

REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA

ATTACHMENT A – APPLICATION FORM

APPLICATIONS WILL BE RECEIVED ELECTRONICALLY VIA VENDOR REGISTRY NOT LATER THAN 1:00
P.M., JUNE 1, 2020

PREQUALIFICATION OF FIRMS FOR NEW ART OPERATIONS AND MAINTENANCE FACILITY
CONSTRUCTION MANAGER AT RISK (CMAR) SERVICES
IN ARLINGTON COUNTY, VIRGINIA.

THE FULL LEGAL NAME OF THE ENTITY SUBMITTING THIS APPLICATION MUST BE WRITTEN IN THE SPACE
BELOW. THIS APPLICATION FORM AND ALL OTHER DOCUMENTS THAT REQUIRE A SIGNATURE MUST BE
FULLY AND ACCURATELY COMPLETED AND SIGNED BY A PERSON WHO IS AUTHORIZED TO BIND THE
APPLICANT, OR THE APPLICATION MAY BE REJECTED:

SUBMITTED BY:

(legal name of entity)

AUTHORIZED SIGNATURE:

PRINT NAME AND TITLE:

ADDRESS:

CITY/STATE/ZIP:

TELEPHONE NO.:

E-MAIL

ADDRESS:

THIS ENTITY IS INCORPORATED
IN:

THIS ENTITY IS A:

*(check the applicable
option)*

CORPORATION

LIMITED PARTNERSHIP

GENERAL PARTNERSHIP

UNINCORPORATED ASSOCIATION

LIMITED LIABILITY COMPANY

SOLE PROPRIETORSHIP

IS APPLICANT AUTHORIZED TO TRANSACT BUSINESS IN THE
COMMONWEALTH OF VIRGINIA?

YES

NO

VIRGINIA STATE CORPORATION COMMISSION (SCC)

IDENTIFICATION NUMBER:

*Any Applicant that is exempt from the SCC authorization requirement must include a statement with its
application explaining why it is exempt.*

THE UNDERSIGNED UNDERSTANDS AND ACKNOWLEDGES THE FOLLOWING:

THE OFFICIAL COPY OF THE SOLICITATION DOCUMENTS, WHICH INCLUDES ANY ADDENDA, IS THE ELECTRONIC COPY THAT IS AVAILABLE FROM THE VENDOR REGISTRY WEBSITE AT:

<HTTPS://VRAPP.VENDORREGISTRY.COM/BIDS/VIEW/BIDSLIST?BUYERID=A596C7C4-0123-4202-BF15-3583300EE088>.

VENDORS ARE REQUIRED TO REGISTER ON [VENDOR REGISTRY](#) IN ORDER TO SUBMIT A RESPONSE TO THIS REQUEST FOR QUALIFICATIONS. **NO RESPONSES WILL BE ACCEPTED AFTER THE APPLICATION DUE DATE AND TIME.**

POTENTIAL APPLICANTS ARE RESPONSIBLE FOR DETERMINING THE ACCURACY AND COMPLETENESS OF ALL SOLICITATION DOCUMENTS THEY RECEIVE FROM ANY SOURCE, INCLUDING THE COUNTY.

1. APPLICANT MUST SUBMIT: ONE COMPLETED AND SIGNED APPLICATION, CLEARLY MARKED "ORIGINAL".
2. INDICATE THE NAME AND CONTACT INFORMATION OF THE PERSON WHO CAN RESPOND AUTHORITATIVELY TO QUESTIONS REGARDING THIS APPLICATION.

NAME (PRINTED): _____

TITLE: _____

E-MAIL ADDRESS: _____

TEL. NO.: _____

APPLICANT NAME: _____

TRADE SECRETS OR PROPRIETARY INFORMATION:

Trade secrets or proprietary information submitted by an Applicant in connection with a procurement transaction will not be subject to public disclosure under the Virginia Freedom of Information Act. Pursuant to Section 4-111 of the Arlington County Purchasing Resolution, however, an Applicant seeking to protect submitted data or materials from disclosure must, before or upon submission of the data or materials, identify the data or materials to be protected and state the reasons why protection is necessary.

Please mark one:

- No, the application that I have submitted does not contain any trade secrets and/or proprietary information.
- Yes, the application that I have submitted does contain trade secrets and/or proprietary information.

If Yes, you must clearly identify below the exact data or materials to be protected and list all applicable page numbers of the application that contain such data or materials:

State the specific reason(s) why protection is necessary:

If you fail above to identify the data or materials to be protected or to state the reason(s) why protection is necessary, you will not have invoked the protection of Section 4-111 of the Purchasing Resolution. Accordingly, upon the award of a contract, the application will be open for public inspection consistent with applicable law.

