

# Madera Unified School District



**Special Prequalification Application For  
RFP No.020521  
Madera USD Install and Operate Turn-Key Private LTE Network**

# **VENDOR QUALIFICATION QUESTIONNAIRE**

**RFP No.020521**

**Madera USD Install and Operate Turn-Key Private LTE Network**

The Prequalification Packages will be received no later than May 5, 2021 @ 10:00 a.m. at the Madera Unified School District's Purchasing Department, located at 1205 South Madera Avenue, Madera CA (Located on the 2<sup>nd</sup> flr.) Prequalification applications need to be submitted in a sealed envelope marked 'Special Prequalification Application for RFP No.020521-Madera USD Install and Operate Turn-Key Private LTE Network: Attention: Susan Harautuneian (Include 4 copies.)

Vendors who do not submit this pre-proposal qualification Questionnaire and are determined by District to be qualified will be considered non-responsive. A list of approved Vendors will be published by addendum and posted to the District Website

**This prequalification shall be completed and submitted for approval by all Vendors intended to submit a proposal in response to RFP No.020521 Madera USD Install and Operate Turn Key Private LTE Network**

This prequalification packet includes a questionnaire and financial statement, to be verified under oath. The District will use the information and documentation required by the packet to prequalify general contractors and mechanical, electrical and plumbing subcontractors in accordance with applicable law.

## ***Questionnaire***

All questions in the questionnaire must be answered. If a question is not applicable, then indicate a response of "N/A". "You" or "Yours" as used herein refers to the prospective bidders' firm and any of its owners, officers, principals and qualifying individuals. If two or more business entities submit a bid on a project as a Joint Venture, or expect to submit a bid as part of a Joint Venture, each entity within the Joint Venture must be separately qualified to bid.

Each questionnaire must be signed under penalty of perjury in the manner designated at the end of the form, by an individual who has the legal authority to bind the contractor on whose behalf that person is signing. If any information provided by a contractor becomes inaccurate, the contractor must immediately notify the District and provide updated accurate information in writing, under penalty of perjury. Each prospective bidder shall have a duly authorized owner, officer or principal complete the questionnaire and verify the truth of the information provided therein and in the financial statement.

The questionnaire answers and financial statements included in the prequalification packages submitted by contractors are not public records and are not open to public inspection. All such information provided will be kept confidential to the extent permitted by law, although the contents may be disclosed to third parties for the purpose of verification, investigation of substantial allegations, and in the process of any subsequent proceedings. State law requires that the names of contractors applying for prequalification status shall be public records subject to disclosure, and the first page of the questionnaire will be used for that purpose.

### ***Evaluation By the District***

The District will evaluate the information provided and issue each submitting contractor a rating of "Prequalified" or "Not Prequalified". The District's decision will be based on the information provided, references, and such additional outside information as the District in its discretion deems reasonable and necessary to obtain. The District may, but is not obligated to, investigate the truth of any statements or information provided by a prospective bidder in response hereto.

### ***Appeal***

A contractor who has timely submitted a completed application form, and who receives a rating of "Not Prequalified" from the District may appeal that determination. There is no appeal from a finding that a contractor is not prequalified because of a late application or a failure to submit required information. A contractor may appeal the District's decision with respect to its request for prequalification, by giving notice to the District no later than five (5) business days after receipt of notice of its qualification status. Notice shall be sent to the address listed above. Unless a contractor files a timely appeal, the contractor waives any and all rights to challenge the qualification decision of the District, whether by administrative process, judicial process or any other legal process or proceeding. The District reserves the right to resolve appeals before or after bid opening or award of any contract. The date for submission and opening of bids for a specific project and any subsequent contract award will not be delayed or postponed to allow for completion of an appeal process.

### ***RFP's***

RFP's will not be accepted from any contractor that did not timely submit a completed prequalification questionnaire and supporting documents, including financial statements, to the District. Omission of requested information, falsification of information, or failing to use the forms provided by the District may result in a finding of "not prequalified".

