| City of Philadelphia |
|---|
| QUESTIONNAIRE AND FINANCIAL STATEMENT FOR QUALIFYING BIDDERS |

- * No bid will be accepted unless this questionnaire with all questions fully answered (please type or print in ink), is filed with the Department having jurisdiction over the work proposed, on or before the date specified by the Procurement Department.
- * All information provided by a bidder in this questionnaire shall be used by the City in determining and assessing a bidders qualifications and responsibility in accordance with the provisions of Title 17, Chapter 17-100, Sec. 17-101 of the Philadelphia Code.
- * The City reserves the right to investigate any statement made herein, by means of information included in, but not limited to, that contained in this questionnaire. Any misrepresentation of fact, as determined by the City, may result in the disqualification of a bidder.
- * Any material change in the financial, corporate or business status of a qualifying bidder that occurs between the time of submission of this questionnaire and the time of award of the resulting contract must be forwarded to the Procurement Commissioner immediately. Failure to do so may result in the disqualification of the bidder from award.
- * All information on this questionnaire will be held strictly confidential, to the extent permitted by law.

PROJECTS UNDER THE JURISDICTION OF

Fax Number

| PROJECTS APPLIED FOR | | | | | | | |
|--|------------|---------|---------------------------|---|----------------------------------|-------------|---------------|
| City of Philadelphia, Haddington Community Center, 5502 Haverford Avenue, Philadelphia, PA 19139 | | | | | | | |
| DATE SUBMITTED | BID NUMBER | | DATE OF OPENING | FEDERAL EIN NUMBER CITY BUSINESS TAX IDENTIFICATION # | | | NTIFICATION # |
| SUBMITTED BY | (PLEAS | SE CIRC | CLE) INDIVIDUAL | CORPORATION | | PARTNERSHIP | |
| PRINCIPAL OFFICE ADDRESS | | | | | | | |
| PRINCIPAL OFFICE TELEPHONE NUMBER PRIN | | | PRINCIPAL OFFICE FAX NUMB | MBER E-MAIL ADDRESS | | | |
| | CORPORATIO | ЛС | | PARTNERSHIP | | | |
| DATE OF INCORPORATION | STATE | CAPIT | TALIZATION | DATE OF ORGANIZATION | IGANIZATION TYPE GENERAL LIMITED | | |
| | OFFICERS | | | PARTNERS | | | |
| PRESIDENT | | | | NAME | | | |
| | | | | ADDRESS | | | |
| VICE PRESIDENT | | | | NAME | | | |
| | | | | ADDRESS | | | |
| SECRETARY | | | NAME | | | | |
| | | | | ADDRESS | | | |
| TREASURE | | | NAME | | | | |
| | | | | ADDRESS | | | |
| | | | | NAME | | | |
| | | | | ADDRESS | | | |

| EXPERIENCE AND EQUIPMENT | | | | | |
|---|----------------------------|--|--|--|--|
| How many years has your organization been in business as a contractor under its present business name? On a separate sheet of paper, list all other business names under which your organization has been in business as a construct | YEARS ction contractor? | | | | |
| 2. How many years experience has your organization had as a prime contractor in the type of construction work for which you se qualification? | eek YEARS | | | | |
| 3. How many years experience has your organization had as a subcontractor in the type of construction work for which you seel qualification? | k YEARS | | | | |
| 4. State the largest dollar amount of work your organization has done in any single year during the last five years as (1) a general contractor \$ (2) a subcontractor \$ | | | | | |
| 5. On a separate sheet of paper, describe the construction experience of the principal officers and managers (including superint organization. Include: name of the individual and position/office, years of construction experience, type of work in which the in has experience (including size of project worked on), names of organizations worked for and positions/responsibilities held. | | | | | |
| 6. Has your organization within the last five years performed work for the City of Philadelphia that was not finally accepted by the PLEASE CIRCLE | e City? YES NO | | | | |
| If "YES", state the City contract number and project name and attach an explanation of the circumstances surrounding the no Has any officer, partner, or other person active in the management of your organization, within the last five years, been an off manager, or sole proprietor of another organization which performed work for the City that was not finally accepted by the City PLEASE CIRCLE | ficer, partner, | | | | |
| If "YES", state the name of the individual, the name and address of the organization, the City contract number and project nar contract under which work was not finally accepted, and attach a detailed explanation of the circumstances surrounding the n | | | | | |
| 7. Has the City, within the last five years, declared your organization in default of a City contract or otherwise terminated the con PLEASE CIRCLE | ntract? YES NO | | | | |
| If "YES", state the City contract number and project name and attach an explanation of the circumstances surrounding the de of default or termination. | claration | | | | |
| Has a commercial surety for your organization, within the last five years, been called upon to complete any work on a contrac PLEASE CIRCLE | t with the City? YES NO | | | | |
| If "YES", state the City contract number and project name and a detailed explanation of the circumstances. Has any officer, partner, or other person active in the management of your organization, within the last five years, been an off | icer partner | | | | |
| manager, or sole proprietor of another organization whose commercial surety was called upon to complete any work on a con City? | | | | | |
| PLEASE CIRCLE | YES NO | | | | |
| If "YES", state the name of the individual, the name and address of the organization, the City contract number and project nar | ne for the | | | | |
| contract the surety was called upon to complete, and attach an explanation of the circumstances. 8. Has any officer, partner, or other person active in the management of your organization, within the last five years, been an off | icer partner | | | | |
| manager, or sole proprietor of another organization that was declared in default of a City contract or otherwise terminated, or complete a City Contract? | | | | | |
| PLEASE CIRCLE | YES NO | | | | |
| If "YES", state the name of the individual, the name and address of the organization, the City contract number and project nar contract defaulted or terminated, and attach an explanation of the circumstances surrounding the declaration of default or terr | | | | | |
| 9. Has your organization ever failed to complete any work under, or been declared in default of, a contract awarded to it by a pul owner other than the City of Philadelphia? | blic or private | | | | |
| PLEASE CIRCLE | YES NO | | | | |
| If "YES", attach a detailed explanation identifying the owner and bid/contract numbers (if applicable) for the project, stating wh owner declared your organization in default of its contract, and describing the project, the type of work, the dates the work wa stopped and the reasons the work was not completed. | | | | | |
| 10. Has any officer, partner, or other person active in the management of your organization, ever been an officer, partner, manag | er, or sole | | | | |
| proprietor of another organization that failed to complete or was declared in default of a construction contract for a public or protect of the city of Philadelphia? PLEASE CIRCLE | rivate owner YES NO | | | | |
| | | | | | |
| If "YES", state the name of the individual and attach an detailed explanation identifying the owner and bid/contract number (if stating whether the owner declared the organization in default of its contract, and describing the project, the type of work, the | •• • | | | | |
| was started and stopped, the individual's role in the project, and the reasons the work was not completed. | | | | | |
| 11. Has any officer, partner, or other person active in the management of your organization, within the last five years been disqua | alified, | | | | |
| suspended, or debarred (under its present name or any other name) from bidding on public contracts, or removed from a bido state or federal agency, or by the City of Philadelphia? | | | | | |
| PLEASE CIRCLE | YES NO | | | | |
| If "YES", state the agency that took such action, the date(s) of the action, the type of work to which the contract(s) applied, an stated by the agency for the action. | d the reasons | | | | |

