

# Bidders Proof of Responsibility

All bidders on public works contracts shall provide proof of responsibility in accordance with section 66.0901 (2), Wisconsin statutes. **This Proof of Responsibility shall expire on December 31, 2025**.

The contents of this questionnaire shall be confidential for the exclusive use of the contracting agency and shall not be made public except by written permission of the prospective bidder.



# **Bidders Proof of Responsibility**

All bidders on public works contracts shall provide proof of responsibility in accordance with section 66.0901 (2), Wisconsin statutes.

2828 Allouez Ave., Bellevue, WI 54311 | p. (920) 468-5225

Updated: 12/4/2023

#### **IDENTIFICATION**

A.	Official Firm Name:			
В.	Phone:	Fax:		
Em	ail:			
C.	Address:			
	Address:		РО Вох	
	City	State	Zip	
D.	Number of years in business under present firm name:			
E.	Please check one of the following:			
	Corporation Co-Partnership	Individual		
Fed	leral Tax Identification Number:			
F.	Principal Individuals:			
г.	If Corporation, answer below	I <u>f <b>Co-Partnership</b>,</u> α	nswer below	
	President:	Name of Partner:		
	Vice President:	Name of Partner:		
	Secretary:	If a <b>Sole Trader</b> , ans	swer below	
	Treasurer:	Name of Sole Trade	r:	
G.	If a Corporation:			
	When incorporated:		In what State:	

H. Class of work in which firm is seeking qualifications (check below):

STREET UTILITY & SITE CONSTRUCTION	Building Construction
☐ Bituminous street construction (prime contractor) ☐ Bituminous paving	☐ General building construction  (new construction, renovations or remodeling)  ☐ \$0 - \$100,000  ☐ \$100,000 - \$250,000
Bridge construction & repairs	Over \$250,000
\$0 - \$250,000	
\$250,000 - \$500,000	Specific Categories of Building Construction
Over \$500,000	Asbestos abatement
☐ Bridge painting	
	☐ Building demolition
Concrete street construction (prime contractor)	□ Flootrical
☐ Concrete paving	Electrical
	☐ Elevator
Concrete pavement repairs	
☐ Inint conline	Fire protection
Joint sealing	HVAC
Landscaping	
	Painting
Mudjacking	☐ Plumbing
☐ Pile driving	
	Roofing
Pump houses & life stations	
Reinforced concrete construction	OTHER MISCELLANEOUS CATEGORIES
(such as foundations, storm drainage	_
structures, retaining walls)	
	П
Roadway grading & graveling	
Sanitary & storm sewer construction	
Lateral construction only	
_	Ш
Sidewalk construction	
Site excavation & grading & graveling	
_ site executation a ground a gravening	
Street lighting	
Mater main construction	
☐ Water main construction	



#### **EXPERIENCE**

A. What is the construction experience of the principal individuals, including superintendents and/or foreman, of your present organization?

Name	Present Position	Years of Construction Experience	Magnitude & Type of Work	In What Capacity
rame	Tresent rosition	Experience	Type of Work	in terrial capacity
	I	1		ı
Average number of employees of	during the last 12 months:			
Office:	Skilled:		Unskilled:	

#### B. **CONSTRUCTION EXPERIENCE**

List below construction work performed by you on any projects pertinent to the type of work for which prequalification is desired. Under "Capacity", state whether it was as a Contractor, Engineer, Superintendent, Foreman, etc.

Year	Type of Work	Capacity	Cost of Work

#### C. WORK ON HAND

List below the present contracts held by you.

Date Awarded	Type of Work	Percent Completed	Anticipated Completion Date	Cost of Work



### **EQUIPMENT**

A. List below <u>major pieces of equipment</u> owned & available when needed for proposed work.

<u>ALL COLUMNS MUST BE COMPLETED.</u> ATTACH ADDITIONAL SHEETS IF NECESSARY. ADDITIONAL SHEETS MUST CONTAIN SAME INFORMATION LISTED ON THIS PAGE.

# of Items	Description: Size, Capacity, etc.	Original Cost	Accumulated Depreciation	Present Book Value	Years of Service
reems	Description offer, capacity, etc.	original cost	Depresiation	Value	Jei vide



# **CONTRACTUAL RESPONSIBILITY**

A.	In the last ten years has your firr	m ever failed to complete on-time work awarded to it? Yes No				
	If yes, please answer the following:					
	Date:	Owner Name:				
	Owner Current Mailing Address:					
	Full particulars in each instance:					
В.	In the last ten years has any offic contract handled in their own na	cer or partner or firm ever failed to complete on time a construction ame?				
	If yes, please answer the follow	ing:				
	Date:	Officer or Partner Name:				
	Owner Name:					
	Owner Current Mailing Address:					
	·					
C.	complete on-time a construction  If yes, please answer the follow					
		du				
		dress:				
	Full particulars in each instance:					
D.		ed to be relieved from a bid submitted by it to a public awarding authority? $\ $ Yes $\ $ No				
	If yes, please answer the follow	ing:				
	Date:	Claimant Name:				
	Owner Current Mailing Address:					
	Full particulars in each instance:					