# **PREQUALIFICATION APPLICATION**

## **A. General Information.**

Contractor's name as it appears on license: \_\_\_\_\_

CIRCLE ONE:      Corporation              Partnership              Sole Proprietorship

Contact Person: \_\_\_\_\_

Street Address (P.O. Box is not acceptable):

\_\_\_\_\_

Telephone: (    ) \_\_\_\_\_ Fax: (    ) \_\_\_\_\_

E-mail address: \_\_\_\_\_

List all California construction license numbers, classifications and expiration dates of the California contractor licenses held by your firm:

\_\_\_\_\_

## History

Years in Industry performing Broadband Communication or RF work/service:

**(must be 5 years in industry performing broadband or RF work/service to be eligible for qualification)**

Years in Business under Present Business Name: \_\_\_\_\_

Years in Business under Former Business Name: \_\_\_\_\_ List:  
\_\_\_\_\_

Contact names and phone numbers of those in your firm for inquiries. (Please list direct dial, mobile, and fax numbers.)

Name

Office #

Mobile #

Fax #

Project Executive:

\_\_\_\_\_

Project Manager:

\_\_\_\_\_

Project Superintendent:

\_\_\_\_\_

Total number of staff employed by firm: Office: \_\_\_\_\_ Field: \_\_\_\_\_

List three (3) supplier references for work completed in the last two (2) years:

Firm/Products Supplied

Contact Person

Telephone Number

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## LICENSING

1. Does your firm hold either a (C-7 and/or C-10) license classification within the state of California? ☐ Yes ☐ No

Does your firm worked in the past 2 years with a Contractor to perform broadband equipment installation? ☐ Yes ☐ No

- a. List all license(s) held by Vendor (active), class, license number(s), certifications and length of time licenses have been held. If you do not hold a California Contractor's license, list 2 contractors you have worked with in the past 2 years.

<u>Firm Name Holding License</u>	<u>Classification(s)</u>	<u>License Number</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

## FINANCIAL INFORMATION

3. Vendor's annual revenue derived from performing Broadband Communication or RF work/service. **State year, annual amount of work/service performed during the past five (5) years per year.**

Annual Revenue Year 2019

\_\_\_\_\_

Annual Revenue Year 2018

\_\_\_\_\_

Annual Revenue Year 2017

\_\_\_\_\_

Annual Revenue Year 2016

\_\_\_\_\_

Annual Revenue Year 2015

\_\_\_\_\_

4. Bank Reference:

Name/Address

Contact Person

Telephone #

\_\_\_\_\_

5. How long has your firm used this bank as its primary bank? \_\_\_\_\_ Years

6. What is your current line of credit? \_\_\_\_\_ How much is currently outstanding? \_\_\_\_\_

## INSURANCE

7. General Liability and Workers Compensation/Employer Liability Insurance:

Name

Address

Telephone #

Carrier: \_\_\_\_\_

Agent: \_\_\_\_\_

## ***Bonding***

Name of bonding company/surety: \_\_\_\_\_

Name of surety agent, address and telephone number:

\_\_\_\_\_  
**Please attach a notarized statement from an admitted surety insurer (approved by the California Department of Insurance and authorized to issue bonds in the State of California) which states your current bonding capacity meets the district requirement for this project**

List all other sureties (name and full address) that have written bonds for your firm during the last five years, including the dates during which each wrote the bonds:

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

# Essential Requirements for Prequalification

**Applicant will be immediately disqualified if the answer to any of questions 1-4 is “NO”**

1. Do you possess a valid and current California contractor's license?  
☐Yes ☐No
2. Does your firm have a liability insurance policy with a policy limit of at least \$1,000,000 per occurrence and \$2,000,000 aggregate?  
☐Yes ☐No
3. Do you have current workers' compensation insurance policy as required by the Labor Code or are you legally self-insured pursuant to Labor Code section 3700 et seq.?  
☐Yes ☐No  
☐ Contractor is exempt from this requirement, because it has no employees.
4. Pursuant to SB418, can your firm comply with the project skilled and trained workforce requirements?  
☐Yes ☐No  
If yes, please confirm approved apprenticeship program for your labor classification(s) to be used to comply with this requirement  

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**Applicant will be immediately disqualified if the answer to any of question 5-11 is “YES”**

5. At the time of submitting this prequalification form, is your firm ineligible to bid on or be awarded a public works contract, or perform as a subcontractor on a public works contract, pursuant to either Labor Code section 1777.1 or Labor Code section 1777.7?  
☐Yes ☐No  
If yes, state the beginning and ending dates of the period of debarment:  

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6. Has your contractor's license been revoked or suspended at any time in the last five years, even if later reinstated retroactively?  
☐Yes ☐No



7. At any time during the last five years, has your firm or any of its owners or officers been convicted of a crime involving the awarding of a contract of a government construction project, or the bidding or performance of a government contract?

