**Notice to all Subcontractors: This Part B may be used as a project specific “short form” supplement to the prequalification process, ONLY IF, said Subcontractor has submitted to the CMAR a “Complete” Master Prequalification Package Part A during the July 1 to June 30 fiscal year period of the project specific prequal advertisement**

Subcontractor hereby agrees that the “complete” Master prequal Part A submitted to the CMAR dated \_\_ /\_\_ /22\_\_\_ remains in good standing for the overall accuracy of the subcontractor for the fiscal period.  Yes  No If no, explain the material changes to safety, leadership or ownership, company size, licenses, type of work performed, financials, bonding, insurances, litigation, etc.:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(if changes are substantial to complete evaluate prequal, the CMAR may require Subcontractor to submit an updated Master Prequal and reject this supplement)

**1. Information**

**1.a.** Name of Project Advertised: UNC Charlotte Popp Martin Dining Hall Renovation

**1.b.** Subcontractor Full Company Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 1.b.1 Primary Contact Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.b.2 Primary Contact Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell No.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1.b.3 Primary Contact email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1.c.** Check the Boxes on the Attached Exhibit 1 (Listing of Bid Packages) to indicate which Bid Packages this Subcontractor is requesting to Prequalify for on this Project and return with Prequalification Part B.

**1.d.** Does Subcontractor intend to Partner or Joint Venture with another Subcontractor for this Project:  Yes  No

If yes, list the Companies involved and their applicable participating percentage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. Updated Company Information (from Part A; Master Prequalification Form)**

**2.a.** Update your Current Backlog $ \_\_\_\_\_\_\_\_ (unearned revenue as of date of this supplement)

**2.b.** Attach updated Bonding letter from your Surety if anticipated Bid Package will exceed $300,000. Letter shall be dated within the last 30 days. Have you attached a surety letter?  Yes  No

**2.c.** Attach a list to Part B of all the Projects working with the CM at Risk of the Project in the last 5 years

**3. Project Specifics**

**3.a.** The assigned project superintendent for this project shall be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Include a resume. Have you included a resume?  Yes  No

**3.b**. Experience of the superintendent on this specific type of project is: \_\_\_ 0-2 \_\_\_ 3-4 \_\_\_ 5-10 \_\_\_ >10 years.

**3.c.** The assigned project manager for this project shall be \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. Include a resume. Have you included a resume?  Yes  No

**3.d**. Experience of the project manager on this specific type of project is: \_\_\_ 0-2 \_\_\_ 3-4 \_\_\_ 5-10 \_\_\_ >10 years.

**3.e. List three (3) current or completed projects of similar type which most closely reflects the size and complexity of the type of work being requested for the currently proposed project within the last 5 years.**

|  |  |
| --- | --- |
| **#1 –Similar Project Name (Size / Scope / over 50% Competed)** |  |
| Description of Work Performed |  |
| Completion Date (or expected) |  |
| Owner Name/ Representative |  |
| Owner Address/Phone #/Email  |  |
| Architect Name/Representative |  |
| Architect Address/Phone #/Email |  |
| GC or CM Name/Representative |  |
| GC or CM Address/Phone #/Email |  |
| Contract Dollar Value  |  |
| Percentage Complete  |  |
| HUB Percentage Achieved |  |
| **#2 –Similar Project Name (Size / Scope / over 50% Competed)** |  |
| Description of Work Performed |  |
| Completion Date (or expected) |  |
| Owner Name/ Representative |  |
| Owner Address/Phone #/Email  |  |
| Architect Name/Representative |  |
| Architect Address/Phone #/Email |  |
| GC or CM Name/Representative |  |
| GC or CM Address/Phone #/Email |  |
| Contract Dollar Value  |  |
| Percentage Complete |  |
| HUB Percentage Achieved |  |
|  **#3 –Similar Project Name (Size / Scope / over 50% Competed)** |  |
| Description of Work Performed |  |
| Completion Date (or expected) |  |
| Owner Name/ Representative |  |
| Owner Address/Phone #/Email  |  |
| Architect Name/Representative |  |
| Architect Address/Phone #/Email |  |
| GC or CM Name/Representative |  |
| GC or CM Address/Phone #/Email |  |
| Contract Dollar Value  |  |
| Percentage Complete  |  |
| HUB Percentage Achieved |  |

