

**Egg Harbor Township Municipal Utilities Authority**

3515 Bargaintown Road  
Egg Harbor Township, NJ 08234

**Contractor Pre-Qualification Statement**

**Section 1 General Information**

Individual     Company Partnership     Corporation     Limited Liability Corporation

Business Name \_\_\_\_\_

Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

**Part 1 – To be completed for a company partnership or limited liability corporation.**

Date of Organization \_\_\_\_\_

Identify type of partnership:     General     Limited     Association

Name of Partners and Managers (for LLC)

Address

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

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

**Part 2 – To be completed by a corporation.**

Date Incorporated \_\_\_\_\_ State \_\_\_\_\_

If not incorporated in New Jersey, please provide the date of Certificate of Authority to perform work in New Jersey \_\_\_\_\_

**Present Officers of the Corporation**

Title

Name

Address

President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

Type of Work to be Pre-Qualified for:

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Value of Work to be Pre-Qualified for:

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Submitted By \_\_\_\_\_ *(please print)*

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

FEIN \_\_\_\_\_

## **Section 2 Essential Requirements for Qualification Checklist**

- 1. Notarized statement from a surety company stating your current aggregate bond amount and available bonding capacity (must be greater than or equal to \$1,000,000 for annual pre-qualification or \$100,000 for a single project).
- 2. Statement of Corporate Ownership pursuant to section 1 of P.L. 1977, c. 33 (C.52:25-24.2)
- 3. A listing of subcontractors that may be used pursuant to section 16 of P.L. 1971, c. 198 (C.40A:11-16)
- 4. A copy of the business registration for contractor and any subcontractors pursuant to section 1 of P.L. 2001, c.134 (C.52:32-44)
- 5. Proof of liability insurance policy with a limit of at least \$1,000,000 per occurrence and \$2,000,000 aggregate.
- 6. Statement of Responsibility and Experience
- 7. Equipment Certification
- 8. Debarment Statement
- 9. Personnel Experience

All items are as further described in Section 2 (a) of the EHTMUA's Request for Pre-Qualification Information.

**Section 3 Ownership Disclosure Statement**

In accordance with P.L. 1977, c. 33(N.J.S.A. 52:25-24.2), corporate and partnership bidders on this Contract must submit a statement setting for the names and addresses of all stockholders in the corporation or partnership who own 10% or greater interest therein, as the case may be. If one or more such stockholder or partner is itself a corporation or partnership, the names and addresses of stockholders holding 10% or more that corporation's stock, or of the individual partners owning 10% or greater interest in that partnership, as the case may be, shall also be listed. The disclosure shall be continued until names and addresses of every known corporate stockholder, and individual partner, exceeding the 10% ownership criterion, has been listed. If the bidder is neither a corporation nor a partnership, he shall so attest in the space provided below.

<u>Name</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____

*Note: Add additional pages if necessary.*

*Note: Submit Statement for each member of Joint Venture.*

**Signature of Disclosure Statement on behalf of Partnership**

*(All general partners must sign)*

Name of Partnership \_\_\_\_\_

_____ Witness Signature	_____ General Partner Signature
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_____ Witness Signature	_____ General Partner Signature
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_____ Witness Signature	_____ General Partner Signature
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\_\_\_\_\_  
Date

**Signature of Disclosure Statement on behalf of Corporation**

*(President and Secretary must sign or corporation resolution authorizing others to sign must be affixed)*

Affix corporate seal to all resolutions and to the Statement.

Attest:

Name of Corporation

\_\_\_\_\_

\_\_\_\_\_

Corporation Representative Signature

\_\_\_\_\_

Date

Printed Name

*Corporate Seal*

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**Signature of Disclosure Statement by Individual Proprietor**

The bidder on this contract is neither a corporation nor a partnership.

\_\_\_\_\_

Witness Signature

\_\_\_\_\_

Individual Proprietor Signature

\_\_\_\_\_

Date



## **Section 5 Statement of Responsibility and Experience**

List of previous work of similar nature completed in the past five (5) years. Include five (5) projects. Attach additional sheets if necessary.

1. Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Engineer in Charge \_\_\_\_\_ Phone \_\_\_\_\_  
 Prime Contractor                       Sub-contractor  
Contract Price \_\_\_\_\_ Date completed \_\_\_\_\_  
Was a time extension necessary?       Yes  No      If yes, attach an explanation.  
Were there any penalties imposed:       Yes  No      If yes, attach an explanation.  
Were liens, claims or stop notices files?  Yes  No      If yes, attach an explanation.
  
2. Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Engineer in Charge \_\_\_\_\_ Phone \_\_\_\_\_  
 Prime Contractor                       Sub-contractor  
Contract Price \_\_\_\_\_ Date completed \_\_\_\_\_  
Was a time extension necessary?       Yes  No      If yes, attach an explanation.  
Were there any penalties imposed:       Yes  No      If yes, attach an explanation.  
Were liens, claims or stop notices files?  Yes  No      If yes, attach an explanation.
  
3. Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Engineer in Charge \_\_\_\_\_ Phone \_\_\_\_\_  
 Prime Contractor                       Sub-contractor  
Contract Price \_\_\_\_\_ Date completed \_\_\_\_\_  
Was a time extension necessary?       Yes  No      If yes, attach an explanation.  
Were there any penalties imposed:       Yes  No      If yes, attach an explanation.  
Were liens, claims or stop notices files?  Yes  No      If yes, attach an explanation.
  
4. Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Engineer in Charge \_\_\_\_\_ Phone \_\_\_\_\_  
 Prime Contractor                       Sub-contractor  
Contract Price \_\_\_\_\_ Date completed \_\_\_\_\_  
Was a time extension necessary?       Yes  No      If yes, attach an explanation.  
Were there any penalties imposed:       Yes  No      If yes, attach an explanation.  
Were liens, claims or stop notices files?  Yes  No      If yes, attach an explanation.
  
5. Name of Owner \_\_\_\_\_ Phone \_\_\_\_\_  
Engineer in Charge \_\_\_\_\_ Phone \_\_\_\_\_  
 Prime Contractor                       Sub-contractor  
Contract Price \_\_\_\_\_ Date completed \_\_\_\_\_  
Was a time extension necessary?       Yes  No      If yes, attach an explanation.  
Were there any penalties imposed:       Yes  No      If yes, attach an explanation.  
Were liens, claims or stop notices files?  Yes  No      If yes, attach an explanation.

## Personnel Experience

What is the construction experience of the principal individuals of your organization?

Individual Name	Present Position	Time employed by this organization	Years of construction experience	Type of Work



**Section 7 Affidavit**

AFFIDAVIT

State of \_\_\_\_\_ County of \_\_\_\_\_

SS \_\_\_\_\_

I, \_\_\_\_\_ of the City of \_\_\_\_\_,  
in the state of, \_\_\_\_\_ of full age, being duly sworn according to law  
on my oath depose and say that:

1. I am \_\_\_\_\_ of the firm of \_\_\_\_\_,  
the organization making this application of EHTMUA Contractor Pre-qualification; that I  
executed the said application, this affidavit and all other associated documents with full  
authority to do so;
2. That said organization is not now at the time of submission of this application included on the  
State of New Jersey Treasurer's List of Debarred, Suspended and Disqualified Bidders.
3. That the information set forth and statements made as part of said application are true,  
accurate, and consistent with the records maintained by the individual, partnership, or  
corporation submitting this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Sworn to and subscribed before me this  
\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public of \_\_\_\_\_

My Commission expires \_\_\_\_\_, 20\_\_\_\_