

# SUBCONTRACTOR PREQUALIFICATION FORM

All subcontractors are required to complete this questionnaire. The contents of this questionnaire will be considered and used solely to determine your firm's qualification to perform work for Riley Construction. Return completed form to:

	is form must be filled out complet	ery. Wiissing intom	nation may res	uit iii uisquaiiiicati	on or considerati	OII.			
Application Date:	Date of Prequal E			cpiration:	iration: April 30 <sup>th</sup> Next Year				
Background									
Company Name				Type of Work Perf	ormed				
Jonipany Hamo				Type of Work Following					
Street Address					Phone Number				
City/State/Zip	Principal Contact	Principal Contact			Email Address				
ear Business was Established	States We Do Work In	States We Do Work In Union Non-Union			Current Number of Employees				
Qualified Minority Business?	□ WBE □ DBE	•							
Safety									
	mpany's # of Injuries/Illnesses from your OSHA 300 Logs as follows:				1st Prior Yea	r 2 <sup>nd</sup> Prior Ye			
Experience Modification Rate (EMR	e Agency).								
Total # of Fatalities. (From Column									
Total # of OSHA Recordable Incider	00 Log)								
Total # of Lost Work Day Incidents.									
Total # of other recordable cases. (									
Total # of Annual Man-Hours Worke									
	Please attach OSI	HA 300 logs for th	e last three y	ears.					
Schedule									
Schedule									
Provide summary of three largest	de summary of three largest projects presently under construction.				/Completion	Contract Amou			
Financial Information									
	Last Year	1 <sup>st</sup> Pr	ior Year		r Year				
Gross Revenue (\$)									
	tach copy of Work in Progress):	\$			·				



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Please provide answers to the fo	llowing guestion	s and attach explana	tions where nec	essarv:		•	Yes	No
Please provide answers to the following questions and attach explanations where necessary:  Are there any judgments, claims, arbitrations, proceedings or suite pending/outstanding against your firm or its officers or principals?								
Has your firm ever filed bankruptcy?								
Has your firm filed any lawsuits or requested arbitration or mediation with regard to construction contracts within the last three (3) years?								
Has your firm or any other organization, with which of the officers or partners were involved during the past three (3) years, ever failed to complete any work awarded? If yes, please provide further details.								
Insurance & Bonding								
Please read Exhibit A in its entire			-4:1-	I				
Does your company currently maintain insurance that meets Riley Construction's requirements?				☐ Yes			□ No	
Please provide the following bon Can you provide a Performance Bond?	ding information  Bond Rating	Bonding Capacity	Single Project	ROM YOU				Bond Cost (% or \$/1000)
Call you provide a Performance Bond?	Bond Rating	Bonding Capacity	Siligle Project	Aggregate		,		Bolia Cost (% of \$/1000)
Name of Bonding Company			Contact			Phone No	umber	
Last Type of Bond Issued			Date			Amount (	(\$)	
			<b>.</b>					
References (The below referen	nces may be con	tacted by Riley Cons	truction for verif	ication pu	ırposes.)			
Provide three references. (Bank,	Supplier, Custor	ner, etc.)						
Company Name		Contact				Phone Number		er
Company Name		Contact	Contact			Phone Number		
Contact Contact				Phone Number				
If company has a line of credit, p	rovide borrowing	capacity and amou	nt currently outs	tanding (r	rovide le	tter fron	n vour l	bank).
		, capacity and amoun		······································			,	
I hereby certify that the inf	ormation sub	mitted herein, in	cluding all re	quired a	attachm	ents is	s true	and sufficiently
complete so as not to be n	nisleading.							
Completed by:						<i>'</i> 2' :		
	(Print or Typ	e)			(	(Signatur	re)	
Title:			Date	Comple	ted:			
1100.			Date	Somple				<del></del>

Riley Construction will use this documentation to pre-qualify contractors. Therefore, if you intend to continue to service our facilities, it is essential that you return the documentation as requested. This document should not be construed to constitute a commitment, or a request to perform any work.



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## For Office Use Only

Risk Evaluation				
Additional information that should be taken into consideration:				
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Overvide Annyoval				
Override Approval  (Any subcontract greater than the approval lie	mit must be approved by the Chairman or President.)			
	me maet ze appret ea zy ane enamman et i rechaenta,			
Committee Approval:				
Controller	Risk Manager			
Date	Date			
Please note any special requirements:				
☐ <u>Disapproved</u> :				
Reason for Disapproval:				
☐ <u>Disapproval Overruled</u> :				
Chairman or President				



# **EXHIBIT A**INSURANCE REQUIREMENTS

Contractor's Insurance: Prior to the Contractor commencing any work on the project job site, and as a condition of payment, the Contractor shall provide proof of insurance which meets Riley Construction Company's minimum requirements as outlined below.

