

This Proof of Responsibility is required pursuant to Section 66.0901 of the Wisconsin Statutes and Section 2-400 of the City of Sheboygan Municipal Code.

This form must be filed with the Engineering Division not less than five (5) days prior to the time set for opening of bids. Completed responses will be evaluated to determine whether the prospective bidder is qualified to submit a bid. The City reserves the right if it is not satisfied with the sufficiency of the completed response, to request additional information.

Prequalification shall be valid for one year from the approval date. The Director of Public Works may suspend or revoke prequalification status for good cause. Such decision shall be made in writing and the contractor shall be provided timely notice and an opportunity to be heard by the Director.

It shall be the obligation of the contractor to timely renew its prequalification and to report information regarding any material changes to its business or operations that are relevant to its prequalification application, including information that would affect its ability to make the certifications required by this ordinance. Any such information must be reported within fifteen (15) days of the contractor's knowledge of the information. Failure to report information may result in suspension or revocation of the contractor's prequalification, debarment from City contracts for a period of up to three years and other sanctions available under applicable law.

Prequalification Statement

l.	Name of Bidder:					
		☐ Corporation	☐ Partnership	□ Individual		
2.	Bidder's Address:					
	City			State/Zip		
	Telephone:		Fax:			
	Email:					
3.	When Organized:		When Incorporat	ed:		
4.	. Are you authorized to do business in the State of Wisconsin? \qed Yes \qed No					
5.	How many years have you been engaged in the contracting business under the present firm name?					
6.	Contracts on hand. Attach a list of present contracts, including a schedule as to estimated completion date and gross amount of each contract.:					
7.	. General character of work performed by your firm.					
•	(If additional space is	required, file separat	e sheet with details.)			

Internal Use Only: Approved: _____

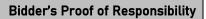


- 8. Major Equipment. Attach a list of major Equipment owned.
- 9. Completed Contracts. Attach a list of contracts which have been awarded to you in the last three years. The list shall include: Name, Owner, Amount, Engineer/Architect
- 10. Show Background and Experiences of the principal members of your personnel including the officers.

Name	Years of Position Held or Office Held Experience		Magnitude and Type of Work	Capacity

	(If additional space is required, file separate sheet with details.)		
11.	Have you ever failed to complete any work awarded to you?	□ Yes If yes, fil details.	□ No le separate sheet with
12.	Have you ever defaulted on a contract?	□ Yes If yes, fil details.	□ No le separate sheet with
13.	Are any of the above-listed principal members debarred, suspended, proposed for debarment or declared ineligible from contracting with any unit of federal, state or local government?	□ Yes If yes, fi details.	□ No ile separate sheet with
14.	Have you ever been the subject of any investigation, order or judgment from any state or federal agency or court concerning an employment practice?		□ No Sttach a copy of the Station, order or judgment
15.	Within the last 5 years, have you been found by a court or government agency to be in violation of any law relating to your contracting business including, but not limited to environmental laws, bid-rigging or price-fixing, antitrust or tax laws, where the penalty for such violation resulted in a fine, damages or other penalty equal to or greater than \$10,000?	□ Yes If Yes, a order.	□ No httach a copy of the final
16.	Are you in compliance with 42 U.S.C. 2000e (Federal Equal Opportunity Employment)?	□ Yes	□ No
17.	Are you in compliance with 40 U.S.C. §§ 3141-3148 (Federal Davis Bacon Act)?	□ Yes	□ No
18.	Do you participate in a Registered Apprenticeship Program validated by the U.S. Dept. of Labor or the WI Dept. of Workforce Development?	□ Yes	□ No

CITY OF SHEBOYGAN PUBLIC WORKS				Bidder's	Proof of Responsibility	
19. Do you have a written substance abuse prevention program that ☐ Yes ☐ No meets the requirements of Wis. Stat. §103.503?					□ No	
20. Do you have a written s	20. Do you have a written safety plan?			□ Yes	□ No	
21. Have you received a serious, willful or repeated violation from in the last 10 years?			n from OSHA	☐ Yes If yes, fil details.	□ No ie separate sheet with	
Contractor's Financial State	<u>ment</u>					
22. The latest completed financial statement prepared by a qualified or independent accountant or accounting firm listing the same requested information below may be attached if it contains the same information requested below.						
Condition at Close	of Business on					
ASSETS						
a. Cash			\$			
b. Acco	unts Receivable		\$			
c. Real	Estate Equity		\$			
d. Mate	rials in Stock		\$			
e. Equi _l	oment, Book Value	!	\$			
f. Furn	iture & Fixtures, B	ook Value	\$			
g. Other Assets:			\$			
TOTAL ASSETS: _\$						
LIABILITIES						
h. Acco	ounts, Notes & Inte	erest Payable	\$			
i. Othe	er Liabilities		\$			
TOTAL LIABILITIES			\$			
NET WORTH \$						
23. Credit available. Furnish written evidence, preferably from banks.						
24. Additional information may be submitted if desired						





Affidavit				
STATE OF)				
COUNTY OF)	SS.			
being dul	y sworn, depos	ses and sa	ys that he/she is	the
(Print Officer/Owner Name)				
	of			
(Print Title)		(Name of	Firm)	
and that the answers to the foregoing q correct, and that any owner, bonding co supply the municipality, City of Sheboyg statement.	mpany, or othe	er agency,	herein named is	hereby authorized to
(Signatu	re of Officer/O	wner)		(Date)
Subscribed and sworn before me on this	S	day of	,	
	Day	_ `	Month	Year
		_		Notary Public
		_		
				Print Name
		_		
				County, State
	ı	My commis	sion expires:	_
APPROVED BY:				
Dimental of Dublic Wester ()			Data	
Director of Public Works (or designee)			Date	