

**THE BIDDING AND CONTRACT PROVISIONS**  
Document 00 46 00 – Project-Specific Prequalification Statement  
(Standard Multiple and Single Contract Sets)

**PROJECT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

at the  
UNIVERSITY OF ILLINOIS  
\_\_\_\_\_ CAMPUS

Project Number: \_\_\_\_\_

To: \_\_\_\_\_ Date: \_\_\_\_\_

The Board of Trustees of the University of Illinois  
c/o \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contract Division to be bid:

- I General Work
- II Plumbing Work
- III Heating, Piping, Refrigeration & Temperature Control Work
- IV Ventilation & Air Distribution Work
- V Electrical Work
- \_\_\_\_\_
- \_\_\_\_\_

Project-Specific Prequalification Submitted By: \_\_\_\_\_

Bidder: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

**Notice:** This Project-Specific Prequalification Statement shall be submitted to the Owner (DESCRIPTION LOCATION TO BE DELIVERED) by 4:00 p.m. prevailing time on \_\_\_\_\_.

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**1.0 Provide the following required information:**

*Note:*

*Professional Services Consultant: Please number each section or mark this document NOT APPLICABLE*

*Campus Construction Unit: This document requires prior approval by the University Office of Capital Programs and Real Estate Services*

- 1.1 Schedule performance on (5) recently completed projects, including:
  - 1.1.a Project square footage.
  - 1.1.b Project construction cost for your DOW.
  - 1.1.c Project duration.
  - 1.1.d Original contract date for substantial completion.
  - 1.1.e Actual date of substantial completion.
  - 1.1.f Was substantial completion extended due to change orders? If so, by how many days?

- 1.1.g Please describe any unusual circumstances that impacted schedule.
- 1.2 Owner references including name of project, client name, phone number, and e-mail.
- 1.3 Safety performance metrics, including:
  - 1.3.a EMR (Experience Modifier Rate) from your primary insurance carrier for the past three years.
  - 1.3.b Provide OSHA 300A logs for the past three years.
  - 1.3.c Please disclose any reportable injuries regardless of firm size.
  - 1.3.d Provide a copy of your company safety plan.
  - 1.3.e Please identify a project safety representative (this individual may also serve as a superintendent, foreman, or crew leader but must be plausibly assigned to the project). This individual shall have completed an authorized OSHA 30-hour safety training course and have a current CPR/First Aid certification. A copy of the issued certificates should be provided.
- 1.4 Any additional information/requirements entered in the Upside Project Form from the university to be displayed here.

**CERTIFICATION OF THE PROJECT SPECIFIC PREQUALIFICATION STATEMENT**

The Bidder certifies that all of the information contained in Sections \_\_ through \_\_ of this Project-Specific Prequalification Statement is true and complete.

By: \_\_\_\_\_

Name: \_\_\_\_\_  
(Please print or type)

Date: \_\_\_\_\_

Title: \_\_\_\_\_

END OF DOCUMENT 00 46 00