CERTIFICATION OF NON-COLLUSION: The undersigned certifies that this application is not the result of or affected by (1) any act of collusion with another person engaged in the same line of business or commerce (as defined in Virginia Code §§ 59.1-68.6 *et seq.*) or (2) any act of fraud punishable under the Virginia Governmental Frauds Act (Virginia Code §§ 18.2-498.1 *et seq.*).

APPLICANT NAME: _____

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA**

**SUBMIT COMPLETED APPLICANT'S PREQUALIFICATION STATEMENT ELECTRONICALLY VIA VENDOR
REGISTRY**

ATTACHMENT B – APPLICANT'S PREQUALIFICATION STATEMENT

Applicant Name: _____

Applicant Address: _____

Virginia Contractor's License Number: _____ Class: _____

Person who can respond authoritatively to any questions about this statement:

Name: _____ Title: _____

Phone number: _____ E-mail address: _____

1. How many years has your organization been in business providing the type of services for which you are requesting to be pre-qualified? _____

2. How many years has your organization been in business under its present name? _____

3. Under what other names has your organization operated?

4. If your organization is a corporation, indicate:

Date of incorporation: _____

State of incorporation: _____

President's name: _____

Vice President's name(s): _____

Secretary's name: _____

Treasurer's name: _____

5. If your organization is a partnership, indicate:

Date of organization: _____

Type of partnership (if applicable): _____

Name(s) of general partners: _____

6. If your organization is a sole proprietorship, indicate:

Date of organization: _____

Name of owner: _____

7. If the form of your organization is other than those listed above, describe it and name the principals:

8. Is the Applicant related to another firm as a parent, subsidiary or affiliate?

Yes

No

If yes, give names and addresses of all affiliated parent and/or subsidiary companies. Indicate which companies are subsidiaries.

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA**

SUBMIT COMPLETED SAMPLE SURETY STATEMENT ELECTRONICALLY VIA VENDOR REGISTRY

ATTACHMENT C – SAMPLE SURETY STATEMENT

APPLICANT NAME: _____

(Name of Applicant) has been a client of (Name of Surety Company) for (_____) years. During that time, we have supported this firm in its pursuit of projects in the \$_____ range and in total programs in excess of \$_____.

We are prepared to provide bid, performance, and payment bonds on the project for which Arlington County seeks prequalification through RFQ No. 20-030-RFQ if (name of Applicant) accepts an award of the contract and applies to us on or about the time that the work is to begin and if we are satisfied with the prevailing underwriting conditions, including but not limited to, contract terms and job specifications, bond forms and financing.

We possess certificates of authority as an acceptable surety authorized to do business in the Commonwealth of Virginia as published annually in the Federal Register, Department of Treasurer, Fiscal Service, Department Circular 570.

Sincerely,

Attorney-In-Fact

Name of Surety

Signature

Typed Signature

Date

Address

Telephone

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA**

**SUBMIT COMPLETED PROJECT SPECIFIC EXPERIENCE STATEMENT ELECTRONICALLY VIA VENDOR
REGISTRY**

ATTACHMENT D – PROJECT SPECIFIC EXPERIENCE STATEMENT

Provide all information required below. The County will consider for prequalification only information that is included in the application.

Applicant Name: _____

1. **Name of Project:** _____

Contract No. or Project No. (if applicable) _____

Project Location: _____

2. **Project Owner:** _____

Contact Person: _____ Telephone: (____) _____

Email address: _____

3. **Design Professional:** _____

Contact Person: _____ Telephone: (____) _____

Email address: _____

4. **Contract Dates:** Attach explanation if project was not on schedule.

Started: _____

Contractual Completion Date: _____

Actual Completion Date: _____

5. **Original Contract Value:** \$ _____

Final Contract Value: \$ _____

Value of Change Orders to Date: \$ _____

Outstanding Claims to Date: \$ _____

6. **Project Details:** Attach a detailed description of the project and construction methods used.

