

State of North Carolina
Prequalification Form for First -Tier Subcontractors under CM at Risk

Pursuant to the statute, this form gathers information about the subcontractors seeking to qualify for the work and provides a general format for the prequalification criteria. **Completing this questionnaire does not guarantee prequalification.** Evaluation of the submittal shall be performed by the prequalification committee in accordance with GS 143-128.1, 143-135.8 and the State of NC Prequalification Policy (attached).

First-Tier Subcontractors are not to use the blank template from the SCO website but to use the project -specific form from the Prequalification Committee.

PREQUALIFICATION DUE DATE/TIME: 26 July 17, 2017 5:00 PM
(date) (time)

Submitted to: Grady Dwiggin

Contact Name receiving prequalifying packages

New Atlantic Contracting, Inc.

CM @ R Firm

2635 Reynolda Road

Address

Address

Winston-Salem, NC 27106

City/State Zip Code + 4

336-759-7440 336-759-7445

Phone number

Fax Number

gdwiggin@new-atlantic.net

E-mail address

Project: FACILITIES OPERATIONS AND PARKING SERVICES (FOPS) COMPLEX

Name of Project

UNIVERSITY OF NORTH CAROLINA AT CHARLOTTE

Project Owner

Poplar Lane - Charlotte, NC 28262

Project Location/Address

LS3P

Project Architect

Building October 2017

Project Phase

Project Start Date (Approx.)

12 months (entire project) Late September 2017

Project/Phase Duration

Anticipated Bid Date

\$18,000,000 \$13,000,000

Total Project Budget

Phase Budget

Insurance Program: OCIP _____ CCIP _____ SubGuard _____ None _____

SUBMITTING FIRM: _____

State of North Carolina

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Project Description: (An in-depth narrative of the details of the project, site, trades, LEED, etc.)

The Facilities Operations & Parking Services Complex consists of an office/shop building, warehouse, and accessory structures located in the North Village Sector of the University of North Carolina at Charlotte campus. The project site is approximately 13 acres and located in an undeveloped area north of Lot 25. The project site is bordered by Lot 25 to the south, Poplar Lane and North Deck to the east, and contiguous undeveloped wooded area to the north and west. The complex will relocate and consolidate the current Facilities Operations, Parking and Transportation Services, and Receiving and Stores facilities located in several buildings throughout campus. The complex consists of two primary structures: an office/shop building and a warehouse totaling approximately 55,000sf. The buildings will be a one story steel framed structure for the office/shops building, with a pre-engineered metal building for the warehouse. The primary facades will feature brick and architectural cast stone.

If your firm is interested in prequalifying for this project/phase, please check the box for your trade(s).
This is a preliminary list of Bid Packages and may change based on response and qualified bidders.

Bid Pkg	Scope of Work	Preliminary Budget	Check Box if Prequalifying
2B	UNIT PAVERS	\$ 90,000	
2C	SITE FENCING	\$ 145,000	
3B	POLISHED CONCRETE	\$ 35,000	
4A	MASONRY	\$ 505,000	
6A	ARCHITECTURAL CASEWORK & COUNTERTOPS	\$ 185,000	
7A	WATERPROOFING / AIR BARRIER / JOINT SEALANTS	\$ 115,000	
7B	ROOFING & GUTTERS	\$ 500,000	
8A	DOORS, FRAMES, & HARDWARE	\$ 280,000	
8B	OVERHEAD DOORS & LOADING DOCK EQUIP.	\$ 110,000	
8C	STOREFRONT / GLASS & GLAZING	\$ 250,000	
9A	GYPSUM BOARD ASSEMBLIES	\$ 875,000	
9B	ACOUSTICAL CEILINGS	\$ 95,000	
9C	TILE	\$ 65,000	
9D	FLOORING (CARPET & RESILIENT)	\$ 125,000	
9E	PAINTING	\$ 300,000	
10A	SPECIALTIES (TOILET ACC. & PART., FEC, APPL.)	\$ 105,000	
10B	SIGNAGE	\$ 27,000	
10C	METAL LOCKERS	\$ 50,000	
12A	WINDOW TREATMENTS	\$ 26,000	
13A	PRE-ENGINEERED BUILDINGS	\$ 490,000	
15A	FIRE PROTECTION	\$ 175,000	
15B	PLUMBING	\$ 600,000	
15C	HVAC	\$ 2,600,000	
16A	ELECTRICAL	\$ 2,170,000	

