

SECTION 15.0
QUALIFICATION STATEMENT

BID No.: 2017-RED-BID-CON-067

**ABATEMENT, DEMOLITION AND SITE IMPROVEMENT SERVICES
FORMER MYER CENTER, FORT MONMOUTH
BOROUGH OF TINTON FALLS, MONMOUTH COUNTY, NJ
QUALIFICATION STATEMENT**

**New Jersey Economic
Development Authority
Real Estate Division
36 West State Street, P.O. Box 990
Trenton, NJ 08625-0990
609-858-6719**

All items must be completed. If an item is not applicable, indicate so by inserting "N/A".

<p>1. Applicant Firm Name/Business Headquarters Address:</p> <p>Telephone No.: Fax No.: E-Mail Address:</p>	<p>2. Bid Date:</p>
<p>5. Type of Ownership:</p> <p>Total Number of Employees:</p> <p>Name of Parent Company, if any:</p> <p>Years of Operation Under Current Corporate Name:</p> <p>Former Firm Name(s) and Year(s) Established:</p>	<p>3. Federal ID No.:</p> <p>4. a) SIC Code: b) NAICS Code:</p> <p>6. Is the applicant firm certified or registered with the State of New Jersey as an: (yes/no)</p> <p>_____ MBE (optional response) _____ WBE (optional response) _____ SBE</p> <p>Identification Number: Attach Certification/Registration, if applicable</p>
<p>7. Principal Contact:</p> <p>Name: Telephone No.: Fax No.: E-Mail Address:</p>	<p>8. List Branch Office locations other than Headquarters listed in Item 1:</p>
<p>9. Bonding Capacity: \$ _____</p> <p>Bonding/Surety Company: _____</p>	

10. LIST PRINCIPAL OWNERS:	
a. Name:	a. Name:
b. Percentage of Ownership:	b. Percentage of Ownership:
c. Officer/Title:	c. Officer/Title:
d. Years Experience:	d. Years Experience:

a. Name:	a. Name:
b. Percentage of Ownership:	b. Percentage of Ownership:
c. Officer/Title:	c. Officer/Title:
e. Years Experience:	d. Years Experience:

ATTACH AS MANY SHEETS AS NECESSARY

11. BRIEF RESUME OF PRINCIPALS AND KEY PERSONNEL	
a. Name and Title:	a. Name and Title:
b. Years Experience: This Firm _____ Other Firm _____	b. Years Experience: This Firm _____ Other Firm _____
c. Education: Degree(s)/Year/Specialization/School:	c. Education: Degree(s)/Year/Specialization/School:
d. Active Registration: Year First Registered/Discipline/NJ License No.:	d. Active Registration: Year First Registered/Discipline/NJ License No.:
e. Experience and Qualifications:	e. Experience and Qualifications:

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12.

REPRESENTATIVE PROJECTS - PROVIDE AT LEAST FOUR (4) PROJECTS OF SIMILAR SCALE, SCOPE AND DOLLAR AMOUNT TO THAT REQUIRED FOR THIS CONTRACT COMPLETED WITHIN THE PAST TEN (10) YEARS.

PROJECT NAME & ADDRESS	PROJECT MANAGER PHONE & E-MAIL	CONTRACT AMOUNT	PROJECT DESCRIPTION	OWNER'S NAME, ADDRESS, PHONE & E-MAIL	PROJECT ARCHITECT/ ENGINEER'S NAME, ADDRESS, PHONE & E-MAIL	DATE OF COMPLETION	TOTAL COST OF WORK APPLICANT FIRM WAS RESPONSIBLE FOR

ATTACH AS MANY SHEETS AS NECESSARY

13. GROSS FEES (in thousands) FROM CONTRACTS ENTERED INTO IN THE LAST TWO YEARS:					
	<i>From All Entities (Inc. Private Sector)</i>	<i>From State Government Entities</i>	<i>From Local Government Entities</i>	<i>From Federal Government Entities</i>	<i>Comments</i>
Year (Most Recent)					
Year (Previous Year)					

ATTACH A CERTIFIED FINANCIAL STATEMENT FOR LAST OR MOST RECENT YEAR.

Dollar value of largest, single project completed by the applicant firm within the last 3 years: \$_____.

