

# QUALIFICATION FORM PART A

## HONOKAA STATE OFFICE BUILDING – ROOF REPAIRS

The offeror and his personnel shall meet the Experience and Personnel Qualifications as indicated in the Special Provisions of this bid. Please complete this form as fully and explicitly as possible to facilitate our evaluation of your firm. Use additional sheets and substantiating documents when necessary.

Exact Legal Name of Contractor: \_\_\_\_\_

Contractor's License Number: \_\_\_\_\_

Hawaii Business Location: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_

Cellphone Number of Contact Person: \_\_\_\_\_

Contact Person and Phone Number for Emergency Calls during regular work hours (if different from above):

\_\_\_\_\_

Point-of-Contact in case of Emergency – **After Hours** (if different from above):

Contact Person: \_\_\_\_\_

Cellphone number of Contact Person: \_\_\_\_\_

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

Contractor's/Offeror's number of consecutive years of experience (immediately prior to bid opening date) in the field of roofing repairs and overlays:

\_\_\_\_\_

Are services to be rendered by company employees similar or equal to public officers and employees listed in the attached employee classification description? If so, please list their positions:

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

List at least **one (1) Journeyman Roofer** who will be assigned to this contract to perform all roofing repairs and overlays work. Each Journeyman Roofer must have a minimum of five (5) consecutive years (immediately prior to bid opening) of roofing repairs and overlays experience on similar projects.

Journeyman Roofer's Name: \_\_\_\_\_

Years of Experience: \_\_\_\_\_

Years of Experience with present employer: \_\_\_\_\_

Type and Date of Course of Studies completed: \_\_\_\_\_

\_\_\_\_\_

Name and Dates of previous employers the Journeyman worked for and performed tenant improvements:

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

Journeyman Roofer's Name: \_\_\_\_\_

Years of Experience: \_\_\_\_\_

Years of Experience with present employer: \_\_\_\_\_

Type and Date of Course of Studies completed: \_\_\_\_\_  
\_\_\_\_\_

Name and Dates of previous employers the Journeyman worked for and performed roofing repairs, roofing installation, or roofing overlay work:

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Journeyman Roofer's Name: \_\_\_\_\_

Years of Experience: \_\_\_\_\_

Years of Experience with present employer: \_\_\_\_\_

Type and Date of Course of Studies completed: \_\_\_\_\_  
\_\_\_\_\_

Name and Dates of previous employers the Journeyman worked for and performed tenant improvements:

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Offeror shall list at least two (2) references in the State of Hawaii other than the State of Hawaii government, for whom offeror has performed:

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