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SECTION 1. MINIMUM REQUIREMENTS

[Matrix: There are no points assigned for responses in Section 1 or Section 4 signature page.]

1. a. Primary/Main office location/Office managing this project

Company Name

Physical Address

Mailing Address

City/State Zip Code + 4

(_____) (_____)
Phone number Fax number

Primary Contact Name

Secondary Contact Name

Primary Contact Email Address

Secondary Contact Email Address

[Matrix: If not completely filled out, proposal is non-responsive and will not be considered for pre-qualification.]

Organization

1. b. Business type (check box) Corporation Partnership Limited Liability Company Sole Proprietor Joint Venture

Indicate your NC Statewide Uniform Certification: (check box): MBE HBE AABE AIBE WBE SDB DBE
See website link for more information: <http://www.doa.nc.gov/hub/swuc.htm>

Other (specify) _____ Certifying Agency/State (specify)

Is your firm registered with the State of North Carolina to do business? Yes No

Is your firm owned or controlled by a parent or any other organization? Yes No

Describe Ownership if Yes: _____

Additionally, if you answered Yes that your company is owned or controlled by a parent or any other organization, you agree to sign a Parent Company Guarantee Letter (see Appendix A for sample letter) and submit the same with this Prequalification Application for review and approval. Additionally, an individual who is authorized to bind the Parent Company shall co-sign the contract as a condition precedent to award of a contract. If you do not agree to these terms, your pre-qualification application will not meet the minimum requirements and will be disapproved.

List all other names your firm has operated as for the past five (5) years: _____

[Matrix: If not completely filled out, proposal is non-responsive and will not be considered for pre-qualification.]

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1. c. Licensing Information (Please provide all North Carolina professional licenses required for you to perform your services.)

NC License Type (check box) General Construction Electrical Mechanical Plumbing Burglar Alarm
Fire Protection Other (please specify)

Not Applicable or Required by North Carolina for Trade Package(s) Selected for Pre-qualification

NC License number/name of licensee License Limit/Level State/County/City Privilege License (provide copy)

_____	_____	_____
_____	_____	_____
_____	_____	_____

Has any license ever been denied or revoked? Yes No If yes, please describe, _____

[Matrix: Enter type of license. If information not provided in application or license does not meet requirement for trade package or State of North Carolina, proposal is non-responsive and will not be considered for pre-qualification.]

1. d. Type of Work Performed on a regular basis

Primary Scope of Work: _____

Secondary Scope of Work: _____

Other Scope of Work: _____

What type of work do you self perform? _____

[Matrix: If not completely filled out, proposal is non-responsive and will not be considered for pre-qualification.]

Bonding

1. e. (1) Attach letter (see Appendix B for sample letter), dated within the last 30 days, from your surety company, signed by their Attorney in Fact, verifying their willingness to issue sufficient payment and performance bonds for this project, on behalf of your firm and the dollar limits of that bond commitment, both single and aggregate. Surety company bond rating shall be rated "A-" or better and "VII" or higher under the A.M. Best Rating system or The Federal Treasury List.

Have you attached a surety letter? Yes No

[Matrix: "Yes or No". If this information is not provided in application for firms wishing to be approved for a bid package(s) requiring evidence (see bid package list at front of this form) of the ability to provide a Performance and Payment Bond, proposal is non-responsive and will not be considered for pre-qualification. Further, this review and approval for this section will be based on the surety letter stating an amount able to substantiate the surety's willingness to issue bonds in the sum total of the preliminary budget amounts identified herein for the proposed bid package(s) being sought for pre-qualification approval. This section is not a minimum requirement for firms wishing to become prequalified for bid packages not requiring the ability to provide a Performance and Payment Bond, however all firms are encouraged to provide a surety letter regardless.]

