



CONTRACTOR PREQUALIFICATION – OVERVIEW

The Municipality of Lambton Shores is implementing a pre-qualification process for all contractors who perform construction and maintenance tasks for the Municipality. Pre-qualification will focus on mainly the Community Services Department. This report will focus on: pre-qualification objectives, benefits, acceptability of contractors, requirements for pre-qualification, the establishment of a pre-qualification advisory board and a list of contractors who need to be pre-qualified.

Other Objectives:

- group contractors according to their expertise and capability
- set up panels of suitable contractors for specific work type and values
- facilitate the selection and invitation of pre-qualified contractors
- deliver improved project outcomes for the Municipality of Lambton Shores

Pre-Qualification Benefits:

- pre-qualification process enables the Department to select contractors who have demonstrated the required experience, capability and capacity
- pre-qualified contractors have demonstrated the capability to provide better more consistent project outcomes
- the pre-qualification process results in reduced tendering costs relative to open tenders while maintaining appropriate levels of competition
- allows the Municipality of Lambton Shores, as a major buyer of construction related services to more effectively implement continuous improvement initiatives

Pre-Qualification Advisory Board:

As per this pre-qualification scheme an advisory board will be initiated. This board will be made up of a five member committee consisting of the CAO, Clerk, Director of Community Services and Managerial representation from each area.

It will be the board's duty to investigate and examine the application of all contractors applying for pre-qualification. The board will also have the right to deny, revoke or temporarily suspend pre-qualification, subject to the required hearing process.

Acceptability:

To determine the acceptability of a contractor the board will investigate the following items:

- financial responsibility of the contractor
- the quality and availability of the contractor's equipment, machinery and the number and qualifications of their personnel
- the performance record of the applicant in the performance of contracts within the municipality and for public and private improvements
- experience in supervising and/or implementing similar construction projects
- reputation and reliability
- the nature and extent of other current contract commitments
- whether or not the contractor has been denied pre-qualification, if so, for what reason
- any other fact which would materially affect the ability of the applicant to properly, adequately, expeditiously and satisfactorily prosecute the work which the applicant is seeking pre-qualification

Certificate of pre-qualification:

The certificate of pre-qualification will be awarded from the successful completion and approval of an application. Success will be dependant on a point system associated with the **Contractor pre-qualification questionnaire** (see attached). The contractor will also supply the Advisory board with:

- an audited financial statement
- letter or certificate of good standing from a recognized bonding company, or failing that a credit report
- any other relevant information requested by the Advisory board e.g. WSIB, Health and Safety, Certifications,

**MUNICIPALITY OF LAMBTON SHORES
CONTRACTOR PRE-QUALIFICATION QUESTIONNAIRE**

1.0 General Information

Date: _____

1.1 Name of Firm: _____

Address:

Telephone: _____

Fax: _____

Email Address: _____

Contact for Bid Purposes _____

1.2 Legal Identity: _____

Individual _____ Partnership _____ Corporation _____ Other _____

1.3 How long has your organization been under your present management?

1.4 Number of employees:

Administrative, Project Management, and General Office: _____

Field Superintendents and Foremen: _____

Laborers: _____

2.0 Capabilities

2.1 List trade categories in which your firm is qualified and performs work on a regular basis:

| | | |
|--|--|--|
| | | |
| | | |
| | | |
| | | |

2.2 List trade categories for which your firm regularly subcontracts others:

| | | |
|--|--|--|
| | | |
| | | |
| | | |
| | | |

2.3 Business Volume

Indicate the annual dollar volume for the past three years

2006 \$ _____
2007 \$ _____
2008 \$ _____

Indicate the dollar volume of work for which you presently have contracts, but have not started or completed to date: \$ _____

2.4 Contract

2.4a Has your firm ever failed to complete a contract? YES ____ NO ____

2.4b Has your firm ever been in a lawsuit regarding project performance, payments, or schedule? YES ____ NO ____

2.4c Within the last five years, has any officer or principal of your firm been an officer or principal of another organization when it failed to complete a construction contract? YES ____ NO ____

2.5 Scheduling

2.5a Does your firm employ the critical path method? YES ____ NO ____

2.5b Does your firm employ computerized scheduling? YES ____ NO ____

2.5c If so, what software is used? _____

2.6 Quality Assurance/Quality Control

Does your firm have a written QA/QC Program? YES ____ NO ____

If yes, please provide a copy.

