PLEASE NOTE: The current price for City of Joliet prequalification is $175, which offsets the costs for independent auditor review of the documents. These documents are to be submitted to City Clerk’s Office, City of Joliet, 150 W. Jefferson St., Joliet, IL 60432 at least 6 days prior to the bid opening and must be accompanied by $175.

Please use the form below to submit information to be placed on the City of Joliet’s Prequalification list.

**CITY OF JOLIET PREQUALIFICATION**

The Undersigned certifies under oath that information provided herein is true and sufficiently complete so as not to be misleading.

NAME OF COMPANY:

ADDRESS:

CITY, STATE, ZIP:

SUBMITTED BY:

PRINT NAME:

PRINT TITLE:

E-MAIL ADDRESS:

WEB ADDRESS:

PHONE:

FAX:

TYPE OF BUSINESS:

- Corporation
- Partnership
- Individual
Joint Venture

Other ____________________________ (please list)

How many years has your organization been in business under its current name? ________________________________

If your organization is a corporation, please answer the following:
1. Date of Incorporation ________________________
2. State of Incorporation __________________________
3. President’s Name _____________________________
4. Vice-President’s Name __________________________
5. Secretary’s Name ______________________________
6. Treasurer’s Name ______________________________
7. Name and address of registered agent:
   ________________________________
   ________________________________

If your organization is a partnership, please answer the following:
1. Date of organization _________________________
2. Type of partnership (if applicable) __________________
3. Name(s) of general partner(s) __________________

If you organization is individually owned, please answer the following:
1. Date of organization _____________________________
2. Name of owner __________________________________

If the form of your organization is other than those listed above, describe it and list the name of the principals __________________

List jurisdictions and trade categories in which your organization is legally qualified to do business, and indicate registration or license numbers, if applicable:
_______________________________
_______________________________
_______________________________
List jurisdiction in which your organization’s partnership or trade name is filed. ______________________________________

List the categories of work that your organization normally performs with its own forces ____________________________________________
____________________________________________________

Claims and Suits (If the answer to any of the questions below is yes, please attach details).

1. Has your organization ever failed to complete any work awarded to it? _______________

2. Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers? _______________

3. Has your organization filed any law suits or requested arbitration with regard to construction contracts within the last five years? _______________

Within the last five years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? (If the answer is yes, please attach details) _______

On a separate sheet, list major construction projects your organization has in progress, giving the name of project, owner, architect, contract amount, percent complete and scheduled completion date.

State total worth of work in progress under contract: $ __________________________________________

On a separate sheet, list the major projects your organization has completed in the past five years, giving the name of project, owner, architect, contract amount, date of completion, and percentage of the cost of the work performed with your own forces.

State average annual amount of construction work performed during the past five years $____________________________
On a separate sheet, list the construction experience and present commitments of the key individuals in your organization.

What apprenticeship or training program does your company provide that are registered with the United States Department of Labor’s Bureau of Apprenticeship and Training

References (please attached a sheet with 3 references and your bank reference(s)).

Surety:

1. Name of bonding company
2. Name, address, phone and fax for agent

Financial Statement

Attach a financial statement, including your organization’s latest balance sheet and income statement showing the following items: Current Assets (e.g., cash joint venture accounts, accounts receivable, notes receivable, accrued income, deposits, materials inventory, and prepaid expenses).

Net Fixed Assets:

Other Assets:

Current Liabilities:

Name of Organization: ____________________________
Signature: ______________________________________
Printed Name: __________________________________
Title: _________________________________________
Phone: _________________________________________
Email: _________________________________________