REVISED

NEW HANOVER COUNTY

OGDEN SKATEPARK

SPECIALTY PRE-QUALIFICATION PACKET

This project is being readvertised due to the small number of prequalification packages received in response to the county's solicitation for skatepark contractors. The minimum number of public concrete skate park facilities with a minimum skating area of 10,000 square feet completed in the last ten (10) years is been reduced from ten (10) to eight (8). The revised due date for prequalification packages is June 19, 2015.

To be considered a qualified and responsible Bidder, the Bidder shall provide documentation establishing that the Bidder and/or subcontractor has satisfied the experience requirements listed below:

1. The skatepark specialty contractor, or subcontractor, must be EXCLUSIVELYENGAGED IN THE SPECIALIZED FIELD OF CAST-IN-PLACE CONRETE SKATEPARK CONSTRUCTION.

2. Installation of storm drainage systems in conjunction with skatepark components.

3. Shaping of earthwork to specified radius.

4. Experience creating the following in facilities specifically intended for skateboarding: cast in place concave and convex shaped concrete elements containing compound radius curves that must be precisely shaped in order to function as intended.

5. Experience in application of vertical and horizontal shotcrete work, including horizontal and vertical radius transitions that include compound radius curves and blends, formed concrete, grinding rails, and associated concrete reinforcement as needed.

6. The Contractor shall be skilled with the installation of steel coping edges, smooth flowing seamless transition areas, and smooth trowel concrete finish work.

7. Layout, fabrication, and construction of the steel coping.

8. Installation of concrete flatwork between bowled areas.

DOCUMENTATION OF PROJECT EXPERIENCE

The following forms shall be completed by each bidding skatepark specialty contractor and/or subcontractor.

- Specialty contractor prequalification statement
- Specialty contractor information
- Current skate park project experience
- ACI Shotcrete Nozzleman Certification
- Head Concrete Finisher Resume

SPECIALTY CONTRACTOR PREQUALIFICATION STATEMENT

The intent of the OWNER is to pre-qualify skate park builders (PRIME SUBMITTING FIRM OR SPECIALTY CONTRACTOR) for this project who must have prior specialty skate park construction experience. This prequalification is required for specialty skate park items only. Other work normally performed by a general contractor (site grading, drainage, paving, concrete flatwork, etc.) that is considered site work does not require prequalification. This statement will determine the specialty contractor's qualification for this project. In addition to skate park construction experience, firms must also demonstrate an ability to meet minimum guidelines as set in the SPECIAL PROVISIONS of the Contract Documents. Submission of this questionnaire does not constitute qualification. Qualification may be denied for any reason the Owner deems necessary for the successful completion of the project.

SPECIALTY CONTRACTOR INFORMATION:

COMPANY NAME (Full Legal Name) _____

_____
MAILING ADDRESS

_____
CONTACT PERSON

_____
PHONE NUMBER

_____
FEDERAL TAX ID NO.

_____
APPLICATION SUBMITTED BY:

_____
(Name) (Title)

SPECIALTY CONTRACTOR INFORMATION

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

If the Specialty Contractor is a corporation, please provide the following:

State & Date of Incorporation:_____

Contractor License # and Classification: _____

Secretary / Treasurer's Name:_____
If the Specialty Contractor is a partnership, please provide the following:

State & Date of Partnership _____

Contractor License # _____

General Partner(s) Names _____

If the Specialty Contractor is sole proprietor, or individually owned, please provide the following:

State, & Date of Ownership _____

Primary Owner's Name& License **#**_____
Please Check

YES NO

☐ ☐ 1. Have you ever operated under any other names in the past?

If so, name of organization _____

☐ ☐ 2. Has any owner, officer or partner of your organization ever been an owner, officer or partner of this or any other organization that failed to complete a construction contract or been charged liquidated damages? If yes, please provide additional information on a separate sheet.

☐ ☐ 3. Has your organization ever been denied, debarred, or suspended by a government agency with regard to licensing or award of contracts? If yes, please provide additional information on a separate sheet.

☐ ☐ 4. Does the organization owe back taxes to the IRS? If so, how much?_____ If yes, please provide additional information on a separate sheet.

☐ ☐ 5. Has your organization ever failed to qualify as a Specialty Contractor of any project? If yes, please provide additional information on a separate sheet.

