



<b>FOR OFFICE USE ONLY</b>	
Firm:	_____
Date received:	_____
Class of work:	_____
Pre-qualified by:	_____
Approved as qualified:	_____
Date:	_____
Meets requirements of Section 5.001 of the Code of General Ordinances for the City of Kenosha:	
_____ YES	_____ NO
_____ Initial	

**Bidder's Proof of Responsibility Form #PWE007**  
(rev. 1/2024)

Date: \_\_\_\_\_

To: **City of Kenosha**  
**Public Works Department**  
**625 52<sup>nd</sup> Street**  
**Kenosha, WI 53140**

Attn: **Gregory J. Boldt, PE**  
**Deputy Director of Public Works/City Engineer**

Re: **Submission of Prequalification Forms for the Year 2024**

To Whom It May Concern:

Submitted herewith please find our statement for your consideration in determining whether our firm is qualified to bid, perform and furnish the necessary labor, materials and skill on the basis of our work record, experience, equipment, staff, financial resources including bond ability, protection and welfare of the public, and compliance with Section 5.001 of the Code of General Ordinances for the City of Kenosha as required to enter upon and complete various types of projects as may be awarded by the City of Kenosha during the calendar year above specified.

It is understood that the determinations and decisions of the City of Kenosha with regard to qualifications shall be final, and further, that the information herein will be considered confidential. A finding of "qualified" for one project does not bind the City of Kenosha on other projects, and the City of Kenosha expressly reserves the right to determine if a bidder is qualified on a project-by-project basis. It is also understood that this Bidder's Proof of Responsibility is good for one calendar year and must be renewed annually at the beginning of the year and that pursuant to Section 66.0901(2), Wisconsin Statutes, the form provided for "Bidder's Proof of Responsibility" shall be completed and returned to the Director of Engineering not less than five days before the date of bid opening.

Sincerely yours,

\_\_\_\_\_  
Officer

\_\_\_\_\_  
Firm

\_\_\_\_\_  
Applicant Signature

**Hard-copies of the Bidder's Proof of Responsibility Form and additional documentation must be received at the City of Kenosha Department of Public Works prior to the timeframe stated above or in the Notice to Contractors. E-mail copies will not be accepted.**

**To: All Bidders on City of Kenosha Projects**  
**From: Gregory J. Boldt, PE, Deputy Director of Public Works/City Engineer**  
**Subject: Prequalification Statements**

In addition to the attached prequalification statement, please provide the following information:

1) Your Wisconsin Unemployment Compensation Number: \_\_\_\_\_

2) Outline the construction projects your organization has in progress as of the date of this statement (If contract is as a sub-contractor, give the name of prime contractor, amount of total contract and amount of sub-contract):

Amount of Contract	Type of Work	Scheduled Date of Completion	Owner

3) Have any of your contracts resulted in lawsuits?    \_\_\_ Yes    \_\_\_ No

If yes, please describe: \_\_\_\_\_

4) What volume of work have you unfinished? \$\_\_\_\_\_

5) How much cash or credit does this require? \$\_\_\_\_\_

6) How much cash or credit does this leave free for other work? \$\_\_\_\_\_

## PREQUALIFICATION STATEMENT

There is submitted herewith for your consideration, pursuant to Section 66.0901(2), Wisconsin Statutes, a statement of qualifications of the undersigned to furnish the necessary labor, materials and skills required to enter upon and complete public works contracts to be let by the City of Kenosha through its several departments.

