

**STATEMENT OF QUALIFICATIONS; EXHIBIT B
WEST VALLEY-MISSION COMMUNITY COLLEGE DISTRICT
REQUEST FOR QUALIFICATIONS AND FEE PROPOSALS ("RFQ") # _____**

1. Firm Name: _____
2. Business Address: _____

3. Year Firm Established: _____
4. Contact Information: Principal Contact: _____
Telephone: _____ Fax: _____
Email: _____
5. Federal Tax ID No.: _____
6. Type of Organization (Check one):
 Sole Proprietorship Partnership Corporation Joint Venture
7. Current number and prior five-year average number of technical staff employed by Respondent. "Technical staff" refers to personnel directly employed by the Respondent whose primary or exclusive responsibility is to conduct tests/inspections; "technical staff" excludes personnel employed by the Respondent whose primary or exclusive responsibility is supervisory, management, clerical or administrative.

Current Prior 5-year average
_____ _____

8. List five (5) projects subject to DSA jurisdiction for which the Respondent provided Project test/inspection services within the past five (5) years that demonstrate the Respondent's capacity to complete the Project Test & Inspection Services set forth in the Project Test & Inspection Services Agreement.

Project	Owner and Owner Contact Information	Architect and Architect Contact Information	Tests/Inspections Provided for Project

9. Each Applicant must complete the following Statement of Financial Position. In lieu of completing the following Statement of Financial Position, an Applicant may submit a California CPA prepared Financial Statement (whether audited, reviewed or compiled) for the 2010 calendar year or the 2009/2010 fiscal year.

ASSETS	
Current Assets	
Cash and cash equivalents	\$
Notes receivable	\$
Accounts receivable – completed contracts	\$
Accounts receivable – incomplete contracts	\$
Other accounts receivable	\$
Materials inventory not included in line 4 above	\$
Negotiable securities	\$
Other current assets (list below and include supplemental pages as necessary)	\$

Subtotal Current Assets	\$
Fixed and Other Assets	
Real estate	\$
Construction plant and equipment	\$
Furniture, Furnishings, Fixtures	\$
Investments of a non-current nature	\$
Other non-current assets (list below and include supplemental pages as necessary.)	\$

Subtotal Fixed and Other Assets	\$
TOTAL ASSETS	\$

LIABILITIES	
Current Liabilities	
Notes payable (excluding notes payable for equipment and real estate.)	\$
Accounts payable	\$
Other current liabilities list below and include supplemental pages as necessary)	\$

Accrued Expenses	\$
Billings in excess of costs and estimated earnings on incomplete contracts	\$
Subtotal Current Liabilities	\$
Other Liabilities	
Real estate encumbrances	\$
Equipment obligations secured by equipment	\$
Other non-current liabilities	\$
Subtotal Current Liabilities	\$
Capital and Surplus	
Owners' equity	\$
Retained earnings	\$
Subtotal Equity and Retained Earnings	\$
TOTAL LIABILITIES	\$

10. **Essential Qualifications.** Each Applicant must respond to each of the following Essential Qualifications Questions. If an Applicant's response to any of the following Essential Qualifications results in a "Not Qualified" response, the RFQ Response of such Applicant will be rejected for non-responsiveness.

10.1. Is your organization currently a DSA Accepted Laboratory for special tests/inspections?

Yes No (Not Qualified)

10.2. Has there been any occasion in the past ten (10) years where the architect of record for a project subject to DSA jurisdiction determined that your organization was not acceptable to the architect of record?

Yes (Not Qualified) No

10.3. Within the past ten (10) years has there been any project for which your organization was retained to perform special tests/inspections for which your organization did not complete and file Verified Reports with DSA within the time required by DSA for filing Verified Reports?

Yes (Not Qualified) No

10.4. Within the past ten (10) years has there been any project for which your organization was retained to provide project special tests/inspections but where your organization did not complete all required tests/inspections?

Yes (Not Qualified) No

10.5. Within the past ten (10) years has your organization been declared in default of any project test/inspection services contract?

