

Dear Subcontractor/Supplier/Vendor,

Thank you for your interest in the **GOVE ELEMENTARY SCHOOL MODERNIZATION; BELLE GLADE, FLORIDA.**

Prospective Bidders should refer to the attached two (2) forms; **Section 200 – Subcontractor Request for Invitation to Bid** or **Section 225 – Subcontractor Qualification Requirements for Bidders.**

- **Page 2 and 3: Section 200 – Subcontractor Request for Invitation to Bid** should be completed; if the Prospective Bidder has performed successful work for the Construction Manager within the last two (2) years. The Prospective Bidder shall be considered pre-qualified unless substantial changes with the Bidders firm have occurred.
- **Pages 4 thru 9: Section 225 – Subcontractor Qualification Requirements for Bidders** should be completed; if the Prospective Bidder has **NOT** performed successful work for the Construction Manager.

Please note ALL BIDDERS shall complete either a **Section 200 – Subcontractor Request for Invitation to Bid** or **Section 225 – Subcontractor Qualification Requirements for Bidders.**

Please complete required form and submit by email to estimating@hedrickbrothers.com or fax to 561.681.5088.

Construction Manager will issue potential qualified Bidders an ‘Invitation to Bid’ upon receipt and review of either **Section 200 – Subcontractor Request for Invitation to Bid** or **Section 225 – Subcontractor Qualification Requirements for Bidders.**

All bid documents, i.e. plans, specifications, addenda, etc. will be issued through Hedrick Brothers Construction FTP website. FTP Address, login and password information will be provided on the Invitation to Bid. During the bid process it is imperative the Subcontractor continues to check the FTP website frequently for new documents posted. All new posted documents typically will be indicated with the posting date.

Disclaimer: The information provided on Hedrick Brothers Construction’s FTP Website may contain legally privileged and/or confidential information and is for the exclusive use of Hedrick Brothers Construction, its employees, clients, subcontractors, suppliers and other business affiliates in the course of performance of contracts with and conducting business with Hedrick Brothers Construction. Use of the information contained on this site is for the designated recipient only and any dissemination, distribution or duplication of this material by any entity other than the designated recipient is strictly prohibited. If you obtain access to information which is not intended for you, please notify Hedrick Brothers Construction by emailing estimating@hedrickbrothers.com or calling 561-689-8880.

If you have any questions or require additional information, please contact us by email at estimating@hedrickbrothers.com.

Sincerely,

Estimating Department

***Hedrick Brothers Construction Co., Inc.
Asset Builders, LLC***

Section 200

Subcontractor Request for Invitation to Bid

Gove Elementary School Modernization

Belle Glade, Florida

To be used by Firms that has performed work for Hedrick Brothers Construction between;
August 1, 2009 and August 1, 2011

_____ has performed work for Hedrick Brothers Construction between August 1, 2009 and August 1, 2011 on the following projects:

Project No. 1: _____ Date Completed: _____

Project No. 2: _____ Date Completed: _____

Project No. 3: _____ Date Completed: _____

Since the last project completion date of _____ there have been no substantial changes within the firm.

1. I understand that all Bid Proposals with a grand total exceeding \$100,000 will require a 5% Bid Bond.
2. I understand that all Bid Proposals with a grand total exceeding \$100,000 will require a 100% Payment and Performance Bond. Bond shall be provided within ten (10) days after execution of Subcontract Agreement.
3. The 5% Bid Bond and 100% Payment and Performance Bond requirements will be waived for African-American M/WBE firms certified by the School District of Palm Beach County or State of Florida Office of Supplier Diversity at the time of Bid.
4. The School District of Palm Beach County, Florida has a goal of a minimum 9% Certified African American M/WBE participation for this Project. Only firms Certified by the School District of Palm Beach County, Florida or State of Florida Office of Supplier Diversity or its successors are accepted for participation as an African American M/WBE Firm. Is your firm Certified African-American M/WBE? Please attach certificate.
 Yes No
5. The School District of Palm Beach County, Florida has a goal of at least a 10% Local Vendor and Local Worker Participation. Local is defined as Belle Glade, Pahokee, South Bay, Canal Point and Lake Harbor. Is your firm a Local Vendor and/or will your firm make every effort to solicit Local Worker Participation? Please attach Business Tax License.
 Yes No
6. Construction funding for the project is secured through a Federal Assistance Program for Qualified School Construction Bonds. All Subcontractors shall be required to comply with all applicable requirements of the Davis-Bacon Act and Department of Labor regulations. Has your firm completed or are currently working on a project which required the Davis-Bacon Act and Department of Labor regulations?
 Yes No
7. Are you willing to participate in the Owner Direct Purchase Order ("DPO") process?
 Yes No



