

STATEMENT OF QUALIFICATIONS

All questions must be answered and the data given must be clear and comprehensive. This statement must be notarized. If necessary, questions may be answered on separate attached sheets. The Bidder may submit any additional information desired.

NAME OF PROJECT: Phase 10 - George Harris to S. Davis

NAME OF OWNER: CITY OF LAGRANGE

NAME OF BIDDER: _____

COMPANY INFO

Bidder Address: _____

City, State, Zip: _____

Phone/Fax: _____

Date of Organization: _____

Names, background and experience of the principal members of your organization, including officers:

Name/Position/Years of Experience: _____

Name/Position/Years of Experience: _____

Name/Position/Years of Experience: _____

Name/Position/Years of Experience: _____

QUESTIONARE

1. How many years have you been engaged in the contracting business under your present firm or trade name? _____
2. Contracts on hand. (Complete a "Project Information Form", for each Contract onhand.)
3. General description of type of work performed by your company: _____

4. Have you ever failed to complete any work awarded to you? If so, where and why? _____

STATEMENT OF QUALIFICATIONS

The undersigned hereby authorizes and requests any person, firm, or corporation to furnish any information requested by the Local Public Agency in verification of the recitals comprising this Statement of Bidder's Qualifications.

I, _____, certify that I am _____ of the Bidder, and that the answers to the foregoing questions and statements contained therein are true and correct.

BIDDER: _____

By: _____

(name signed)

(name printed or typed)

Title: _____

Date: _____

Subscribed and sworn to me this ____ day of _____, 20__ .

NOTARY PUBLIC: _____

(name signed)

(name printed or typed)

Commission Expires: _____

(Date)

(SEAL)

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Reference Form for _____
(Use additional sheets as necessary and please type all information)

Reference Company Name/Address:

Reference Contact Person/Phone/Email:

Project Title: _____

Project Location: _____

Construction Type/Project Description: _____

Date of Contract: _____

Date of Complete: _____

Did the contractor fulfill all contractual obligations in a timely and professional manner? If not please explain: _____

Comments: _____

Print Name: _____

Signature: _____

Date: _____