



**ROBERTSON**

**COMPANY QUALIFICATION STATEMENT**

*The submitting party certifies that the information provided herein is true and complete.*

Company Name: \_\_\_\_\_

Company Webpage: \_\_\_\_\_

Main Office Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

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

Secondary Contact Name: \_\_\_\_\_

Title: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

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

**1 ORGANIZATION**

1.2 Type of Company (check all that apply)

- Subcontractor (Material and Installation)
- Vendor (Material Only)
- Architect
- Engineer
- Consultant
- Client

1.3 Construction Work Type (check all that apply)

- Multifamily and Residential
- Industrial and Manufacturing
- Medical
- Office
- Education
- Utilities and Treatment
- Retail
- Public
- Highways and Bridges
- Parking Structures
- Sports and Leisure

1.4 Enter the potential contract amount for the scope of work that your company is interested in pursuing (check all that apply)

- \$0 to \$250,000
- \$250,001 to \$500,000
- \$1,000,000 to \$5,000,000
- \$5,000,001 to \$10,000,000
- Above \$10,000,000

1.5 How many years has your organization been in business? \_\_\_\_\_

1.6 How many years has your organization been in business under its present business name? \_\_\_\_\_

1.6.1 Under what other or former names has your organization operated?

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1.7 Company Status

- Corporation
- Individual
- Partnership
- Joint Venture

1.8 If your organization is a corporation, answer the following:

- 1.8.1 Date of incorporation: \_\_\_\_\_
- 1.8.2 State of incorporation: \_\_\_\_\_
- 1.8.3 President's name: \_\_\_\_\_
- 1.8.4 Vice-president's name(s): \_\_\_\_\_
- 1.8.5 Secretary's name: \_\_\_\_\_
- 1.8.6 Treasurer's name: \_\_\_\_\_

1.9 If your organization is a partnership, answer the following:

- 1.9.1 Date of organization: \_\_\_\_\_
- 1.9.2 Type of partnership (if applicable): \_\_\_\_\_
- 1.9.3 Name(s) of general partner(s): \_\_\_\_\_

1.10 If your organization is individually owned, answer the following:

- 1.10.1 Date of organization: \_\_\_\_\_
- 1.10.2 Name of owner: \_\_\_\_\_

1.11 If your organization is a Joint Venture, describe it and name the principals.

**2 LICENSING**

2.2 Select trade categories in which your organization is legally qualified to do business.

2.3 Please select **all** that apply:

**Division 1**

- 01001 General Contractors
- 01002 Owners
- 01003 Public Plan Room
- 01005 Reprographics
- 01010 ISQFT
- 01015 Insurance/Bond Requirements
- 01300 Government Agencies
- 01400 Utilities
- 01510 Temporary Labor
- 01512 Temporary Toilets
- 01522 Mobile Trailers

- 01530 Temp Fences & Barricades
- 01540 Safety Equipment/Supplies
- 01550 Temporary Heat/Ventilation
- 01590 Construction Equipment
- 01592 Mobile Crane
- 01594 Tower Crane
- 01596 Material Hoist
- 01740 Cleaning
- 01742 Dumpsters and Trash Chutes

**Division 2**

- 02001 Site Contractor
- 02016 Blasting and Seismic Services
- 02060 Sand & Stone Suppliers
- 02080 Hazardous Material Abatement
- 02100 Site Remediation
- 02220 Demolition
- 02225 Sawcutting, Concrete/Asphalt Drilling
- 02235 Trucking
- 02240 Dewatering
- 02250 Shoring and Underpinning
- 02360 Soil Treatment
- 02370 Erosion and Sedimentation Control
- 02400 Tunneling, Boring, and Jacking
- 02450 Railroad Work
- 02455 Driven Piles
- 02457 Geopiers
- 02470 Drilled/Augercast Pilings
- 02480 Marine Work
- 02510 Site Domestic Water
- 02520 Wells
- 02530 Sanitary Sewage
- 02552 Gas Piping
- 02620 Subdrainage
- 02630 Storm Drainage
- 02741 Asphalt/Bituminous Pavement
- 02750 Concrete Pavement/Sidewalks
- 02765 Pavement Striping
- 02770 Curbs and Gutters
- 02780 Unit Pavers
- 02782 Stamped Concrete
- 02790 Athletic and Recreational Surfaces