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1. e. (2) Have any Funds been expended by a Surety Company on your firm's behalf? Yes No If yes, explain

[Matrix: If "Yes," with no explanation given, proposal is non-responsive and will not be considered for pre-qualification.]

Insurance

1. f. The minimum requirements of coverage are defined on the Sample Certificate of Insurance (COI) (See Appendix C for Sample COI). Firms must indicate that they can provide evidence of insurance coverage, should they be considered for approval by attaching a copy of their insurance certificate. Additionally, should your firm not currently carry the exact insurance requirements defined within the Sample Certificate of Insurance, applicant agrees to provide the specified insurance as a precedent to award of a contract. Have you attached a copy of your insurance certificate meeting the aforementioned specified requirements or agree to provide the specified insurance if not currently carried by your firm? Yes No

[Matrix: If "No," proposal is non-responsive and will not be considered for pre-qualification.]

Financials

1. g. (1) Part 1 – Financial Statements - Attach most recent fiscal year-end balance sheet and income statement, if available, based on company type. Audited statements preferred. If not available, attach a copy of the latest annual renewal submission to the relevant licensing board. In all cases, either a full year audited financial statement or an internal balance sheet with income statement or business tax return must be provided in order to be considered for pre-qualification approval.

Have you attached a balance sheet or other acceptable financial documents referenced above? Yes No

[Matrix: If "No," proposal is non-responsive and will not be considered for pre-qualification.]

1. g. (2) Part 2 – Financial Metrics – As a minimum requirement to become pre-qualified, the metrics illustrated below must be achieved in order to be approved for prequalification with one exception if the firm doesn't meet or exceed these designated metrics, a Performance and Payment Bond (see requirements under the Bond section above) can be substituted by the firm should the company become the successful low bidder for a particular bid package(s). This review and approval for this section will be based on the sum total of the preliminary budget amounts (greatest estimated contract amount if seeking approval for more than one bid package) identified herein for the proposed bid package(s) being sought for pre-qualification approval.

Have you achieved your metrics or provided evidence of bond-ability based on the anticipated contract value for the bid packages seeking approval?

Yes No

[Matrix: If "No," proposal is non-responsive and will not be considered for pre-qualification.]

Metrics:

Contract(s) Amounts: \$0 to \$200,000

Debt to Equity (Total Liabilities/Total Equity) is between 0 and 5.0

Current Ratio (Current Assets/Current Liabilities) is greater than 1.1

Net Current Assets (Current Assets less Current Liabilities) greater than \$1

Contract(s) Amounts: \$200,000 to \$500,000

Debt to Equity (Total Liabilities/Total Equity) is between 0 and 4.0

Current Ratio (Current Assets/Current Liabilities) is greater than 1.2

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Net Current Assets (Current Assets less Current Liabilities) greater than \$20,000

Contract(s) Amounts: \$500,000 and above

Debt to Equity (Total Liabilities/Total Equity) is between 0 and 3.0

Current Ratio (Current Assets/Current Liabilities) is greater than 1.3

Net Current Assets (Current Assets less Current Liabilities) greater than \$50,000

(Firm must submit financial data and may clearly indicate a request for confidentiality to avoid this item from becoming part of a public record. We understand this information can be extremely confidential and as an option, you may submit your financial statement as an attachment to your pre-qualification package or send under separate cover to a confidential email address _____ or facsimile directly to _____ at (###) ###-####.)

Check applicable item below as how financials are being submitted

- Attached
 Sent Via Email
 Sent Via Facsimile

SECTION 2. GENERAL REQUIREMENTS

Experience - Size/Capacity/Workload

2. a. (1) List the annual dollar value of construction work the company has performed for each year over the last (3) three calendar years (if applicable).