☐Yes ☐No

8. Is your firm currently, or within the last five (5) years, the debtor in a bankruptcy or receivership case?

☐Yes ☐No

- 9.. Has a surety firm completed a contract on your behalf, or paid for completion because your firm was default terminated by the project owner within the last five (5) years?

☐Yes ☐No

10. Has your firm or any of its owners, officers, or partners ever been found liable in a civil suit, or found guilty in a criminal action, for making any false claim or material misrepresentation to any public agency or entity?

☐Yes ☐No

If yes, explain on a separate signed page, including identifying who was involved, the name of the public agency, the date of the investigation and the grounds for the finding

11. Has your firm or any of its owners, officers or partners ever been convicted of crime involving any federal, state, or local law related to construction?

☐Yes ☐No

If yes, identify on a separate signed page the person or persons convicted, the court (the county if a state court, the district or location of the federal court), the year and the criminal conduct.

***[The remainder of this page is intentionally left blank]***

## Part III: Scored Questions

### A. Licensing

1. Has any CSLB license held by your firm or its Responsible Managing Employee (RME) or Responsible Managing Officer (RMO) been suspended within the last five years?

☐ Yes ☐ No (No=5 pts, Yes= -5 pts)

### B. Disputes

2. At any time in the last five years, have liquidated damages been assessed or levied against your firm under a construction contract with either a public or private owner?

☐ Yes ☐ No (No=5pts, Yes= (1-2 instances =3 pts, >2 instances=0 pts.)

If yes, explain on a separate signed page, identifying all such projects by owner, owner's address, the date of completion of the project, amount of liquidated damages assessed or levied by the owner, amount of liquidated damages paid or credited by you to the owner, and all other information necessary to fully explain the assessment or levy of liquidated damages.

3. In the last five years has your firm, or any firm with which any of your company's owners, officers or partners was associated, been debarred, disqualified, removed or otherwise prevented from bidding on, or completing, any government agency or public works project for any reason?

**NOTE: "Associated" refers to another construction firm in which an owner, partner or officer of your firm held a similar position, and which is listed in response to question 4 of Part I on this form.**

☐ Yes ☐ No (No=5 pts, Yes= -5 pts)

If yes, explain on a separate signed page. State whether the firm involved was the firm applying for prequalification here or another firm. Identify by name of the company, the name of the person within your firm who was associated with that company, the year of the event, the owner of the project, the project and the basis for the action.

4. In the last five years, has your firm been denied an award of a public works contract based on a finding by a public agency that your company was not a responsible bidder?

☐ Yes ☐ No (No=5pts, Yes=(1-2 instances =3 pts, >2 instances=0 pts.)

If yes, explain on a separate page. Identify the year of the event, the owner, the project and the basis for the finding by the public agency.

**NOTE: The following two questions refer only to disputes between your firm and the owner of a project. You need not include information about disputes between your firm and a supplier, another contractor, or subcontractor. You need not include information about “pass-through” disputes in which the actual dispute is between a sub-contractor and a project owner. Also, you may omit reference to all disputes about amounts of less than \$50,000.**

5. In the past five years, has any claim by a project owner (including a complaint) against your firm concerning your firm’s work on a construction project, been filed in court or been the subject of arbitration?

☐ Yes    ☐ No (No=5pts, Yes= (1-2 instances =3 pts, >2 instances=0 pts.)

If yes, on separate signed sheets of paper identify the claim(s) by providing the project name, date of the claim, name of the claimant, a brief description of the nature and amount of the claim (including a breakdown of the major elements of the claim), the court in which the case was filed, and a brief description of the status of the claim (pending or, if resolved, a brief description of the resolution).

6. In the past five years, has your firm filed any claim (including a complaint) in court or arbitration against a project owner concerning work on a project or payment for a contract?

☐ Yes    ☐ No (No=5pts, Yes= (1 instance =2 pts, >1 instances= -2 pts.)

If yes, on separate signed sheets of paper identify the claim by providing the project name, date of the claim, name of the entity (or entities) against whom the claim was filed, a brief description of the nature and amount of the claim (including a breakdown of the major elements of the claim), the court in which the case was filed and a brief description of the status of the claim (pending, or if resolved, a brief description of the resolution).