- 02815 Fountains
- 02820 Fences and Gates
- 02830 Retaining Walls
- 02842 Guard Rails
- 02844 Road Appurtenances
- 02850 Prefabricated Bridges
- 02870 Site Furnishings
- 02875 Site and Street Shelters
- 02880 Play Field Equipment & Structures
- 02890 Traffic Signs and Signals
- 02900 Landscaping
- 02910 Irrigation

**Division 3**

- 03001 Concrete Contractor
- 03010 Ready Mix Concrete
- 03100 Formwork Contractors
- 03120 Formwork Materials
- 03200 Concrete Reinforcement
- 03205 Reinforcement Installation
- 03350 Concrete Finishing
- 03371 Stamped Concrete
- 03445 CastStone
- 03470 Tilt-up Concrete
- 03500 Cementitious Decks/Gypsum Concrete
- 03515 Industrial Concrete Flooring Contractors
- 03520 Lightweight concrete Roof Insulation
- 03600 Grouts
- 03900 Concrete Restoration and Cleaning

**Division 4**

- 04001 Masonry Contractor
- 04210 Masonry Suppliers
- 04400 Stone Contractors
- 04700 Simulated Masonry
- 04900 Masonry Restoration and Cleaning

**Division 5**

- 05120 Structural Steel Suppliers
- 05130 Steel Erection
- 05200 Metal Joist Suppliers
- 05410 Epicore

- 05475 Lightgauge Metal Stud Trusses
- 05500 Metal Fabrications
- 05520 Manufactured Stairs/Railings
- 05560 Metal Castings
- 05600 Hydraulic Fabrications
- 05620 Unistrut
- 05700 Ornamental Metals/Railing
- 05800 Expansion Control
- 05900 Metal Restoration and Cleaning

**Division 6**

- 06060 Wood Materials
- 06070 Wood Siding Materials
- 06110 Wood Framing Subcontractors
- 06120 Structural Panels
- 06130 Timber Construction
- 06180 Glued-Lamination Construction
- 06190 Wood Trusses
- 06400 Architectural Woodwork
- 06410 Manufactured Cabinets

**Division 7**

- 07100 Waterproofing and Sealants
- 07180 Traffic/Pedestrian Coating
- 07210 Building Insulation
- 07218 Sprayed Insulation
- 07240 Exterior Insulation and Finish Systems
- 07300 Shingles, Roof Tiles, and Roof Coverings
- 07410 Metal Roof and Wall Panels
- 07430 Composite Panels
- 07466 Vinyl Siding
- 07500 Membrane/Built Up Roof
- 07600 Flashing and Sheet Metal
- 07700 Roof Specialties and Accessories
- 07810 Applied Fireproofing
- 07840 Firestopping/Firecaulking

**Division 8**

- 08100 Doors/Frames/Hardware
- 08105 Doors and Hardware Installation
- 08120 Aluminum doors and Frames
- 08255 Pre-Hung Wood Doors

- 08270 Sliding Mirror Closet doors
- 08295 Acoustic Doors
- 08300 Shower Doors
- 08305 Blast Resistant Doors
- 08310 Access Doors and Panels
- 08330 Coiling Doors/Grilles/Overhead Doors
- 08355 Folding Fire Doors
- 08460 Automatic Entrance Doors
- 08470 Revolving Entrance Doors
- 08505 Acoustic Windows
- 08520 Metal Windows
- 08550 Wood Windows
- 08600 Skylights
- 08800 Glass Contractors

**Division 9**

- 09195 Plaster/Stucco
- 09232 GFRG Products
- 09250 Drywall
- 09260 Drywall Material Suppliers
- 09300 Tile & Stone
- 09400 Terrazzo
- 09510 Acoustical Ceilings
- 09545 Specialty Ceilings
- 09600 Carpet and Resilient Flooring
- 09620 Specialty Flooring
- 09640 Wood Flooring
- 09670 Fluid Applies/Epoxy Flooring
- 09700 Special Wall Finishes
- 09800 Acoustical Treatment
- 09900 Painting and Wallcovering
- 09967 Intumescent Thin Film Fireproofing

**Division 10**

- 10050 Specialties Installation
- 10100 Visual Display Boards
- 10150 Compartments and Cubicles
- 10170 Toilet Partitions
- 10185 Showers and Dressing Compartments
- 10200 Louvers and Vents
- 10250 Service Walls
- 10260 Wall and Corner Guards