1 \$ _____ (yr)	2 \$ _____ (yr)	3 \$ _____ (yr)
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[Matrix: 0-6 points. For each year completed (positive value), give 2 points each.]

2. a. (2) How many projects do you currently have under contract or in progress and what is their total dollar value?

- _____ (# of projects);
- \$ _____ (Current projects sum of contract amounts);
- \$ _____ (Projects current amount remaining to bill)

[Matrix: 0-5 points. If section completed give 5 points. If not, give 0 points.]

2. a. (3) What was your largest job completed? _____ Sq. Ft. \$ _____ (Dollar Amount)
 _____ Location _____ Year Completed

[Matrix: 0-5 points.

Step One: Take the "dollar amount of largest job completed" and multiply by 1.5.

Step Two: If the result is larger than the sum total of estimated package(s) cost being prequalified for by 100% then give 5 points;

If the result is larger than the sum total of estimated package(s) cost being prequalified for by 80% and less than 100% then give 4 points;

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If the result is larger than the sum total of estimated package(s) cost being prequalified for by 60% and less than 80% then give 3 points;

If the result is larger than the sum total of estimated package(s) cost being prequalified for by 40% and less than 60% then give 2 points;

If the result is larger than the sum total of estimated package(s) cost being prequalified for by 20% and less than 40% then give 2 points;

If the result is larger than the sum total of estimated package(s) cost being prequalified for by 10% and less than 20% then give 1 point.

If the result is smaller than the sum total of estimated package(s) cost being prequalified for then give 0 points.]

Example No.1: Result of Largest Job Completed = $1,000,000 \times 1.5 = \$1,500,000$
Sum Estimated Total of Bid Package(s): $\$687,000$
 $\$1,500,000 / \$687,000 = 2.18$ or 118% greater = 5 points

Example No.2: Result of Largest Job Completed = $1,000,000 \times 1.5 = \$1,500,000$
Sum Estimated Total of Bid Package(s): $\$1,200,000$
 $\$1,500,000 / \$1,200,000 = 1.25$ or 25% greater = 2 points

2. a. (4) Current Backlog \$ _____ (Dollar Amount)
(Projects Current Amount Remaining to Bill – See 2.a.(2))

[Matrix: 0-5 points.

Step One: Take "current backlog (2.a.(4))" dollar amount and add "largest job completed (2.a.(3)) multiplied by 1.5".

(Example 1: Current Backlog = $\$3,500,000$; Largest Job Completed = $\$1,750,000$;
 $\$3,500,000 + \$1,750,000 = \$5,250,000 \times 1.5 = \$7,875,000$)

(Example 2: Current Backlog = $\$2,000,000$; Largest Job Completed = $\$1,000,000$;
 $\$2,000,000 + \$1,000,000 = \$3,000,000 \times 1.5 = \$4,500,000$)

Step Two: If the step one value above is less than the 3 year average of the sum of "annual dollar amounts" listed in (2.a.(1)) divided by 3 and then multiplied by 1.5, then proceed to the table below for applicable points. If the step one value above is greater than the 3 year average of the sum of "annual dollar amounts" listed in (2.a.(1)) divided by 3 and then multiplied by 1.5, then give 0 points

If "current backlog dollar amount plus largest job completed x 1.5" divided by the 3 year average of the sum of "annual dollar amounts" x 1.5 is greater than 0% and less than 20% then give 5 points

If "current backlog dollar amount plus largest job completed x 1.5" divided by the 3 year average of the sum of "annual dollar amounts" x 1.5 is between 20% and 40% then give 4 points

If "current backlog dollar amount plus largest job completed x 1.5" divided by the 3 year average of the sum of "annual dollar amounts" x 1.5 is between 40% and 60% then give 3 points