| 12. Has any commercial surety ever refused to furnish a performance or payment bond for your organization? | | | | | | | |
|---|---|---|--|-------------|-------------|--|--|
| , , | ···· , · · · · · | | PLEASE CIRCLE | YES | NO | | |
| If "YES", state the na | If "YES", state the name and address of the surety, describe the contract for which the bond was refused (including the owner, date | | | | | | |
| | | the reasons for the refusal. | ···· (································ | , | | | |
| | | rtner, or other person active in the management of your organ | ization or any shareh | older hold | ina | | |
| an equity interest of | | | | | | | |
| | • | pleaded guilty or nolo contendre to federal or state misdemea | nor or federal charger | (including | but not | | |
| | | to public bidding law or the making of false statements)? | PLEASE CIRCLE | YES | NO | | |
| | - | ge under any fidelity bond? | PLEASE CIRCLE | YES | NO | | |
| 2. 6761 56 | | | | 120 | No | | |
| | | ner, or other person active in the management of your organize | ation, or any sharehol | der holding | g an | | |
| equity interest of mo | • | - | | | | | |
| | - | on federal or state misdemeanor or felony charges? | PLEASE CIRCLE | YES | NO | | |
| | | tate or federal grand jury investigation or under notification by | | | | | |
| enforce | ement authorities th | at they are the subject of any criminal investigation? | PLEASE CIRCLE | YES | NO | | |
| | | | | | | | |
| If your answer to any | | uestions is YES, attach a detailed description that includes the | - | | | | |
| | the name | ature of the conviction, plea, indictment, bond refusal, and/or g | grand jury or criminal i | nvestigatio | on; | | |
| | the na | ame of each individual who was the subject of such action; | | | | | |
| | their | position in your organization; | | | | | |
| | the ju | risdiction or entity taking the action; the date(s) the action was | s taken; the nature of t | he charge | s that were | | |
| | | ubject of the action; and all other circumstances relevant to the | | Ū | | | |
| 14. Has any officer, part | ner, director, share | holder, or other person active in the management of your orga | anization been employ | ed by the | City | | |
| | | political or other office of the City? | PLEASE CIRCLE | YES | NO | | |
| | | : h: the name of the individual; position held with the City; the da | ates the employment of | or | | | |
| appointment began | - | | | | | | |
| | | all organizations that are affiliates or subsidiaries of your org | anization and state th | heir | | | |
| | 15. Identify, by name and business address, all organizations that are affiliates or subsidiaries of your organization, and state their relationship to your organization. Attach separate sheets of paper as needed. | | | | | | |
| | | s, any other organization and any individual (other than officers | s nartners and mana | aers of voi | ır | | |
| | | idding by your organization. | | gers or you | | | |
| | | s, by name and business address, that hold a financial interest | t in your organization | of ten nerc | ent | | |
| - | o una organizationa | | | | on | | |
| | or more. | | | | | | |
| 18. Is your organization or any of its parent or subsidiary organizations currently indebted to the City of Philadelphia for any delinquent City taxes, taxes collected by the City on behalf of the School District of Philadelphia, liens, judgments, fees or other debts? | | | | | | | |
| Oity taxes, taxes con | lected by the only o | | PLEASE CIRCLE | YES | NO | | |
| | | | | | | | |
| If "YES", attach an explanation describing the nature and amount of the debt, lien, judgment, or fee; the dates of any notices from the City; | | | | | | | |
| and any written agreement or payment plan with the City for its disposition. | | | | | | | |
| | | | | | | | |
| | | tracts with the City of Philadelphia, provide the following inform | | | | | |
| | 1 | construction contracts within the last five years. (Please a | | | | | |
| CONTRACT NUMBER | BID NUMBER | PROJECT DESCRIPTION | AMO | UNTOF | CONTRACT | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| List all INCOMPLETE contracts held by your organization at present. (Please attach additional sheets as needed.) | | | | | | | |
