>
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<tr>
<td>Work Category No. 32 – Testing and Balancing</td>
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<tr>
<td>Work Category No. 33 – Landscaping, Irrigation, Vegetated Roofs and Pavers</td>
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<tr>
<td>Work Category No. 34 – Shielding</td>
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