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Current Anticipated Completion Date	
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#2 –Project Name	(In addition to project information and at a minimum, list out entity who is providing your reference below)
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
#3 –Project Name	(In addition to project information and at a minimum, list out entity who is providing your reference below)
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	

[Matrix: 0-5 points for each project listed, total of 15 points. For each project above, give 5 points for a positive reference from either the owner, architect or GC/CMR. Positive reference can be in the form of a written reference accompanied with this application from the designated entity (owner, architect or GC/CMR) or through verification by CM following submission of application. CM will attempt to reach out to each reference above in written form and failure of the entity to respond back to the CM's written inquiry (either written or oral) within five (5) business days will result in forfeiture of points applicable to the given entity. If reference is obtained verbally, CM will document conversation for the record.]

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2. b. (1) Has your company ever failed to complete work awarded (under contract) to it? Yes No If yes, please provide project name(s), year(s), and reason why: _____

[Matrix: 0-5 points. If company has never failed to complete work it has been awarded then give 5 points; if the company has failed to complete one (1) project it has been awarded then give 2 points; if the company has failed to complete two (2) or more projects it has been awarded then give 0 points.]

2. b. (2) Have you ever paid liquidated damages on any project? Yes No If yes, state the project name(s), year(s), and reason why. _____

[Matrix: 0-3 points. If company has never paid liquidated damages on any of its projects then give 3 points; if the company has paid liquidated damages on only one project then give 2 points; if the company has paid liquidated damages on only two projects then give 1 point; if the company has paid liquidated damages on three or more projects then give 0 points.]

2. b. (3) Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging? Yes No If yes, state the project name(s), year(s), and reason why. _____

[Matrix: 0 -3 points. If "Yes," give 0 points. If "No," give 3 points.]

2. b. (4) Has your present company, its officers, owners, or agents ever been barred from bidding public work in North Carolina? Yes No If yes, state the project name(s), year(s), case number and reason why. _____

[Matrix: 0 - 3 points. If "Yes," give 0 points. If "No," give 3 points.]

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Safety Record

2. c. List your company's Experience Modification Rate (EMR) for past three years. (Attach OSHA 300 Log for the last 3 years.) Have you attached OSHA 300 log? Yes No

_____ Present Rate Last Rate _____ Year before rate

If these rates reflect corporate performance over a number of locations, please explain, to the extent possible, the performance experience of the location serving this project: _____

List any OSHA fines and Jobsite fatalities in the past 3 years with an explanation: _____

[Matrix: 0-5 points. If company has EMR rating less than or equal to 1 then give 5 points; if the company has EMR rating greater than 1 and less than 1.10 then give 3 points; if the company has EMR rating greater than 1.10 then give 0 points.]

Historically Underutilized Business (HUB) Plan

2. d. Does the company currently have a documented plan for engaging subcontractor participation from Historically Underutilized Businesses? Yes No If yes, please attach your company's HUB plan.

[Matrix: 0-3 points. If company has a current documented plan give 3 points. If not, give 0 points.]

2. e. What has been your company's typical percentage level of Historically Underutilized Business participation for similar projects in North Carolina for the past 5 years? _____%

List the HUB participation you provided in three "similar" projects cited in Section 3. e. as defined below, including name, percentage achieved and CM/GC/Owner representative's name and telephone number.

Project Name	HUB %	CM/GC/Owner's Rep	Contact Phone #

[Matrix: 0-3 points, 3 points total. If information provided for each project, give 1 point per project. If information is not provided per project, give 0 points per project. To get points, not all HUB % listed needs to be over 10%]

Litigation/Claims

2. f. (1) Has your company been involved in any judgments, claims, arbitration or mediation proceedings, or suits within the last five years, whether resolved or still pending resolution? Yes No If yes, state the project name(s), year(s), case number and reason why: _____

[Matrix: 0-4 points. If "Yes," with no explanation given then give 0 points; if "Yes" with an explanation given or "No" then give 5 points]

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2. f. (2) Are there currently any judgments, claims, arbitration or mediation proceedings or suits pending or outstanding against your company, its officers, owners, or agents? Yes No If yes, state the project name(s), year(s), case number and reason why: _____

[Matrix: 0-4 points. If “Yes,” with no explanation given then give 0 points; if “Yes” with an explanation given or “No” then give 5 points]

SECTION 3. PROJECT SPECIFICS

3.a. The assigned project superintendent for this project shall be: _____.
 Include a resume. Have you included a resume? Yes No

[Matrix: 0-2 points. If resume included, give 2 points. If not, give 0 points.]