2.7 Equipment

Attach a list of company owned and leased equipment highlighting equipment that is readily available for use, including make, modal and year.

2.8 Bonding

Name of Bonding Company: _____

Address:

Contact: _____

Telephone: _____

2.8a Total Bonding Capacity _____

2.8b Single Project Capacity _____

2.8c Current Bonding in Effect _____

3.0 Insurance

List the following Insurance coverage amounts:

3.0a General Liability \$ _____

3.0b Workman's Compensation/Employers Liability \$ _____

3.0c Automobile Liability \$ _____

3.0d Professional Liability \$ _____

3.0e Insurance Company \$ _____

3.0f Broker/Agent \$ _____

3.0g Agent Contact _____ Telephone _____

4.0 References

List three Owner, Construction Manager, or General Contractor references for which you have performed work in the last two years.

4.0a Company Name: _____

Address:

Contact: _____

Telephone: _____ Fax: _____

Project Name(s): _____

4.0b Company Name: _____

Address:

Contact: _____

Telephone: _____ Fax: _____

Project Name(s): _____

4.0c Company Name: _____

Address:

Contact: _____

Telephone: _____ Fax: _____

Project Name(s): _____

5.0 HEALTH AND SAFETY

5.0a Does your company have a Certified Health and Safety Representative?

YES _____ NO _____

5.0b Name: _____

5.0c Address: _____

5.0d Phone: _____

5.0e Does your company conduct Health and Safety Meetings?

YES _____ NO _____

5.0f Schedule Times: _____

6.0 WSIB

6.0a Does your company carry valid WSIB? YES _____ NO _____

6.0b Is a copy attached? YES _____ NO _____

Please return completed form, with required documentation to;

Municipality of Lambton Shores
Attn. Peggy Van Mierlo-West, Director of Community Services
9575 Port Franks Road
Thedford ON
N0M 1J0

pvmwest@lambtonshores.ca

STATUTORY DECLARATION

DOMINION OF CANADA
COUNTY OF Lambton
TO WIT

(IN THE MATTER OF
(contractor pre-qualification
(in the Municipality of Lambton Shores
(in the County of Lambton
(in the Province of Ontario

I _____ a representative of _____
(Printed Name) (Company Name)

Do solemnly swear that all statements contained in this application and provided by me are true and I make this solemn declaration conscientiously believing it to be true and knowing that it is of same force and effect as if made under oath.

And I make solemn declaration, conscientiously believing it to be true and knowing that it is of the same force and effects as if made under oath and by virtue of the "Canada Evidence Act".

DECLARED before me at

_____)
Of _____)
In the County of _____)
This _____)
Day of _____, 20_____)

Signature of Owner
(I have authority to bind the Company/
Corporation)

A Commissioner, etc.,

POINT CODE BREAKDOWN

| QUESTIONNAIRE NUMBER | POINT GIVEN |
|----------------------|--|
| 1.3 | 1-5 YRS 1 PT. 5+ YRS 2 PTS. |
| 1.4 | PROJECT MANAGEMENT 1 PT. FIELD SUPER/FOREMAN 1 PT. |
| 2.1 | 1 POINT PER TRADE |
| 2.2 | 1 POINT PER TRADE |
| 2.3 | OVER \$100,00/YEAR 1 POINT |
| 2.4(a,b,c) | -5 YES, +5 NO (each) |
| 2.5(a,b,c) | +1 YES, -1 NO (each) |
| 2.6 | +1 YES, -1 NO |
| 2.7 | IMMEDIATE AVAILABILITY +1 PT. EQUIPMENT >1998 +1PT. |
| 2.8 | +1 PT. |
| 3.0(a,b,c,d) | +1 PT. each |
| 4.0 | +1 PT. each |
| 5.0(a) | +5 YES, -5 NO |
| 5.0(e) | +5 YES, -5 NO |
| 6.0(a) | +5 YES, -5 NO |
| 6.0(b) | +5 YES, -5 NO |

Total score needed for approval **40**