	YES	NO
<p>14. DISCLOSURE:</p>		
<p>(A) Does the applicant firm's work on hand and anticipated workload permit conformance with the Project Schedule and scheduled milestone completion dates?</p>		
<p>(B) Is the applicant firm and/or its prime subcontractors classified with the NJ Division of Property Management and Construction in the trades required for this Contract? (If yes, attach proof of classification.)</p>		
<p>(C) Has any person or entity listed in this Qualification Statement ever been suspended, debarred or otherwise declared ineligible, by any agency of government, from contracting to provide services, labor, material or supplies? (If yes, attach an explanation for each instance.)</p>		
<p>(D) Has any federal, state or local government license, permit or other similar authorization necessary to perform the work applied for herein, and held or applied for by any person or entity listed in this Qualification Statement been suspended or revoked, or is the subject of any pending proceedings specifically seeking or litigating the issue of suspension or revocation? (If yes, attach an explanation for each instance.)</p>		
<p>(E) Are there currently any administrative, civil or criminal matters pending in any federal, state or local government jurisdiction in which the applicant firm or its principals or key personnel are involved? (If yes, attach an explanation for each instance.)</p>		
<p>(F) Has the applicant firm been denied classification in the past five years under this name or another? (If yes, attach an explanation for each instance.)</p>		
<p>(G) Has the applicant firm, its affiliate or any of its principals or key personnel been a party to a bankruptcy or re-organization proceeding? (If yes, provide caption, date, docket number, court and county.)</p>		
<p>(H) In the past 10 years, has the applicant firm, or any of its affiliate firms: (If yes to any of the following, attach explanation.)</p> <p style="padding-left: 40px;">had a contract terminated for non-performance? defaulted on a contract? been given a final unsatisfactory performance rating on a specific project? had liquidated damages assessed against it in connection with a contract? engaged in any litigation with regard to any contract?</p>		
<p>(I) Will you subcontract more than 49% of the work subject to this bid?</p>		

15. INSURANCE: Identify insurance policies currently held by the applicant firm:
(For each policy, name the following: policy limits, expiration date, carrier, agent, agent name, address, and phone number.)

GENERAL LIABILITY:

EXCESS LIABILITY:

PROFESSIONAL LIABILITY:

AUTOMOBILE:

MULTIPLE PERIL:

WORKERS COMPENSATION:

ENVIRONMENTAL LIABILITY:

OTHER:

I, BEING DULY SWORN UPON MY OATH, HEREBY REPRESENT AND STATE THAT THE FOREGOING INFORMATION AND ANY ATTACHMENTS THERETO, TO THE BEST OF MY KNOWLEDGE, ARE TRUE AND COMPLETE. I ACKNOWLEDGE THAT THE NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY IS RELYING ON THE INFORMATION CONTAINED HEREIN AND THEREBY ACKNOWLEDGE THAT I AM UNDER A CONTINUING OBLIGATION FROM THE DATE OF THIS CERTIFICATION THROUGH THE COMPLETION OF ANY CONTRACTS WITH THE NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY TO NOTIFY THE NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY IN WRITING OF ANY CHANGES TO THE ANSWERS OR INFORMATION CONTAINED HEREIN. A MATERIAL FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS QUALIFICATION STATEMENT WILL SUBJECT THE APPLICANT FIRM AND ME TO CIVIL AND CRIMINAL PENALTIES AVAILABLE AT LAW. I AUTHORIZE THE NEW JERSEY ECONOMIC DEVELOPMENT AUTHORITY TO VERIFY ANY ANSWER(S) CONTAINED HEREIN, TO INVESTIGATE MY BACKGROUND AND CREDIT WORTHINESS AND OF THE APPLICANT FIRM AND TO ENLIST THE AID OF THIRD PARTIES IN ITS INVESTIGATIVE PROCESS.

I, BEING DULY AUTHORIZED, CERTIFY THAT THE INFORMATION SUPPLIED IN THIS QUALIFICATION STATEMENT, INCLUDING ALL ATTACHMENTS, IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Sworn to before me this _____ day

of _____, 2017

Name (print or type)

Notary Public

Title (print or type)

Signature