E.	Has firm ever been charged with If yes, please answer the follow	or convicted of a violation of any wage schedule?  ing:	Yes	No
	Date:	Claimant Name:		
	Claimant Current Mailing Addre	ss:		
F.	· ·	or convicted of a violation of any wage schedule?	Yes	□No
	If yes, please answer the follow			
		Claimant Name:		
		SS:		
	Full particulars in each instance:			



# **BONDING COMPANY INFORMATION**

Contact information of bonding of	ompanies which generally execute blu o		
Name:		Phone Number:	
Mailing Address:			
Name:		Phone Number:	
Name:		Phone Number:	
	ng companies, other than those listed a		
Name:		Phone Number:	
Mailing Address:			
Name:		Phone Number:	
	aken over a contract or made any paym		
failure to carry out a contract?  If yes, please answer the followi  Date:  Bonding Company's Mailing Adda  Full particulars in each instance:  Date:  Bonding Company's Mailing Adda	Yes No  ng:  Name of Bonding Company:  ress:		
failure to carry out a contract?  If yes, please answer the followi Date: Bonding Company's Mailing Addi Full particulars in each instance:  Date: Bonding Company's Mailing Addi Full particulars in each instance:  Date: Bonding Company's Mailing Addi Date: Bonding Company's Mailing Addi	Name of Bonding Company:  Name of Bonding Company:  Pess:  Name of Bonding Company:  Pess:		
failure to carry out a contract?  If yes, please answer the followi Date: Bonding Company's Mailing Addi Full particulars in each instance:  Date: Bonding Company's Mailing Addi Full particulars in each instance:  Date: Bonding Company's Mailing Addi Date: Bonding Company's Mailing Addi	Name of Bonding Company:  Name of Bonding Company:  Pess:  Name of Bonding Company:  Name of Bonding Company:		

#### **CONTRACTOR'S FINANCIAL STATEMENT**

Conditio	ns at close of business as of	.0
A.	ASSETS	
	Cash	\$
	Accounts Receivable	\$
	Real Estate Equity	ċ
	real Estate Equity	<b>&gt;</b>
	Equipment – Book Value (less depreciation)	\$
	Funiture & Fixtures – Book Value (less depreciation)	\$
		A
	Other Assets	\$
	TOTAL ASSETS	\$
В.	LIABILITIES	
	Accounts, Notes & Interest Payable	\$
	Other Liabilities	\$
	TOTAL MADINIFIES	A
	TOTAL LIABILITIES	\$
	NET WORTH (Total Assets – Total Liabilities)	\$
C.	Who prepared such balance sheet?	
5		
D.	Are any of your assets assigned; if so, which are assigned?	
E.	For what purpose are they assigned?	
-	1 1 27 27 20 20 20 20 20 20 20 20 20 20 20 20 20	



# DATA

Are you familiar with the provisi	ons of the form of contact used b	by the Village of Bellevue?	
With its terms and conditions?			
With its specifications?			
With the regulations of the Villa	ge of Bellevue relating to bidding	and awarding of contracts?	
List at least three (3) references NUMBERS and DOLLAR VOLUM	· ·	vork. GIVE COMPLETE NAMES, TITLES,	, ADDRESSES, PHONE
REFERENCE ONE(1)	E OF WORK HAVOLALD.		
Company Name:		\$ Volume of Work Involved:	
			Zip:
REFERENCE TWO (2)			
Company Name:		\$ Volume of Work Involved:	
Contact Name:			
Phone:	Email:		
Street Address:			
City:		State:	Zip:
REFERENCE THREE (3)			
Company Name:		\$ Volume of Work Involved:	
Contact Name:			
Phone:	Email:		
Street Address:			
Citv:		State:	Zip:



#### **AFFIDAVIT**

COUNTY OF:		_	
		being duly s	worn, deposes and says that he/she is
(name of officer/owner)		ocilig daily o	worm, deposes and says that he sine is
the	of		
(title)	(no	ame of firm/company)	
and that the answers to the foregoing ques	tions and all st	tatements therein contained are	true and correct and that any owner,
oonding company or other agency, herein r	named is herek	by authorized to supply the muni	cipality, Village of Bellevue, with any
nformation deemed necessary to verify thi	s statement.		
	Signat	ure of Officer/Owner:	
Subscribed and sworn before me this	day of	,	20
		Notary Public Signature	
		, -	
		County	State
		My Commission Expires:	
PROVED BY:			