- 10270 Access Flooring
- 10300 Fireplaces and Stoves
- 10350 Flagpoles
- 10400 Signage
- 10450 Pedestrian Control Devices
- 10500 Lockers
- 10520 Fire Protection Specialties
- 10550 Postal Specialties
- 10605 Wire Mesh Partitions
- 10650 Operable Partitions
- 10670 Storage/Wire Shelving
- 10705 Exterior Sun Control Devices
- 10710 Exterior Shutters
- 10730 Awnings and Canopies
- 10750 Telephone Specialties
- 10800 Toilet, Bath and Laundry Accessories

**Division 11**

- 11001 Theater Equipment
- 11010 Maintenance Equipment
- 11015 Window Washing Equipment
- 11020 Security and Vault Equipment
- 11040 Ecclesiastical Equipment
- 11050 Library Equipment
- 11060 Theater and Stage Equipment
- 11100 Mercantile Equipment
- 11110 Laundry Equipment
- 11130 Audio-Visual Equipment
- 11140 Vehicle Service Equipment
- 11144 Fuel Dispensing Equipment
- 11150 Parking Control Equipment
- 11160 Loading Dock Equipment
- 11170 Solid Waste Handling Equipment
- 11200 Water Supply & Treatment Equipment
- 11400 Food Service Equipment
- 11450 Residential Appliances
- 11470 Darkroom Equipment
- 11480 Athletic/Recreation/Therapeutic Equip.
- 11500 Industrial and Process Equipment
- 11550 Moveable Bridge Equipment
- 11580 Office Equipment
- 11600 Laboratory Equipment



- 11700 Medical Equipment
- 11900 Exhibit Equipment

**Division 12**

- 12345 Laboratory Casework
- 12400 Furnishings and Accessories
- 12480 Rugs and Mats
- 12490 Window Treatments
- 12600 Multiple Seating
- 12700 System Furniture

**Division 13**

- 13030 Special Purpose Room
- 13040 Cold Storage Room
- 13050 Saunas and Steam Rooms
- 13080 Sound, Vibration and Seismic Control
- 13090 Radiation Protection
- 13092 Radio Frequency Shielding
- 13100 Lightning Protection
- 13129 Pre-Engineered Buildings
- 13132 Prefabricated Dome Structures
- 13150 Swimming Pools
- 13165 Aquatic Park Facilities
- 13175 Ice Rinks
- 13200 Storage Tanks
- 13205 Underground Storage Tanks
- 13400 Instrumentation
- 13600 Solar and Wind Energy Equipment
- 13850 Low Temp Contractors

**Division 14**

- 14100 Dumbwaiters
- 14200 Elevators/Escalators
- 14400 Lifts
- 14500 Material Handling
- 14560 Chutes
- 14580 Pneumatic Tube Systems
- 14600 Hoists and Cranes

**Division 15**

- 15080 Mechanical Insulation

- 15300 Fire Protection Contractors
- 15365 Halon System Contractors
- 15400 Plumbing Contractors
- 15410 Plumbing Material Suppliers
- 15500 HVAC Contractors
- 15510 HVAC Equipment Suppliers
- 15600 Refrigeration Contractors
- 15900 HVAC Instrumentation and Controls
- 15950 Testing, Adjusting and Balancing

**Division 16**

- 16001 Electrical Contractor
- 16310 Emergency Generators
- 16495 Instrumentation
- 16500 Lighting Suppliers

**Miscellaneous**

- 17001 Communications Contractor
- 20050 Bridge and Road Work
- 20100 Geotechnical Services
- 20105 Civil Engineer
- 20110 Mechanical Engineer
- 20205 Architect
- 20210 Landscape Design
- 20220 Parking Consultants
- 20230 Elevator Consultants
- 20240 Waterproofing Consultants
- 20250 Interior Designers
- 20260 Food Service Consultants
- 20270 Medical Equipment Consultants
- 20300 Construction Management
- 20410 Reprographic Center
- 20415 Construct Document Review Consultant
- 20500 Testing and Special Inspections
- 20600 Commissioning Agents
- 20700 Scheduling
- 20800 Photography
- 20900 Surveying