6. Does your organization meet the following minimum requirements?

a. The successful Specialty Contractor must be able to provide valid and in good standing the following insurance coverage for the entire duration of the project, naming your firm and the Owner as additionally insured. A sample certificate with the following minimum coverage's must be submitted with this statement:

Commercial General Liability $1,000,000 Each Occurrence / $2,000,000 General Aggregate, Automobile Liability Insurance $1,000,000 Minimum, Workman's Compensation Insurance State Minimum Coverage as
Required By Law

Certificate of Insurance Attached?
YES NO
☐ ☐

b. The selected contractor shall have the ability to provide a Bid Bond at the time of the project submission. Also, Performance Material & Payments Bonds in the total amount of the project within 10 days of the award of contract. Please provide a letter of reference from your surety company (not an agent or broker) stating your good standing ability to bond a project of this scope.

Letter from Surety Attached?
YES NO
☐ ☐

c. Attach 3 Letters of Reference from a past public agency giving recommendation of your organization's ability to perform quality skate park construction.

Letters of Reference Attached?
YES NO
☐ ☐

d. The selected contractor shall be required to execute the contract (including providing bonds) within 15 calendar days of award. Mobilization shall occur within 10 calendar days after execution. Can your organization comply with this requirement?
YES NO
☐ ☐

CURRENT SKATE PARK PROJECT EXPERIENCE

Please provide a list of **all** concrete skate park construction projects that are **in progress** by your organization or which are complete but have not been open and in operation for a period of at least one year. The projects listed must have a construction agreement.

PROJECT INFORMATION REQUIRED – Please provide all information requested & utilize additional sheets as necessary.

(1) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(2) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(3) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____

PAST COMPLETED SKATE PARK PROJECT EXPERIENCE

The prime submitting firm or its specialty contractor, in order to be pre-qualified for this project must have completed **(8)** public concrete skate park facilities with a minimum skating area of **10,000 square feet** in the last **10 years. 3 must have been completed within the past 5 years, and 5 must have been opened and operating for at least 5 years.**
These parks must be open and in good operating condition for at least one year. Only those projects where the complete construction of the facility has been the sole responsibility of your firm can be included. Please provide detailed project information and verifiable references for each of these qualifying skate park facilities. If the prime submitting firm will not be performing the specialty items listed on the plans but will have these items constructed by a specialty subcontractor, only the subcontractor will be required to be pre-qualified for these specialty bid items.
If in the best interest of the County, exceptions may be made to these requirements.

PROJECT INFORMATION REQUIRED – Please provide all information requested and utilize additional sheets as necessary.

PROJECT PHOTO REQUIRED – Please provide at least one (1) photo of each completed construction.

(1) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(2) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____

Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(3) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(4) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(5) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(6) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(7) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(8) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

PROJECT EXPERIENCE IN SIMILAR WINTER CLIMATES

The prime submitting firm or its specialty contractor, in order to be pre-qualified for this project must have completed **(8)** public concrete skate park facilities with a minimum skating area of **10,000 square feet** in the last **10 years** with similar winter climates to this project. **3 of these must have been opened and operating for at least 5 years.** These parks must be open and in good operating condition for at least one year. Only those projects where the complete construction of the facility has been the sole responsibility of your firm can be included. Please provide detailed project information and verifiable references for each of these qualifying skate park facilities. If the prime submitting firm will not be performing the specialty items listed on the plans but will have these items constructed by a specialty subcontractor, only the subcontractor will be required to be pre-qualified for these specialty bid items.

If in the best interest of the County, exceptions may be made to these requirements.

PROJECT INFORMATION REQUIRED – Please provide all information requested and utilize additional sheets as necessary.

PROJECT PHOTO REQUIRED – Please provide at least one (1) photo of each completed construction.

(1) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(2) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(3) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(4) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(5) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(6) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(7) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

(8) Name and Location of Project_____
Owner's Name_____
Address_____
Phone Number_____
Email _____
Project Size
(Skating area only)_____sq ft Construction Value $_____ % Complete_____
Completion Date_____
Designer and Architect _____
Project Description and Scope of Work_____
_____
_____

ACI SHOTCRETE NOZZLEMAN CERTIFICATION

The Contractor's proposed Shotcrete Nozzle Operator(s) must be qualified under the ACI Shotcrete Nozzleman Certification Program and have at least (5) years of experience in shotcrete as applied to Skateparks. Contractors must provide proof of certification. Contractors must provide (5) project references (skateparks only) that the Shotcrete Nozzle Operator(s) was directly involved with applying shotcrete. Only qualified and approved Shotcrete Nozzle Operator(s) are permitted to perform shotcrete work on this project. Qualified and approved Shotcrete Nozzle Operator(s) must be onsite during all major shotcrete work. The Contract Administrator reserves the right to reject any contractors with Shotcrete Nozzle Operator(s) that do not meet the required skills and experience criteria.