Legal Business Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Principal Contact: _____ Email: _____

Phone: _____ Fax: _____

I hereby request an Invitation to Bid for the **Gove Elementary School Modernization Project** located in Belle Glade, Florida.

The undersigned certifies that the information provided herein is accurate to the best of their knowledge. The information provided is intended only for the use of Hedrick Brothers Construction Co., Inc.

Signature: _____ Title: _____

Printed: _____ Date: _____

Section 225**Qualification Requirements for Bidders****Gove Elementary School Modernization****Belle Glade, Florida****SUBCONTRACTOR QUALIFICATION STATEMENT**

Date: _____

Legal Business Name: _____

MAIN/CORPORATE OFFICE:

Street Address: _____

City: _____ State: _____ Zip: _____

Principal Contact: _____ Contact Email: _____

Phone: _____ Fax: _____

Company Website: _____ Years in Business: _____ # Employees: _____

Name of License Qualifier: _____ Qualifier's Ownership of the Co: _____%

BUSINESS TYPE: Partnership Corporation If Corporation, please list Officer(s): _____ LLC/LCP Sole Proprietor Other: _____ Federal ID#: _____**BRANCH OFFICE:**

Street Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Mobile: _____

Phone: _____ Fax: _____

Contact Email: _____ Years Branch Open: _____

Branch Employees: _____ # Full-Time Field Employees: _____

Has your Company (or Entities inclusive of Branch, Field, Satellite Offices, etc.) failed to complete an awarded project or have been terminated for cause?

 Yes No

Does your Company have any judgments, claims arbitrations, law suits or liens currently against your Organization?

Yes No

If yes, please explain below:

LICENSE: Please provide License information where your company is legally qualified to work:

State	License Number	Expiration Date
_____	_____	_____
_____	_____	_____
_____	_____	_____

INSURANCE - Minimum Requirements:

Workman's Compensation Yes No Expiration Date: _____ Mod Rate: _____ %
 General Liability \$1,000,000 Yes No Expiration Date: _____
 Automobile Liability \$1,000,000 Yes No
 Employer Liability \$1,000,000 Yes No

Insurance Agent: _____ Contact: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____

BONDING:

Bonding Company: _____ Contact: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____
 Bonding Capacity: \$ _____ Current Bonding Available: \$ _____ Bonding Rate: _____ %

BANK INFORMATION:

Local Bank: _____ Contact: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____

PROJECT INFORMATION: Please provide information from the three (3) most recent fiscal years.

Year: _____ Max. Contract Value Completed: \$ _____ Annual Company Revenue: \$ _____
 Year: _____ Max. Contract Value Completed: \$ _____ Annual Company Revenue: \$ _____
 Year: _____ Max. Contract Value Completed: \$ _____ Annual Company Revenue: \$ _____

SAFETY PROGRAM:

Name of Safety Program: _____
 Contact: _____ Phone: _____

Please provide your Company Experience Modification Rate (EMR) for the last three (3) years:

Year: _____ EMR Rate: _____ %
 Year: _____ EMR Rate: _____ %
 Year: _____ EMR Rate: _____ %

Number of OSHA Recordable Incidents for the last three (3) years:

Year: _____ # of Incidents _____
 Year: _____ # of Incidents _____
 Year: _____ # of Incidents _____

SCOPE OF WORK your company performs:

- Division _____ CSI Code/Trade _____
- Division _____ CSI Code/Trade _____
- Division _____ CSI Code/Trade _____
- Division _____ CSI Code/Trade _____

PROJECT TYPE your company performs: Please check all that apply and provide %.