**3.f.** Labor Resources for this project

 **3.f.1** What is total number of craft employees does Subcontractor employee for Bid Packages requesting:

 3.f.1.a = supervisors and foreman = \_\_\_\_\_\_\_\_\_each

3.f.1.b = skilled tradesman = \_\_\_\_\_\_\_\_\_each

3.f.1.3 = unskilled tradesman = \_\_\_\_\_\_\_\_\_each

**3.f.2** What is percentage of anticipated self perform work with own forces vs. subcontracting to lower tiers: \_\_\_\_% self perform with inhouse labor; \_\_\_\_% to outsource ready labor; \_\_\_\_% lower tier subcontract;

**4. Signatures**

By signing this document, you are acknowledging that all answers are true to the best of your knowledge. **Any answers found to be falsified will bar you from being prequalified on this project.**

Dated this day of:

Submitted by: \_\_\_

 Signature By Authorized Officer Print Title of Authorized Officer

**5. Scoring Matrix for Part A plus Part B**

See Exhibit 2; CM at Risk Subcontractor scoring Matrix

Exhibit 1

List of Proposed Bid Packages

Name of Project: UNC Charlotte Popp Martin Dining Hall Renovation

Estimated total Project Value: $6,500,000

Anticipated Project Start Date: May 2023

Anticipated Project Completion Date: August 2023

Check Next to Bid Package Bid Package Description Bid Package

Seeking Number Estimated

Prequal Value

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

01A – Final Cleaning $15,000

02A – Demolition $150,000

03A – Concrete $10,000

05A – Structural Steel $30,000

06A – Millwork and Custom Wood Dowels/Ceiling $150,000

07A – Roofing $60,000

07B – EIFS (Repairs) $10,000

08A – Doors, Frames, and Hardware $25,000

08B – Storefront and Windows $110,000

09A – Drywall, Framing, Ceilings, Specialties $500,000

09B – Tile $175,000

09C – Flooring $110,000

09D – Raised Access Floor $15,000

09E – Painting $45,000

10A – Signage $5,000

10B – Operable Partition $50,000

21A – Fire Protection $80,000

22A – Plumbing $350,000

23A – Mechanical $850,000

26A – Electrical $850,000

Exhibit 1.A

Whiting-Turner Subcontract, Insurance, and Project Manual Compliance

1. **Subcontract & Project Manual**

**1.a.**  Under separate cover, the Whiting-Turner standard subcontract is available for review. Is your firm willing

to sign the Whiting-Turner standard subcontract without modifications? Yes \_\_\_\_ No \_\_\_\_

If no, and your firm requires modifications, please provide list of all required modifications for consideration. Did you include the required modifications to the Whiting-Turner standard subcontract? Yes \_\_\_\_ No \_\_\_\_

**1.b.** Under separate cover, the Whiting-Turner Project Manual is available for review. Is your firm willing to agree to the terms outlined in the Whiting-Turner Project Manual without modifications? Yes \_\_\_\_ No \_\_\_\_

If no, and your firm requires modifications, please provide list of all required modifications for consideration. Did you

include the required modifications to the Whiting-Turner Project Manual? Yes \_\_\_\_ No \_\_\_\_

1. **Insurance**

**2.a.** Does your insurance meet the minimum Whiting-Turner standard requirements below (including requirements outlined in the Whiting-Turner subcontract)? Yes \_\_\_\_ N \_\_\_\_

Workers Compensation and Employers Liability – Per Statute; at least $500,000 each accident for bodily injury and

$500,000 each employee for disease.

Commercial General Liability – $1,000,000 each occurrence for bodily injury and property damage as well

$1,000,000 each incident for personal and advertising injury, $2,000,000 products-completed operations

Aggregate, and $2,000,000 general aggregate applies to the project.

Automobile Liability – at least $1,000,000 each accident.

Umbrella Excess Liability – at least $5,000,000 each occurrence and $5,000,000 aggregate.

1. **Bonding**

**3.a** If bid package is projected to be above $500K - Attach letter, dated within the last 30 days, from your surety company, signed by their Attorney in Fact, verifying their willingness to issue sufficient payment and performance bonds for this project, on behalf of your firm and the dollar limits of that bond commitment, both single and aggregate. Surety company must be a Whiting- Turner certified company.

Have you attached a surety letter?  Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_

 Is your Surety company WT Certified? Yes\_\_\_\_\_\_ No\_\_\_\_\_\_\_

Have any Funds been expended by a Surety Company on your firm’s behalf? Yes (Please explain, if yes)\_\_\_\_\_\_ No\_\_\_\_\_\_\_

Note – This summary above is not a complete list of all Whiting-Turner insurance requirements. Insurance requirements are listed in all subcontracts and compliance should be confirmed prior to bidding and accepting contract award.