|--|-------------------------|-----------------------------|----------------------------|--------------------------|-----------------------------|--|--|
| CONTRACTING ENTITY | | LOCA | | % COMPLETE AMOUNT OF CON | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | <u> </u> | | | | | | |
| 19. Has any liquidated dam | | | | PLEASE CI | | | |
| Have any liens, claims of | or stop notices been fi | iled against your organizat | ion? | PLEASE CI | RCLE YES NO | | |
| If you answered YES to | either of the above qu | uestions, please attach an | explanation of details ide | ntifying the claima | nt and stating the | | |
| grounds asserted by the | e claimant and stating | the disposition. | | | | | |
| | | | | | | | |
| List the largest projects that | | | | | | | |
| DOLLAR AMOUNT | DATE | CONTRACT | | | REFERENCES | | |
| | | | | Name | | | |
| | ļļ | | | Phone Number | | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | | | | |
| List any projects that your o | | | | or which you are | qualifying. | | |
| DOLLAR AMOUNT | DATE | CONTRACT | | | REFERENCES | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | Name | | | |
| | | | | Phone Number | | | |
| | | | | Name | | | |
| | | | Phone Number | | | | |
| | | Name | | | | | |
| | | | | Phone Number | | | |
| | lI | | | | | | |
| List any equipment that is o | wned by your organ | ization that is available | for the proposed work. (| Please attach add | ditional sheets as needed.) | | |
| | | | • | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| FINANCIAL POSIT | TION AS OF: (Not over 6 mont | hs old) |
|---|---|---------|
| ASSETS | LIABILITIES & EQUITY | · |
| CURRENT ASSETS | CURRENT LIABILITIES | |
| Cash and cash equivalents | Lines of credit | |
| Short-term investments | Notes payable - current portion | |
| Accounts receivable | Accounts payable | |
| Allowance for doubtful accounts () | Accrued and withheld payroll | |
| Notes receivable | Accrued expenses | |
| Inventories | | |
| Prepaid expenses | | |
| Tatal Queen at Accesta | Tatal Oursent Liabilities |] |
| Total Current Assets | Total Current Liabilities | |
| PROPERTY AND EQUIPMENT | LONG-TERM LIABILITIES | |
| Land | Notes payable | |
| Buildings | | |
| Machinery and equipment | | |
| Trucks and automobiles Office furniture and equipment | | |
| | Total Long Torm Liabilities |] |
| Assets under capital lease | Total Long-Term Liabilities | |
| | Total Liabilities | |
| | EQUITY | |
| Total Property and Equipment | Common stock | |
| Less accumulated depreciation | Additional paid-in capital | |
| and amortization () | Less treasury stock (|) |
| Net Property and Equipment | Retained earnings | |
| OTHER ASSETS | Partner's capital | |
| Cash surrender value of officer's life insurance | Owner's equity | |
| Loans against policies | | |
| Notes receivable | | |
| Organization cost (net) | | |
| | | |
| | Total Equity | |
| TOTAL ASSETS | TOTAL LIABILITIES & EQUITY | |
| Please provide the total dollar amount of all available lines of credit at your o | - | |
| Please provide the total dollar amount of the balance of all available lines of | credit at your organization's disposal. | |
| I / WE hereby certify that the statements of fact contained herein | | f; |
| and that the statement entitled "FINANCIAL POSITION" presents | | |
| understand that if I / WE knowingly make any false statements he | | |
| prescribed by law or ordinance. Any depository, vendor, reference | | у |
| the holder with any information necessary to verify this statement | | |
| NOTE: A partnership must give firm name and | | |
| signatures of all partners. A corporation | FIRM OR CORPORATE NAM | F |
| must give full corporate name, signatures | | - |
| of two (2) officers (either president or | | |
| vice-president and secretary or treasure) | SIGNATURE | TITLE |
| and affix corporate seal. | | |
| | | |
| | SIGNATURE | TITLE |
| | | |
| | | |
| Data of Signing | SIGNATURE | TITLE |
| Date of Signing | SIGNATURE | |
| | | |
| | SIGNATURE | TITLE |
| | SIGNATURE | |