### **C. Insurance and Bonding**

7. During the last five years, has your firm ever been denied bond coverage by a surety company, or has there ever been a period of time when your firm had no surety bond in place during a public construction project when one was required?

☐ Yes    ☐ No (No=5 pts, Yes= -5 pts)

If yes, provide details on a separate signed sheet indicating the date when your firm was denied coverage and the name of the company or companies which denied coverage; and the period during which you had no surety bond in place.

8. The District requires an A rating or higher on General Liability Insurance Coverage. Evidence of A or higher rating must be furnished at time of Contractor Prequalification packet submittal. Rating Report information is to be obtained from A.M. Best Company – <http://www.ambest.com>. Can your organization furnish evidence that it currently meets this requirement?

☐ Yes ☐ No (No=5 pts, Yes=-5 pts)

**D. Compliance with Law**

9. Has CAL OSHA cited and assessed penalties against your firm for any “serious,” “willful” or “repeat” violations of its safety or health regulations in the past five years?

**Note: If you have filed an appeal of a citation and the Occupational Safety and Health Appeals Board has not yet ruled on your appeal, you need not include information about it.**

☐ Yes ☐ No (No=5 pts, Yes= (1 instance=2 pts, 2 instances = 0 pts. 3+ instances = -2pts)

If yes, attach a separate signed page describing each citation.

10. Has the federal Occupational Safety and Health Administration cited and assessed penalties against your firm in the past five years?

**Note: If you have filed an appeal of a citation and the appropriate appeals Board has not yet ruled on your appeal, you need not include information about it.**

☐ Yes ☐ No (No=5 pts, Yes= (1 instance=2 pts, 2 instances = 0 pts. 3+ instances = -2pts)

If yes, attach a separate signed page describing each citation.

11. Has the EPA or any Air Quality Management District or any Regional Water Quality Control Board cited and assessed penalties against either your firm or the owner of a project on which your firm was the contractor, in the past five years?

**NOTE: If you have filed an appeal of a citation and the Appeals Board has not yet ruled on your appeal, or if there is a court appeal pending, you need not include information about the citation.**

☐ Yes ☐ No (No=5 pts, Yes= (1 instance=2 pts, 2 instances = 0 pts. 3+ instances = -2pts)

If yes, attach a separate signed page describing each citation.

Does your firm require weekly safety checks?

☐ Yes ☐ No (No=5 pts, Yes= 2pts)

12. List your firm's Experience Modification Rate (EMR) (California workers' compensation insurance) for each of the past three premium years:

**NOTE: An Experience Modification Rate is issued to your firm annually by your workers' compensation insurance carrier.**

Current year: \_\_\_\_\_

Previous year: \_\_\_\_\_

Year prior to previous year: \_\_\_\_\_

**(EMR .95 or less = 5 pts; .95-1 = 3 pts, Other =0)**

If your EMR for any of these three years is or was 1.00 or higher, you may, if you wish, attach a letter of explanation.

Within the last five years, has there ever been a period when your firm had employees but was without workers' compensation insurance or state-approved self-insurance?

☐ Yes    ☐ No (Yes=5 pts, No=-5pts)

**E. Prevailing Wage and Apprenticeship Compliance Record**

13. Has there been any occasion during the last five years on which your firm was required to pay either back wages or penalties for your own firm's failure to comply with the **state's** prevailing wage laws?

☐ Yes    ☐ No (No= 5 pts, Yes = (1 instance =4 pts, 2 instances =3 pts, 3+ instances =0))

**NOTE: This question refers only to your own firm's violation of prevailing wage laws, not to violations of the prevailing wage laws by a subcontractor.**

If yes, attach a separate signed page or pages, describing the nature of each violation, identifying the name of the project, the date of its completion, the public agency for which it was constructed; the number of employees who were initially underpaid and the amount of back wages and penalties that you were required to pay.

14. At any time during the last five years, has your firm been found to have violated any provision of California apprenticeship laws or regulations, or the laws pertaining to use of apprentices on public works?

☐ Yes    ☐ No (No= 5 pts, Yes = (1 instance =4 pts, 2 instances =3 pts, 3+ instances =0))

If "yes," provide the date(s) of such findings, and attach copies of the Department's final decision(s).

If yes, attach a separate signed page or pages describing the nature of the violation, identifying the name of the project, the date of its completion, and the public agency for which it was constructed.

15. Pursuant to SB854 is your firm registered with the Department of Industrial Relations?

☐ Yes    ☐ No (Yes= 5pts, No= -5pts)

Is your firm willing to provide information electronically to the Department of Industrial Relations?