### IDENTIFICATION

A. Official Firm Name: \_\_\_\_\_

B. Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

C. Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

D. Number of years in business under present firm name: \_\_\_\_\_

E. Class of work in which firm is seeking classification: \_\_\_\_\_

F. Please check one:     Corporation     Partnership     Individual Owner

G. Principal Individuals:

**If a corporation, list names below:**

**If a partnership, list names below:**

President: \_\_\_\_\_

Partner: \_\_\_\_\_

Vice Pres: \_\_\_\_\_

Partner: \_\_\_\_\_

Secretary: \_\_\_\_\_

**If an individual owner, list name below:**

Treasurer: \_\_\_\_\_

Single Owner: \_\_\_\_\_

**If Limited Liability Corporation (LLC)**

Member / Manager: \_\_\_\_\_

Member / Manager: \_\_\_\_\_

H. Authorized to do business in the State of Wisconsin?     Yes     No

Year Established: \_\_\_\_\_ In what state? \_\_\_\_\_

## EXPERIENCE

A. List below major contracts that your firm has completed in the past five years

Year	Class of Work	Contract Amount	Location of Work	For Whom Performed (Name, address, phone)

B. List below the construction experience of the principal individuals of your present organization.

Name	Present Position	Years of Experience	Class of Work

List the average number of employees in each of the following categories during the last 12 months:

Office: \_\_\_\_\_ Skilled: \_\_\_\_\_ Unskilled: \_\_\_\_\_



C. Has any officer or partner of firm ever been an officer or partner of some other organization during the past ten years that failed to complete on time a construction contract?  Yes  No

If yes, state:

Date: \_\_\_\_\_ Name of Officer or Partner: \_\_\_\_\_

Name & Mailing Address of Organization: \_\_\_\_\_

Name & Mailing Address of Owner: \_\_\_\_\_

Full particulars in each instance: \_\_\_\_\_

D. Has firm asked to be relieved from a bid submitted by it to a public awarding authority during the past ten years?  Yes  No

If yes, state:

Date: \_\_\_\_\_ Owner: \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Full particulars in each instance: \_\_\_\_\_

**BONDING HISTORY**

A. Names, addresses and telephone numbers of all bonding companies that generally execute bid and surety bonds for your firm:

Company Name	Address	Telephone

Names and addresses of all bonding companies other than those listed in A above which have written bid and surety bonds for your firm during the last five years:

B. Has any bonding company ever taken over a contract, or made any payments, because of firm's failure to carry out a contract?       Yes     No

If yes, state:

Date: \_\_\_\_\_ Name of Bonding Company: \_\_\_\_\_

Bonding Company's Mailing Address: \_\_\_\_\_

Full particulars in each instance: \_\_\_\_\_

**CONTRACTOR'S FINANCIAL STATEMENT**

A. Itemize your current assets as of latest balance sheet date and attach. List date.  
**(Include a copy of the balance sheet.)**

B. Itemize your current liabilities as of latest balance sheet date and attach. List date.

C. Who prepared such balance sheet? \_\_\_\_\_

D. Are any of your assets assigned?       Yes     No

If so, which are assigned? \_\_\_\_\_

For what purpose are they assigned? \_\_\_\_\_

**DATA**

A. Are you familiar with the provisions of the form of contract used by the City of Kenosha?  
 Yes       No

B. With its terms and conditions? \_\_\_\_\_ Yes       No

C. With its standard specifications? \_\_\_\_\_ Yes       No

D. With the regulations of the City of Kenosha relating to bidding and awarding of contracts?  
 Yes       No

**COMPLIANCE WITH SECTION 5.001 OF THE CODE OF GENERAL ORDINANCES FOR THE CITY OF KENOSHA REGARDING PROTECTION IN PUBLIC BIDDING**

Contractors are not allowed to bid on projects in the City of Kenosha if any of the below questions are answered "No" unless the requirements of Subsection C and D of Section 5.001 of the Code of General Ordinances for the City of Kenosha regarding Protection in Public Bidding are waived in the Notice to Contractors.

