

Bidder's Proof of Responsibility

All bidders on contracts shall provide proof of responsibility in accordance with Chapter 66.28 (2) of the Laws of the State of Wisconsin.

The contents of this questionnaire will be considered confidential.

If the owner is not satisfied with the sufficiency of the answers to the questionnaire and financial statement, it may reject the bid or disregard the same or require additional information.

Contractor's Statement of Experience

Submitted by _____
(A Corporation
(A Partnership
(An Individual

Principal Office _____
(Street and Number) (City, State, & Zip Code)

1. How many years has your organization been in business as a contractor under your present business name and where and when was it organized? _____

2. How many years experience in _____ construction work has your organization had? (A) As a principal contractor _____. (B) As a subcontractor _____.
3. Have you ever failed to complete or defaulted on any contract for any work awarded to you? (Give details) _____

Has any Officer, Member or Partner of your organization ever been an Officer, Member, or Partner in an organization that failed to complete any work awarded to it? _____
If so, state the details, naming the Officer(s) or Person(s) and Organization(s) and reasons for such failure(s) and the name(s) of the Surety(ies).

4. In what other lines of business are you financially interested?

5. List at least three references for whom you have performed work and give complete names, titles, addresses and dollar volume of work involved in all references.

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6. State your experience in the construction of work similar in importance to this project. _____

7. Furnish written evidence, preferably from banks, of available credit.

8. What is the construction experience of the principal individuals, including superintendents and/or foreman, of your present organization?

Individual's Name	Present Position or office in your Organization	Years of Construction Experience	Magnitude and type of work	In What Capacity

9. List below your major equipment.

Quantity	Description

10. Construction Experience: List below construction work performed by you of any projects pertinent to the type of work for which prequalification is desired. Under "Capacity," state whether as contractor, engineer, superintendent, foreman, etc.

Year	Type of Work	Capacity	Cost of Work

11. Work on Hand: List below the present contracts held by you.

Date Awarded	Type of Work	Percent Completed	Anticipated Completion Date	Cost of Work

Contractor's Financial Statement

This statement shall show the condition of business at the end of the previous calendar year or at a subsequent date if so directed by the owner or if so desired by the contractor.

CONDITION AT CLOSE OF BUSINESS ON: _____ 19____

ASSETS	AMOUNT
1. Cash.....	\$ _____
2. Notes Receivable.....	_____
3. Accounts Receivable from Completed Contracts Exclusive of Claims Not Approved for Payment.....	_____
4. Sums Earned on Incomplete Contracts as Shown by Engineer's or Architect's Estimate.....	_____
5. Accounts Receivable from Sources Other Than Construction Contracts.....	_____
6. Deposits with Bids or Other Guarantees.....	_____
7. Interest Accrued on Loans, Securities, etc.....	_____
8. Stocks and Bonds.....	_____
9. Materials in Stock (not included in Item 4).....	_____
10. Real Estate.....	_____
11. Construction Equipment, Book Value.....	_____
12. Furniture and Fixtures.....	_____
13. Other Assets.....	_____
TOTAL ASSETS	\$ _____

LIABILITIES

1. Accounts, Notes, and Interest Payable.....	_____
2. Other Liabilities, Including Accrued Payrolls, Accrued Social Security Taxes, Compensation, Interest, Etc.....	_____
3. Real Estate Encumbrances.....	_____
TOTAL LIABILITIES	\$ _____

NET WORTH

TOTAL NET WORTH..... \$ _____

Certificate of Accountant

Notice to Accountant: The signing of the following certificate implies that the Accountant has made at least the equivalent of a balance sheet audit.

To be executed by a Public Accountant registered for the current year to do Public Accounting in the State of Wisconsin; or by a Certified Public Accountant of any State.

_____ have audited the books of account and record of _____

for the period beginning _____ 19__ and ending _____ 19__.

and hereby certify that the attached balance sheet and supporting schedules in _____ opinion, correctly reflect the financial condition of _____

_____ as of _____ 19__.

Address:

Name

Date

Title

Certificate of Contractor

State of _____)
County of _____)

_____ Being duly sworn says that he is

_____ of _____
(Title) (Name of Organization)

and that the answers to the foregoing questions and all statements contained are true and correct.

Signed: _____

Subscribed and sworn to before me this

_____ day of _____ 19__.

Notary Public

My Commission expires _____