2.4 Please select state(s) in which your company pursues work, and provide corresponding license Number(s):

<u>State</u>	<u>License Number</u>	<u>State</u>	<u>License Number</u>
<input type="checkbox"/> Alaska - AK	_____	<input type="checkbox"/> Montana - MT	_____
<input type="checkbox"/> Alabama - AL	_____	<input type="checkbox"/> North Carolina - NC	_____
<input type="checkbox"/> Arkansas - AR	_____	<input type="checkbox"/> North Dakota - ND	_____
<input type="checkbox"/> Arizona - AZ	_____	<input type="checkbox"/> Nebraska - NE	_____
<input type="checkbox"/> California - CA	_____	<input type="checkbox"/> New Hampshire -	_____
<input type="checkbox"/> Colorado - CO	_____	<input type="checkbox"/> New Jersey - NJ	_____
<input type="checkbox"/> Connecticut - CT	_____	<input type="checkbox"/> New Mexico - NM	_____
<input type="checkbox"/> District of Columbia	_____	<input type="checkbox"/> Nevada - NV	_____
<input type="checkbox"/> Delaware - DE	_____	<input type="checkbox"/> New York - NY	_____
<input type="checkbox"/> Florida - FL	_____	<input type="checkbox"/> Ohio - OH	_____
<input type="checkbox"/> Georgia - GA	_____	<input type="checkbox"/> Oklahoma - OK	_____
<input type="checkbox"/> Hawaii - HI	_____	<input type="checkbox"/> Oregon - OR	_____
<input type="checkbox"/> Iowa - IA	_____	<input type="checkbox"/> Pennsylvania - PA	_____
<input type="checkbox"/> Illinois - IL	_____	<input type="checkbox"/> Rhode Island - RI	_____
<input type="checkbox"/> Indiana - IN	_____	<input type="checkbox"/> South Carolina - SC	_____
<input type="checkbox"/> Kansas - KS	_____	<input type="checkbox"/> South Dakota - SD	_____
<input type="checkbox"/> Kentucky - KY	_____	<input type="checkbox"/> Tennessee - TN	_____
<input type="checkbox"/> Louisiana - LA	_____	<input type="checkbox"/> Texas - TX	_____
<input type="checkbox"/> Massachusetts - MA	_____	<input type="checkbox"/> Utah - UT	_____
<input type="checkbox"/> Maryland - MD	_____	<input type="checkbox"/> Virginia - VA	_____
<input type="checkbox"/> Maine - ME	_____	<input type="checkbox"/> Vermont - VT	_____
<input type="checkbox"/> Michigan - MI	_____	<input type="checkbox"/> Washington - WA	_____
<input type="checkbox"/> Minnesota - MN	_____	<input type="checkbox"/> Wisconsin - WI	_____
<input type="checkbox"/> Missouri - MO	_____	<input type="checkbox"/> West Virginia - WV	_____
<input type="checkbox"/> Mississippi - MS	_____	<input type="checkbox"/> Wyoming - WY	_____

2.5 List any additional jurisdictions and license numbers in which your organization is legally qualified to do business.

2.6 Please check each of the following that applies to your organization:

Minority Business Type:	Certification Number:
<input type="checkbox"/> Minority	_____
<input type="checkbox"/> Women	_____
<input type="checkbox"/> Disadvantaged	_____
<input type="checkbox"/> Veteran	_____
<input type="checkbox"/> Small Business	_____
<input type="checkbox"/> Other (specify)	_____

**3 EXPERIENCE**

3.2 List your company's annual volume for the past five (5) years:

2011: \_\_\_\_\_  
 2010: \_\_\_\_\_  
 2009: \_\_\_\_\_  
 2008: \_\_\_\_\_  
 2007: \_\_\_\_\_

3.3 List your company's largest contract to date:

Job Name: \_\_\_\_\_  
 Value: \_\_\_\_\_  
 Date Completed: \_\_\_\_\_

3.4 State total worth of work in progress and under contract to date:

3.4.1 Total work under contract and in progress: \_\_\_\_\_  
 3.4.2 Total work under contract and not yet started: \_\_\_\_\_

3.5 List at least three major construction projects your organization currently has in progress:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

\*Attach any additional projects.

3.6 List at least three (3) major projects your company has completed in the past five (5) years:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

Project Name:		Project Location:
Owner:	GC:	GC Contact:
Architect:	Contract Amount:	Scheduled Completion Date:

\*Attach any additional projects.