Yes (Not Qualified) No

10.6. Has your organization or any predecessor to your organization been charged with a violation of the California False Claims Act or similar federal statute within the past ten (10) years?

Yes (Not Qualified) No

If yes, on a separate attachment, provide the following: (i) a detailed description of the circumstances upon which charges were based; (ii) the public agency involved, including name, address, telephone and email address of contact person(s) at such public agency; and (iii) disposition of such charges.

10.7. Has any individual or entity who owns ten percent (10%) or more of the equity interest of your organization been charged with a violation of the California False Claims Act or similar federal statute within the past ten (10) years?

Yes (Not Qualified) No

10.8. The Respondent has incorporated into Tab 4 of its RFQ Response copies of Certificates of Insurance evidencing the Respondent's current insurance policies in the minimum coverage amounts required by the RFQ.

____ Yes ____ No (Not Qualified)

11. General Questions. Each Respondent must provide full, complete and accurate responses to each of the following general questions.

11.1. Number of years your organization has been in business providing test and inspection services for public works projects: _____

11.2. Number of years your organization has conducted business under its present name: _____

11.3. If your organization has conducted business under a name or name style different than your organization's present name, identify all prior name(s) or name style(s):

11.4. Within the past five (5) years, have any lawsuits, legal, arbitration, mediation or other proceedings, been brought or commenced against your organization or any of its principals, officers or equity owners in connection with any project test & inspection services contract or project test & inspection services in connection with a construction project?

____ Yes ____ No

If so, describe the circumstances, the amount demanded or other relief demand and the disposition of each such lawsuit or other proceeding.

11.5. Within the past five (5) years, has your organization filed a lawsuit or commenced other administrative, legal, arbitration, mediation or other proceedings in connection with any project test & inspection services contract or project test & inspection services in connection with a construction project?

____ Yes ____ No

If so, describe the circumstances, the amount demanded or other relief demand and the disposition of each such lawsuit or other proceeding.

11.6. Are there currently any judgments, orders, decrees or arbitration awards pending or outstanding against your organization or any of the officers, directors, employees or principals of your organization?

____ Yes ____ No

If so, describe each such judgment, order, decree or arbitration award and the present status of the satisfaction or discharge thereof.

11.7. Has your organization ever refused to sign a project test & inspection services contract awarded to it?

____ Yes ____ No

If so, on a separate attachment, state the following: (i) describe each such contract; (ii) the owner's name, address, telephone number and contact person; and (iii) the circumstances of your refusal to sign such contract.

11.8. Has any project test & inspection services contract to which your organization is a party been terminated for the convenience of the project owner?

___ Yes ___ No

If so, identify the project and project owner along with a description of the circumstances under which the convenience termination occurred.

12. **References.** Each Respondent must provide at least two (2) references for each of the following reference categories.

Owners (K-12 school districts or community colleges only)			
Owner Name	Address	Telephone No. (Must be current and operating phone number)	Contact Name
Architects/Design Professionals (References must be the Architect of Record or Structural Engineer of Record for California K-12 or California community college district projects under DSA jurisdiction with an initial construction value of \$20 Million or more)			
Architect/Structural Engineer Firm Name	Address	Telephone No. (Must be current and operating phone number)	Contact Name

DSA Project Inspectors (References must be DSA Class I Certified Project Inspectors)		
Project Inspector Name	Address	Telephone No. (Must be current and operating phone number)

The undersigned is duly authorized to execute this Statement of Qualifications under penalty of perjury on behalf of the above-identified Project Test & Inspection Firm. The undersigned warrants and represents that he/she has personal knowledge of each of the responses to this Statement of Qualifications and/or that he/she has conducted all necessary and appropriate inquiries to determine the truth, completeness and accuracy of responses to this Statement of Qualifications. The undersigned declares and certifies that the responses to this Statement of Qualifications are complete and accurate; there are no omissions of material fact or information that render any response to be false or misleading and there are no misstatements of fact in any of the responses.

This Statement of Qualifications is executed this ___ day of _____ 20__
at _____
(City and State)

I declare under penalty of perjury under California law that the foregoing is true and correct.

By: _____

Title: _____