



Subcontractor Prequalification Form

Thank you for your interest in submitting bids to Wayne Dowhower Construction, Inc.

Please send your completed form and attachments to:

Wayne Dowhower Construction, Inc.

1500 East 6th Street

North Platte, NE 69101

Phone: 308-532-9388

Fax: 308-532-9389

Email: wdowhower@dowhowerconst.com

Please resubmit this information on an annual basis to keep your information current with Wayne Dowhower Construction, Inc.

Company Information

Company Name: _____

Address: _____

City, State, Zip: _____

Estimating Contact & Title: _____

Phone: _____ Fax: _____ Cell: _____

Email Address: _____ Website: _____

Please Select All that Apply:

- | | | |
|--|---|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Partnership | <input type="checkbox"/> Sole Proprietorship |
| <input type="checkbox"/> Subcontractor | <input type="checkbox"/> Supplier | <input type="checkbox"/> SBE <input type="checkbox"/> DBE |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Union Affiliation: _____ | |

Years in business under the current company name: _____

Names of company officers, principles, partners or owners (please attach resumes):

Federal ID # _____

State of Incorporation: _____

Present # of Office Personnel: _____

Field Personnel: _____

For Wayne Dowhower Construction use only:

- | | | |
|---|---|-----------------|
| <input type="checkbox"/> Estimator | <input type="checkbox"/> Database entry | Comments: _____ |
| <input type="checkbox"/> Approved _____ | <input type="checkbox"/> Bid Fax _____ | |

Project Information

Is there a project we are currently bidding for which you would like to be considered?

Type and size of project for which you would like to submit bids (please select all that apply):

- Commercial Office or Banking Public Works or Corrections
- Education Retail or Grocery
- Hotel or Theater Site Development
- Industrial or Manufacturing Residential
- Medical

Please list the specifications section (i.e.: 16000 Electrical, 230000 HVAC. Etc.) you provide:

Type and percentage of work you subcontract to others:

Has your company ever defaulted on or failed to complete a project? Yes No
If yes, please explain on a separate sheet.

Legal Status

Within the last five years has your current firm or any predecessor organization been involved in any litigation, arbitration, or legal dispute with an owner, architect, or general contractor?

Within the last five years has your current firm or any predecessor organization had any judgments made against your firm? _____

If you answered yes to either question, please explain on a separate sheet.

SAFETY

Does your firm have a company wide safety program? _____

What is your current Mod Rating? _____

CURRENT PROJECTS

Please attach a list of projects completed in the last five years, including contract amount, completion date, architect name, general contractor name, project manager and phone number.

REFERENCES

Please attach a list of projects completed in the last five years, including contract amount, completion date, architect name, general contractor name, project manager and phone number.

Within the last five years has your current firm, predecessor organization, or any principal in the firm filed for bankruptcy? _____

Bank Reference: _____

Address: _____

City, State, Zip: _____

Phone: _____ Contact: _____

SUBCONTRACT AGREEMENT

Wayne Dowhower Construction, Inc. has a standard subcontract agreement which is required to be used on all projects. By bidding projects and submitting proposals with Wayne Dowhower Construction, Inc. we hereby agree to execute the standard subcontract agreement and comply with its term and conditions.

INSURANCE BONDING

Bonding Agent: _____

Address: _____

City, State, Zip: _____

Phone: _____ Contact: _____

Please attach a sample certificate of insurance.

These are the minimum insurance requirements in our standard subcontract agreement and by bidding projects with Wayne Dowhower Construction, Inc. we hereby agree to comply with these requirements. These requirements are subject to change and may be different in the specifications provided for each project. If higher limits are required by an Owner, those limits will be complied with. Waiver of Subrogation should apply to each line of insurance. Please contact your insurance provider and have Certificate requirements updated and forwarded to Wayne Dowhower Construction, Inc.

Workers' Compensation

Each Accident.....\$500,000

Disease - Each Employee..... \$500,000

Disease – Policy Limit..... \$500,000

General Liability (with aggregate limits per project)

Each Occurrence.....	\$1,000,000
General Aggregate.....	\$2,000,000
Automotive Liability	
Combined Single Limit (per occurrence)	\$1,000,000
Umbrella Liability.....	\$1,000,000

The above requirements will need to be met prior to any payments being processed or released. Thank you for your cooperation and prompt attention to this matter.

Nebraska Contractor Registration Information

The Nebraska Contractor Registration Act requires contractors and subcontractors doing business in Nebraska to register with the Nebraska Department of Labor.

All contractors with one or more employees must provide a current Workers' Compensation Certificate of Insurance (ACORD 25) with the Department of Labor listed as the certificate holder. Each contractor is responsible for making sure an updated Certificate of Insurance is on file with the Department of Labor. Any contractor whose records indicate their coverage has expired will be removed from the list of registered contractors until an updated certificate is received from the contractor's insurance agency.

The ACORD 25 certificate can be faxed to 402-471-5039, emailed to ndol.contractorregistration@nebraska.gov or mailed to Nebraska Department of Labor, Labor Standards, 550 S. 16th Street, Lincoln, NE 68509.

NEW EMPLOYEE WORK ELIGIBILITY STATUS

Your company, for purposes of this section, herein referred to as "Sub Contractor", agrees to use a federal immigration verification system to determine the work eligibility status of new employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the illegal immigration Reform and Immigrant Responsibility Act of 1996. 8 U.S.C 1324a, known as E-Verify Program, or an equivalent federal program designated by the United States Department of homeland Security or other federal agency authorized to verify the work eligibility status of a newly hired employee.

The undersigned duly authorized representative of the Sub contractor, by signing this agreement hereby attests to the truth of the following certifications, and agrees as follows:

Neb.Rev.Stat. § 4-114. I certify compliance with the provisions of Section 4-114 and, hereby certify that this Sub contractor shall register with and use a federal immigration verification system to determin the work eligibility status of new employees physically performing services

within the State of Nebraska. I agree as a Sub contractor to use this verification process. If the Sub Contractor is a corporation, individual, or sole proprietorship, the following applies:

1. The Sub Contractor must complete the United States Citizenship Attestation form. (Available on the Department of Roads website at <http://www.nebraskatrasportation.org/projdev/docs/save/dr289.pdf>)
2. If the Sub Contractor indicates on such attestation form that he or she is a qualified alien, the Sub Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Sub Contractor lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.
3. The Sub Contractor understands and agrees that lawful presence in the United States is required and the Sub Contractor may be disqualified or the Subcontract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. § 4-108.

SIGNATURE

I declare that the foregoing is true and correct to the best of my knowledge and belief. I authorize Wayne Dowhower Construction, Inc. to inquire, investigate and confirm the information provided.

Authorized Signing Officer

Date

Printed Name

Title