3.b. The experience this superintendent has on this specific type of project is: ___ 0-2 ___ 3-4 ___ 5-10 ___ >10 years.

[Matrix: 0-5 points. If 0-2 years give 1 pt, 3-4 years give 2 pts, 5-10 years give 4 pts, >10 years give 5 pts.]

3.c. The assigned project manager for this project shall be _____.
 Include a resume. Have you included a resume? Yes No

[Matrix: 0-2 points. If resume included, give 2 points. If not, give 0 points.]

3.d. The experience this project manager has on this specific type of project is: ___ 0-2 ___ 3-4 ___ 5-10 ___ >10 years.

[Matrix: 0-5 points. If 0-2 years give 1 pt, 3-4 years give 2 pts, 5-10 years give 4 pts, >10 years give 5 pts.]

Similar Projects

3.e. List three (3) current or completed projects of similar type which most closely reflects the size and complexity of the type of work being requested for the currently proposed project within the last 5 years.

#1 –Similar - Project Name	(In addition to project information and at a minimum, list out entity who is providing your reference below)
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	

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Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
MWBE Percentage Achieved	
#2 –Similar - Project Name	(In addition to project information and at a minimum, list out entity who is providing your reference below)
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
MWBE Percentage Achieved	
#3 –Similar - Project Name	(In addition to project information and at a minimum, list out entity who is providing your reference below)
Description of Work Performed	
Contract Delivery Method (CM/GC)?	
Owner Name/ Representative	
Owner Address/Phone #/Email	
Architect Name/Representative	
Architect Address/Phone #/Email	
GC or CM Name/Representative	
GC or CM Address/Phone #/Email	
Contract Dollar Value	
Percentage Complete	
Current Anticipated Completion Date	
MWBE Percentage Achieved	

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[Matrix: 0-5 points for each project listed, total of 15 points. For each project above, give 5 points for a positive reference from either the owner, architect or GC/CMR. Positive reference can be in the form of a written reference accompanied with this application from designated entity (owner, architect or GC/CMR) or through verification by CM following submission of application. CM will attempt to reach out to each reference above in written form and failure of the entity to respond back to the CM's written inquiry (either written or oral) within five (5) business days will result in forfeiture of points applicable to the given entity. If reference is obtained verbally, CM will document conversation for the record.]

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SECTION 4. SIGNATURE (MINIMUM REQUIREMENT)

By signing this document, you are acknowledging that all answers are true to the best of your knowledge. Any answers found to be falsified will bar you from being prequalified on this project.

Company Name (as licensed in NC)

Physical Address

Mailing Address

a. Dated this day of: _____

Submitted by: _____
Signature By Authorized Officer

Print Title of Authorized Officer

Phone: _____
Contact person's phone number

E-mail: _____
Contact person's E-mail address

b. Notary Certification:
North Carolina
_____ County

I, a Notary Public of the County and State aforesaid, certify that _____, personally appeared before me this day and acknowledged the execution of the foregoing instrument. Witness my hand and official seal, this the _____ day of _____, 20__.

(Official Notary Seal or Stamp)

Signature of Notary Public

My commission expires _____, 20__

[Matrix: If signature section is NOT fully executed with notary, proposal is non-responsive and will not be considered for pre-qualification.]

Appendix (attachments)

- A. Sample Parent Guarantee Letter
- B. Sample Surety Letter
- C. Sample Certificate of Insurance (COI)