7. **Project Manager and Project Superintendent:** List all Project Managers and Project Superintendents who had substantive work or responsibilities on this project:

Name: _____ Responsibility _____

Name: _____ Responsibility _____

Name: _____ Responsibility _____

8. **If Applicant's work for this project was performed under the management of a General Contractor or Construction Management firm, provide the following:**

Firm Name: _____

Contact Person: _____ Telephone: (_____) _____

Email address: _____

9. **If Applicant used sub-contractor(s) in the performance of this project provide the following:**

Firm Name: _____ Responsibility _____

Firm Name: _____ Responsibility _____

Firm Name: _____ Responsibility _____

Firm Name: _____ Responsibility _____

10. **Bonding Company:** _____

Address: _____

Contact Person: _____ Telephone: (_____) _____

Email address: _____

11. **LEED certified project? (Yes/No)** **LEED Certification Level:** _____

12. **Web Management Software used:** _____

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA
SUBMIT COMPLETED QUALIFYING EXPERIENCE CHART ELECTRONICALLY VIA VENDOR REGISTRY**

ATTACHMENT E – QUALIFYING EXPERIENCE CHART

NAME OF PROJECT	QUALIFYING EXPERIENCE			
	Was the Project construction value of \$30 million or greater?	Was the Project delivered through the construction management at risk delivery method	Was the Project delivered through the construction management at risk delivery method for a public entity?	Was the Project performed for a public transit system with a secondary (Type II) maintenance facility?
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<	

REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA

SUBMIT COMPLETED PRIOR JUDGMENTS CERTIFICATION ELECTRONICALLY VIA VENDOR REGISTRY

ATTACHMENT F – PRIOR JUDGMENTS CERTIFICATION

Has the Offeror, or any officer, director or owner thereof, had any judgments entered against it within the past ten years for the breach of any contract for governmental or nongovernmental construction, including, but not limited to, design-build and construction management contracts?

Yes ____ No ____

If yes, then attach a separate sheet(s) of paper that identifies and explains all such judgments.

The Offeror understands that its failure to complete and sign this Certification shall render its Submittal non-responsive and the Offeror unqualified.

Signed: _____

Date: _____

Name of Applicant: _____

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA**

**SUBMIT COMPLETED COMPLIANCE WITH PRIOR CONTRACTS WITH PUBLIC BODIES CERTIFICATION
ELECTRONICALLY VIA VENDOR REGISTRY**

**ATTACHMENT G –
COMPLIANCE WITH PRIOR CONTRACTS WITH PUBLIC BODIES CERTIFICATION**

Has the Offeror, except for good cause, substantially complied with the terms and conditions of all prior contracts with Arlington County for construction, including, but not limited to, design-build and construction management contracts? If the Offeror has not previously contracted with Arlington County Government for construction, including, but not limited to, design-build and construction management contracts, then has the Offeror, except for good cause, substantially complied with the terms and conditions of all prior construction management contracts with other “public bodies” as that term is defined in the Virginia Public Procurement Act?

Yes ___ No ___

If no, then attach a separate sheet(s) of paper that identifies and explains all such instances of substantial non-compliance.

The Offeror understands that its failure to complete and sign this Certification shall render its Submittal non-responsive and the Offeror unqualified.

Signed: _____ **Date:** _____

Name of Applicant: _____

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA**

SUBMIT COMPLETED PRIOR CONVICTIONS CERTIFICATION ELECTRONICALLY VIA VENDOR REGISTRY

ATTACHMENT H – PRIOR CONVICTIONS CERTIFICATION

Has the Offeror, or any officer, director, owner, project manager, procurement manager or chief financial officer thereof, been convicted within the past ten years of a crime related to governmental or nongovernmental construction or contracting, including, but not limited to, a violation of (i) Article 6 of the Virginia Public Procurement Act, (ii) the Virginia Governmental Frauds Act, (iii) Chapter 4.2 of title 59.1 of the Code of Virginia, or (iv) any substantially similar law of the United States or another state?

Yes ___ No ___

If yes, then attach a separate sheet(s) of paper that identifies and explains all such convictions.

The Offeror understands that its failure to complete and sign this Certification shall render its Submittal non-responsive and the Offeror unqualified.

Signed: _____

Date: _____

Name of Applicant: _____

**REQUEST FOR QUALIFICATIONS No. 20-030-RFQ
ARLINGTON COUNTY, VIRGINIA**

SUBMIT COMPLETED DEBARMENT CERTIFICATION ELECTRONICALLY VIA VENDOR REGISTRY

ATTACHMENT I – DEBARMENT CERTIFICATION

Is the Offeror, or any officer, director or owner thereof, currently debarred pursuant to an established debarment procedure from bidding or contracting with any “public body” as that term is defined in the Virginia Public Procurement Act, agency of another state, or agency of the federal government?

Yes ___ No ___

If yes, then attach a separate sheet(s) of paper that identifies and explains all such debarments.

The Offeror understands that its failure to complete and sign this Certification shall render its Submittal non-responsive and the Offeror unqualified.

Signed: _____ **Date:** _____

Name of Applicant: _____