- Commercial _____% Hospitality _____%
- Residential _____% Interior Renovations _____%
- Retail _____% Other _____%

COUNTIES AND STATES your company is licensed to work in:

County _____ State _____
 County _____ State _____
 County _____ State _____
 County _____ State _____

CURRENT PROJECTS:

Project Name: _____ City, State: _____
 General Contractor: _____ Contact: _____
 Phone: _____ Subcontract Amount: \$ _____
 Commercial Residential Retail Other _____ LEED Project? Yes No
 Scope(s) of Work: _____ Project Size: _____ SF
 Start Date: _____ Projected Completion Date: _____

Project Name: _____ City, State: _____
 General Contractor: _____ Contact: _____
 Phone: _____ Subcontract Amount: \$ _____
 Commercial Residential Retail Other _____ LEED Project? Yes No
 Scope(s) of Work: _____ Project Size: _____ SF
 Start Date: _____ Projected Completion Date: _____

Project Name: _____ City, State: _____
 General Contractor: _____ Contact: _____
 Phone: _____ Subcontract Amount: \$ _____
 Commercial Residential Retail Other _____ LEED Project? Yes No
 Scope(s) of Work: _____ Project Size: _____ SF
 Start Date: _____ Projected Completion Date: _____

BACKLOG PROJECTS (Projects that have not started):

Project Name: _____ City, State: _____
 General Contractor: _____ Contact: _____
 Phone: _____ Subcontract Amount: \$ _____
 Commercial Residential Retail Other _____ LEED Project? Yes No
 Scope(s) of Work: _____ Project Size: _____ SF
 Projected Start Date: _____ Projected Completion Date: _____

Project Name: _____ City, State: _____
 General Contractor: _____ Contact: _____
 Phone: _____ Subcontract Amount: \$ _____
 Commercial Residential Retail Other _____ LEED Project? Yes No
 Scope(s) of Work: _____ Project Size: _____ SF
 Projected Start Date: _____ Projected Completion Date: _____



Project Name: _____ City, State: _____

General Contractor: _____ Contact: _____

Phone: _____ Subcontract Amount: \$ _____

Commercial Residential Retail Other _____ LEED Project? Yes No

Scope(s) of Work: _____ Project Size: _____ SF

Projected Start Date: _____ Projected Completion Date: _____

COMPLETED PROJECTS within the last three (3) years:

Project Name: _____ City, State: _____

General Contractor: _____ Contact: _____

Phone: _____ Subcontract Amount: \$ _____

Commercial Residential Retail Other _____ LEED Project? Yes No

Scope(s) of Work: _____ Project Size: _____ SF

Project Completion Date: _____

Project Name: _____ City, State: _____

General Contractor: _____ Contact: _____

Phone: _____ Subcontract Amount: \$ _____

Commercial Residential Retail Other _____ LEED Project? Yes No

Scope(s) of Work: _____ Project Size: _____ SF

Project Completion Date: _____

Project Name: _____ City, State: _____

General Contractor: _____ Contact: _____

Phone: _____ Subcontract Amount: \$ _____

Commercial Residential Retail Other _____ LEED Project? Yes No

Scope(s) of Work: _____ Project Size: _____ SF

Project Completion Date: _____

TRADE REFERENCES (I.E. SUPPLIERS, DISTRIBUTORS, ETC.):

Company: _____ Contact: _____

Phone: _____ Fax: _____

Company: _____ Contact: _____

Phone: _____ Fax: _____

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 Yes No
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 Yes No
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 Yes No

The undersigned certifies that the information provided herein is accurate to the best of their knowledge. The information provided is intended only for the use of Hedrick Brothers Construction Co., Inc.

Signature: _____

Printed: _____

Title: _____

Date: _____