#### STATE OF NORTH CAROLINA Qualifications Questionnaire for Construction Manager at Risk

Due Date: Submitted to:	November 19, 2015, 2:00 p.m. Joyce Clay Facilities Management - Capital Projects University of North Carolina at Charlotte 9201 University City Boulevard Charlotte NC 28223-0001		
Project Title:	UNC Charlotte – Health & Wellness Center, Charlotte, NC		
Proposar's Name and Principal Office serving this project.			

## **Proposer's Name and Principal Office serving this project:**

(Include Company Name and address along with the name of the contact person with telephone number and e-mail address)

#### **Profile of Proposer:**

- A. Give corporate history of the company including organizational structure, years in business and evidence of authority to do business in North Carolina.
- B. Provide annual workload for each of the last five (5) years; number of projects and total dollar value.
- C. List projects for which the company is currently committed including name & location of each project, time frame to complete & dollar volume of each project.
- D. Financials Attach latest 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. Indicate Dunn & Bradstreet rating if one exists. (Firms must submit financial data and may clearly indicate a request for confidentiality to avoid this item becoming part of a public record.)
- E. Attach letter from Surety Company or its agent licensed to do business in North Carolina verifying proposer's capability of providing adequate performance and payment bonds for this project.
- F. List all construction projects performed by the proposer for agencies and institutions of the State of North Carolina during the past 10 years.
- G. Litigation/Claims. If yes to any of the questions below, list the project(s), dollar value, contact information for owner and designer and provide a full explanation with relevant documentation.
  - 1. Has your company ever failed to complete work awarded to it? Yes No
  - Has your company ever failed to substantially complete a project in a timely manner (i.e. more than 20% beyond the original contracted, scheduled completion date)? \_\_\_Yes \_\_\_No

- 3. Has your company filed any claims with the North Carolina State Construction Office within the last five years? <u>Yes</u> No
- 4. Has your company been involved in any suits or arbitration within the last five years? <u>Yes</u> No
- Are there currently any judgments, claims, arbitration proceedings or suits pending or outstanding against your company, its officers, owners, or agents? \_\_\_\_Yes \_\_\_No
- 6. Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging? <u>Yes</u> No
- 7. Has your present company, its officers, owners, or agents ever been barred from bidding public work in North Carolina? <u>Yes</u> No

# **Project Experience**

- A. List three projects of similar size, scope and complexity performed by the proposer.
- B. For each of the three projects, include specific details on the extent to which preconstruction & construction phase services were provided.
- C. For the three projects listed above where CM services were provided, list the Guaranteed Maximum Price (if given), or if not given, the estimated cost provided by you, and the total cost of the project at completion.
- D. For each of the three projects above where CM services were provided, compare the number of days in the original schedule with the number of days taken for actual completion.
- E. For each of the three projects listed above, attach project owner references including the name, address, telephone and fax numbers, and e-mail address of the project owner representative.

#### **Key Personnel**

- A. List of key personnel who will be assigned to the project. Attach sworn statement that the above persons will be exclusively assigned to this project for its duration.
- B. For each person listed above, list what aspects of pre-construction or construction the person will handle. For those persons who will divide their time between pre-construction and construction phases, indicate what percentage of their time will be devoted to each phase.
- C. For each person listed in response to A & B above, list his/her experience with firm, other prior and relevant experience with projects of similar size and scope in construction/design, and the person's title he or she held on each project listed under their name. Attach the resumes and references (Use Standard Form 330) for each person listed.

D. Attach project organizational chart indicating the placement of each of the persons listed in response to A & B above.

## **Project Planning**

- A. Provide a brief, overall description of how the project will be organized and managed, and how the services will be performed in both Pre-Construction and Construction Phases. Project planning that offers the same project manager for pre-construction and construction phases shall be given preference.
  - a. Value Engineering
  - b. Constructability Issues
  - c. Cost Model/Estimates
  - d. Project Tracking/Reporting
  - e. Request for Information (RFI) and Shop Drawings
  - f. Quality Control
  - g. Schedule and Staffing Plan
- B. Minority Participation: Describe the program (plan) that your company has developed to encourage participation by Minority and other HUB firms to meet or exceed the goals set by North Carolina General Statute 143-128.2. Attach a copy of that plan to this proposal. Provide documentation of the Minority and other HUB participation that you have achieved over the past two years on both public and private construction projects. Outline specific efforts that your company takes to notify Minority and other HUB firms of opportunities for participation. Indicate the minority participation goal that you expect to achieve on this project.

This the	day of	, 20
	•	**COMPANY NAME**
		By:
		Title:
Attest:		

(Corporate Seal)

### VERIFICATION

# I HEREBY CERTIFY THAT THE RESPONSES OF \_\_\_\_\_\_\_ ARE CORRECT AND TRUTHFUL TO THE BEST OF MY KNOWLEDGE AND FOR THOSE RESPONSES GIVEN WHICH ARE BASED ON INFORMATION AND BELIEF, THOSE RESPONSES ARE TRUE AND CORRECT BASED ON MY PRESENT BELIEF AND INFORMATION.

This the	day of	, 20		
		**COMPANY NAME**		
			By:	
	(Corporate Seal)		President	
		Atteste	1:	
			Secretary	
STATE OF _				
COUNTY OI	F			
I,		, a Notary Pu	blic in and for the County and State aforesaid,	
hereby certify	y that		personally came before me this day and	
acknowledged that he/she is secretary of			and that by authority duly given and as	

the act of the corporation, the foregoing instrument was signed in its name by its president, sealed with its corporate seal, and attested by him/herself as is secretary.

Witness my hand and official seal, this the \_\_day of \_\_\_\_\_, 20\_\_\_\_\_.

Official Signature of Notary

\_\_\_\_\_, Notary

Public Notary's Printed or Typed Name

My Commissio