- A. Contractor maintains a permanent place of business?      \_\_\_\_\_ Yes      \_\_\_\_\_No
- B. Contractor is authorized to do business in the State of Wisconsin?      \_\_\_\_ Yes      \_\_\_\_\_No
- C. Contractor, or agent, partner, employee or officer of the contractor, is not debarred, suspended, proposed for debarment or declared ineligible from contractor with any unit of federal, state, or local government?  
\_\_\_\_\_ Yes      \_\_\_\_\_No
- D. Contractor is in compliance with provisions of Subchapter VI of Chapter 21, Title 42 of the United States Code and Federal Executive Order No. 11246 and any amendments to them?  
\_\_\_\_\_ Yes      \_\_\_\_\_No
- E. Contractor has general liability, workers' compensation and automobile insurance at levels sufficient to protect the City of Kenosha and as required per Contract?      \_\_\_\_ Yes      \_\_\_\_\_No
- F. Contractor participates in a Class A Apprenticeship Program?      \_\_\_\_\_ Yes      \_\_\_\_\_No

A Class A Apprenticeship Program is defined as an apprenticeship program that is currently approved by the U.S. Department of Labor or a state apprenticeship agency and has graduated apprentices to journeyman status for three (3) years. In addition, a new apprenticeship program that has been registered with the federal or state government with the last three (3) years will be considered a Class A Apprenticeship Program, provided that such new program graduates apprentices to journeyman status within the indenture period.

- G. Contractor has a written substance abuse prevention program meeting the requirements of Wisconsin Statute §103.503?      \_\_\_\_\_ Yes      \_\_\_\_\_No
- H. Employees who will perform work on the project are properly classified as employees or independent contractors under all applicable state and federal laws?      \_\_\_\_\_ Yes      \_\_\_\_\_No
- I. Contractor has not been the subject of any investigation, order or judgement from any state or federal agency or court concerning any employment practice, including but not limited to, classification of employees, unemployment insurance, or discrimination?      \_\_\_\_ Yes      \_\_\_\_\_No

If Contractor has been subject of any investigation, order or judgement from any state or federal agency or court concerning an employment practice, the contractor must provide copies of the investigation, order or judgement.

- J. Contractor's employees who will perform work on the project are:
  - a. Covered under a current workers' compensation policy; and      \_\_\_\_\_ Yes      \_\_\_\_\_No
  - b. Properly classified under such policy      \_\_\_\_ Yes      \_\_\_\_No
- K. Contractor's employees who will perform work on the project have the health insurance coverage required by the federal Affordable Care Act?      \_\_\_\_\_ Yes      \_\_\_\_\_No
- L. Contractor possess all applicable professional and trade licenses required for performing the public works?      \_\_\_\_ Yes      \_\_\_\_\_No



- M. Contractor has adequate financial resources to complete the public works contract, as well as all other work the bidder is presently under contract to complete?     Yes     No
- N. Contractor is bondable for the terms of the proposed public works contract?     Yes  No
- O. Contractor has a record of satisfactorily completing at least five projects of similar size and complexity within the last five years?     Yes     No
- P. Contractor has, and diligently maintains, a written safety program?     Yes     No
- Q. Contractor has not received a serious, willful or repeated violation from OSHA in the last ten years?  
 Yes     No

**AFFIDAVIT**

STATE OF \_\_\_\_\_ )  
 ) SS.  
COUNTY OF \_\_\_\_\_ )

\_\_\_\_\_, being duly sworn, deposes and says that he/she is the  
(Print Officer/Owner Name)

\_\_\_\_\_ of \_\_\_\_\_  
(Print Title) (Name of Firm)

and that the answers to the foregoing questions and all statements therein contained are true and correct, and that any owner, bonding company, or other agency, herein named is hereby authorized to supply the municipality, City of Kenosha, with any information deemed necessary to verify this statement.

\_\_\_\_\_  
(Signature of Officer/Owner)

Subscribed and sworn before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year

Notary Public: \_\_\_\_\_

Print Name: \_\_\_\_\_

County: \_\_\_\_\_ State: \_\_\_\_\_

My commission expires: \_\_\_\_\_