Project #1 _____

ACI Certified Shotcrete Nozzleman _____

Reference name & contact number _____

_____

Project #2 _____

ACI Certified Shotcrete Nozzleman _____

Reference name & contact number _____

_____

Project #3 _____

ACI Certified Shotcrete Nozzleman _____

Reference name & contact number _____

_____

Project 4 _____

ACI Certified Shotcrete Nozzleman _____

Reference name & contact number _____

_____

Project 5 _____

ACI Certified Shotcrete Nozzleman _____

Reference name & contact number _____

_____

HEAD CONCRETE FINISHER

The Contractor's proposed Head Concrete Finisher must have at least (5) years of experience in concrete finishing as applied to concrete skateparks. Contractors must be directly involved with Finishing Skatepark Concrete in a lead role. Only qualified and approved Concrete Finishers are permitted to perform finishing work on this project. The Head Concrete Finisher must be onsite during all major finishing work. The Contract Administrator reserves the right to reject any contractors with a Head Concrete Finisher that does not meet the required skills and experience criteria.

Project #1 _____

Head Concrete Finisher _____

Reference name & contact number _____

_____

Project #2 _____

Head Concrete Finisher _____

Reference name & contact number _____

_____

Project #3 _____

Head Concrete Finisher _____

Reference name & contact number _____

_____

Project 4 _____

Head Concrete Finisher _____

Reference name & contact number _____

_____

Project 5 _____

Head Concrete Finisher _____

Reference name & contact number _____

_____

ADDITIONAL QUESTIONNAIRE & REQUIREMENTS

Please accurately answer & provide for all the information requested utilizing a separate sheet as necessary.

Please Check
YES NO

☐ ☐ A. Has your firm excavated a below ground skate park structure and prepared it for shotcrete application?

☐ ☐ B. Has your firm placed transitional and radial shotcrete sculptures using approved methods including a smooth trowel finish?

☐ ☐ C. Does your firm possess all the necessary equipment, labor forces, and material suppliers to complete this project per plans and specifications within the given schedule?

☐ ☐ D. Has your firm fabricated, galvanized, and installed rolled/bent ornamental metal coping?

☐ ☐ E. Has your firm installed standard pool coping?

F. Has your firm constructed custom concrete skate park features like:
(mark those that apply)

☐ Stamped Brick ☐ Integral Color ☐ Sculptural artistic elements

Please Check
YES NO

☐ ☐ G. Has your firm performed any concrete skate park construction with workmanship issues, defects, or warranty problems, including having to repair or replace portions of work?

☐ ☐ H. Can your firm provide shop drawings and submittals for all of the required and specified materials on this project?

SCHEDULE & SKATE PARK MANAGEMENT EXPERIENCE

1. Please provide a schedule identifying key tasks and milestones your project team has identified to demonstrate your ability to coordinate the entire job. This will be for evaluation purposes only and not intended as a working schedule.

2. Please provide a detailed list, and resumes, identifying your firm's key personnel and management team that is responsible for the aforementioned skate park experience. Please include any owners, officers, managers, construction supervisors, or any other employee with the identified experience for the listed qualifying projects. Show that the individual directly responsible for the construction management of these projects will be the same individual utilized on this project and responsible for weekly reports, site meetings and quality control inspections. Substitutions of key personnel will not be allowed without written agreement from the Owner.

This document must be notarized. This pre-qualification statement will not be considered responsive or valid unless it is completed in its entirety and signed, dated, and notarized.

The Owner reserves the right to disqualify any firm for any reason deemed necessary for the successful completion of this project.

The SPECIALTY CONTRACTOR (undersigned) hereby certifies that all of the information contained in this document is true and correct to the best of their knowledge.

I declare under penalty of perjury that the foregoing is correct.

Legal Business Name of Submitting Individual, Partnership, Limited Liability Company, or Corporation _____

Contractors' License Number_____

Printed Name of Specialty contractor or Authorized Agent_____

Signature of Specialty contractor or Authorized Agent_____

ALL SIGNATURES MUSTBE WITNESSED BY NOTARY
(ATTACH JURAT)