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: The Board of Trustees of the University of Illinois
   c/o ___________________________________________________________________

Project-Specific Prequalification Submitted By: _____________________________

Bidder: __________________________________________________________________

Business Address: _______________________________________________________

Phone: __________________________________________________________________
Fax: ____________________________________________________________________

Date: ___________________________________________________________________

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

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 _____.

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 OSHS 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