☐ Yes    ☐ No (Yes= 5pts, No= -5pts)

Provide DIR Registration Number\_\_\_\_\_

DIR Number Expiration Date\_\_\_\_\_

## WORK EXPERIENCE AND TECHNICAL ABILITY

16. Description and reference of 5 most recently completed Broadband Communication or RF work/service similar to and/or related to the Scope of Work proposed in the RFP in the past ten (10) years. Provide in the description, contract amount and brief scope of work of the project. **Vendor must have completed three (3) broadband deployment projects with at least 1 of these being an RF project to eligible for qualification.**

### **Project 1:**

Project Name/Address: \_\_\_\_\_

Description of Project: \_\_\_\_\_

Client: \_\_\_\_\_

Client Contact/Phone: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

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

Contract Amount: \_\_\_\_\_

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

### **Project 2:**

Project Name/Address: \_\_\_\_\_

Description of Project: \_\_\_\_\_

Client: \_\_\_\_\_

Client Contact/Phone: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

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

Contract Amount: \_\_\_\_\_

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

**Project 3:**

Project Name/Address: \_\_\_\_\_

Description of Project: \_\_\_\_\_

Client: \_\_\_\_\_

Client Contact/Phone: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contract Amount: \_\_\_\_\_

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

**Project 4:**

Project Name/Address: \_\_\_\_\_

Description of Project: \_\_\_\_\_

Client: \_\_\_\_\_

Client Contact/Phone: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contract Amount: \_\_\_\_\_

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



**Project 5:**

Project Name/Address: \_\_\_\_\_

Description of Project: \_\_\_\_\_

Client: \_\_\_\_\_

Client Contact/Phone: \_\_\_\_\_

Scope of Work: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Contract Amount: \_\_\_\_\_

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

15. Why is your firm best suited for the project described in the RFP?  
(may respond on separate page)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. Describe ongoing operations and maintenance service performed on your own  
networks or client network (may respond on separate page)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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17. Describe your local presence and/or local staffing related to Firm's ability to complete project. Planned completion date six (6) months from Board Award (may respond on separate page)

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18. Attach sample Design and Performance Specification of a completed project within the last 5 years (similar to project described in RFP).

Sample attached?

☐ Yes ☐ No

19. Attach sample installation, Operations and Maintenance Agreement acceptable to Vendor to execute for project described in RFP.

Sample attached?

☐ Yes ☐ No

## PART IV: CERTIFICATION

Questionnaires submitted by corporations must be signed with the legal name of the corporation, followed by the name of the state of incorporation and by the signature and designation of the chairman of the board, president or any vice president, and then followed by a second signature by the secretary, assistant secretary, the chief financial officer or assistant treasurer. All persons signing must be authorized to bind the corporation in the matter. The name of each person signing shall also be typed or printed below the signature. Satisfactory evidence of the authority of each officer signing on behalf of a corporation shall be furnished.

Questionnaires submitted by partnerships must furnish the full name of all partners and must be signed in the partnership name by a general partner with authority to bind the partnership in such matters, followed by the signature and designation of the person signing. The name of the person signing shall also be typed or printed below the signature.

**Each person signing below makes the following representations under penalty of perjury:**

The submitter of the foregoing answers to the questionnaire has read the same and the matters stated therein are true of his or her own personal knowledge. This information is provided for the purpose of qualifying to bid on the Project, and any individual, company or other agency named herein is hereby authorized to supply the District with any information necessary to verify the prospective bidder's statements. By signing below, the submitter and the named contractor hereby grant permission to the District to contact any or all of the above listed persons or entities to confirm facts or otherwise investigate the above facts and issues.

The submitter understands that any statement which is proven to be false shall be grounds for immediate disqualification from bidding on the Project. The submitter whose signature appears below represents and warrants that he or she has authority to bind the named contractor.

I, the undersigned, certify and declare that I have read all the foregoing answers to this prequalification questionnaire and know their contents. The matters stated in the questionnaire answers are true of my own knowledge and belief, except as to those matters stated on information and belief, and as to those matters I believe them to be true. I declare under penalty of perjury under the laws of the State of California, that the foregoing is correct.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_.

\_\_\_\_\_  
Signature celebratory

\_\_\_\_\_  
Typed Name

\_\_\_\_\_  
Contractor