3.7 List the projects your organization currently has in progress and/or the most recent projects your organization has completed with Robertson Construction:

Project Name:	Project Location:
Contract Amount:	Completion Date:
Robertson Project Manager (if applicable):	Robertson Superintendent (if applicable):

Project Name:	Project Location:
Contract Amount:	Completion Date:
Robertson Project Manager (if applicable):	Robertson Superintendent (if applicable):
Project Name:	Project Location:

Contract Amount:	Completion Date:
Robertson Project Manager (if applicable):	Robertson Superintendent (if applicable):

Project Name:	Project Location:
Contract Amount:	Completion Date:
Robertson Project Manager (if applicable):	Robertson Superintendent (if applicable):

Project Name:	Project Location:
Contract Amount:	Completion Date:
Robertson Project Manager (if applicable):	Robertson Superintendent (if applicable):

\*Attach any additional projects.

3.8 List total number of field employees that your company currently employs. \_\_\_\_\_

3.9 List total number of office employees that your company currently employs. \_\_\_\_\_

3.10 What percentage of work does your company perform with its own force? \_\_\_\_\_

3.11 List the categories of work that your organization normally self performs:

3.12 Provide worker compensation experience modification rate for the past five (5) years:

2011: \_\_\_\_\_  
 2010: \_\_\_\_\_  
 2009: \_\_\_\_\_  
 2008: \_\_\_\_\_  
 2007: \_\_\_\_\_

3.13 Does your company have an OSHA compliant safety program?

Yes       No

3.14 Has your company received any OSHA Citations within the last three (3) years?

Yes       No

If you answered "Yes", please provide the following information:

- 3.14.2 OSHA Inspection Activity Number: \_\_\_\_\_
- 3.14.3 Date of Inspection: \_\_\_\_\_
- 3.14.4 Brief Description of Citation: \_\_\_\_\_
- 3.14.5 Monetary Penalty: \_\_\_\_\_

3.15 Provide a breakdown of the total number of recordable injury and illness cases that occurred during the year:

- 3.15.1 Total number of deaths: \_\_\_\_\_
- 3.15.2 Total number of cases with days away from work: \_\_\_\_\_
- 3.15.3 Total number of cases with job transfer or restriction: \_\_\_\_\_
- 3.15.4 Total number of other recordable cases: \_\_\_\_\_

3.16 Provide the total number of hours all employees actually worked last year: \_\_\_\_\_

3.17 Attach a copy of the OSHA 300A Summary of Work-Related Injuries and Illnesses.

3.18 Does your company have a Drug Abuse Policy with includes pre-hire, random, and post-accident drug testing?

- Yes       No

3.19 Does your company employ a Safety Director?

- Yes       No

If you answered "Yes", how frequently will he/she perform inspections on the construction site? \_\_\_\_\_

3.20 Claims and Suits. (If the answer to any of the following questions is yes, please attach details.)

3.20.1 Has your organization ever failed to complete any work awarded to it?

- Yes       No

3.20.2 Are there any judgments, claims, arbitration proceedings or suit pending or outstanding against your organization or its officers?

- Yes       No

3.20.3 Has your organization filed any lawsuits or requested arbitration with regard to construction contracts within the last five (5) years?

- Yes       No

3.21 Within the last five (5) years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? (If the answer is yes, please attach details.)

- Yes       No



**4 REFERENCES**

4.2 Trade Reverences:

Firm Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Firm Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Firm Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Firm Name: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

4.3 Financial Institution References:

Financial Institution: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

Financial Institution: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_

4.4 Is your company capable of providing a payment and performance bond equal to 100% of the contract amount? *If "no," 4.4, 4.5, 4.6 and 4.7 do not apply.*

Yes       No

4.5 Bond Premium (Provide % to add to contract amount based on \$1,000,000 contract). \_\_\_\_\_

4.6 State the name and rating of your bonding company.

Surety Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Rating: \_\_\_\_\_

4.7 State the name of your bonding agent and your bonding capacity.

Company: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Aggregate Bonding Capacity: \_\_\_\_\_  
Single Project Bonding Capacity: \_\_\_\_\_  
Current Bond Capacity \_\_\_\_\_

4.8 Provide a certified letter from your surety company acknowledging that your firm would be provided performance and payment bonds on future projects and the total aggregate and single project bonding capacity available for your firm.

**5 FINANCIAL INFORMATION**

5.2 Dun & Bradstreet Business Rating: \_\_\_\_\_

5.3 Please attach your most current complete audited financial statement.

**6 Enter additional information here:**