### A. Worker's Compensation

1. Minimum limits of liability: Statutory limits in jurisdictions of operation

## B. Employer's Liability

1. Minimum limits of liability:

a) Wisconsin: \$ 100,000 each accident

\$ 500,000 disease - policy limit

\$ 100,000 disease - each employee

b) Illinois: \$1,000,000 each accident

\$ 1,000,000 disease - policy limit \$ 1,000,000 disease - each employee

#### C. Commercial General Liability

 Minimum limits of liability (which may be satisfied by combinations of primary & excess layers):

\$1,000,000 each occurrence

\$ 2,000,000 aggregate - per project

\$ 2,000,000 products - completed operations aggregate

\$ 1,000,000 personal & adv injury \$ 100,000 damage to rented premises

\$ 5,000 medical payments to any one person

#### 2. Coverage required:

- a) Premises I Operations Liability
- b) Occurrence Bodily Injury and Property Damage Liability
- c) Independent Contractor's Liability
- d) Completed Operations and Product Liability maintained for at least one year beyond completion dates of project
- e) Blanket Broad Form Contractual Liability (with no limitations by endorsement and which specifically covers the Indemnity Provisions of the Agreement between Contractor and Riley Construction Company)
- f) Broad Form Property Damage Liability (including Completed Operations)
- g) Per Project Aggregate shall apply to Riley Construction projects
- h) Professional Liability Coverage (Errors and Omissions) for your work or work performed for others. Professional Liability Coverage limits shall be a minimum of the following:
  - Limit of \$2,000,000.00 per claim
  - General Aggregate of \$2,000,000.00 for the contract services rendered
- i) Pollution Liability Coverage limits of liability of \$1,000,000.00 per claim and aggregate.
- j) The coverage afforded the Additional Insureds shall be primary insurance.
- k) There shall be no residential exclusions and/or limitations on any line of insurance including umbrella coverage.





D. Comprehensive Automobile

1. Minimum limits of liability: \$ 1,000,000 combined single limit

E. Excess / Umbrella Liability

1. Minimum limits of liability: \$2,000,000 each occurrence \$2,000,000 general aggregate

2. All MEP subcontractors and any other subcontractor who will perform work on the project site where the aggregate amount to be paid to the subcontractor totals \$1,000,000.00 or more shall maintain the following minimum limits of liability:

\$5,000,000.00 each occurrence \$5,000,000.00 general aggregate

#### F. Certificate of Insurance Requirements

- 1. Riley Construction Co. (including its shareholders, directors, officers, agents, and employees), the Project Owner, and the Project Architect must be added as additional insured to General and Excess Liability insurance. If the Additional Insureds have other insurance which is applicable to a loss, such other insurance shall be on an excess or contingent basis. The amount of the Contractor's liability under this policy shall not be reduced by the existence of such other insurance.
- 2. All additional insured endorsements (including any other endorsement as to completed operations) and any limitations of required primary coverage must be provided with certificates and waiver of subrogation. Endorsements and waivers shall apply for ongoing and completed work using ISO form CG2010 1185, or a combination of ISO forms CG2010 1001 and CG2037 1001 or equivalent. Waiver of subrogation applies in favor of the additional insured's for general liability, and form WC000313 for worker's compensation.
- 3. Any changes *I* exclusions of the Excess *I* Umbrella policy as to aggregates and/or additional insured shall be provided by copy of the relevant endorsement or policy language.
- 4. All self insured retentions and/or deductible and/or other assumed financial arrangements must be disclosed on the certificate or via endorsement.
- 5. General Liability, Workers Compensation, and Umbrella policies shall contain a Waiver of Subrogation as to Riley Construction Co., Project Owner and Architect.
- 6. All certificates and endorsements shall be submitted as Certificate Holder to: Riley Construction Co.
- 7. Professional Liability Coverage limits, deductibles/SIR, policy number and effective dates shall be identified on the Certificate of Insurance per the contract requirements.
- 8. Pollution Liability Coverage limits, deductibles/SIR, policy number and effective dates shall be identified on the Certificate of Insurance per the contract requirements.
- 9. Thirty (30) day's notice of cancellation or material change shall be given to Certificate Holder. The certificate shall not include language (as appears on the ACORD form) such as "if any" or "but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents, or representatives".
- 10. For Illinois projects, the certificate of insurance shall indicate that the umbrella/excess liability shall meet the employer's liability coverage or a copy of the umbrella/excess schedule must be provided.

#### G. No Limit on Liability

- 1. The insurance of Contractor shall in no way act as a limit on the coverage afforded to Riley Construction Co. or act as a description of the obligations of the Contractor.
- 2. The failure of Riley Construction Co. to require Contractor to comply with all terms and conditions shall not act as a waiver or, in any way, limit the obligations of Contractor.





#### H. Insurance Carriers

All insurance carriers are subject to the reasonable approval of Riley Construction Co.

#### I. "Flow Down Language" Insurance Requirements

- 1. Insurance requirements established by the Owner shall also apply to Riley's Exhibit "A" insurance requirements.
- 2. If there is a discrepancy in the type of insurance coverage or limits, the insurance requirements with the higher limits and more restrictive coverage shall apply.

## J. Building Information Modelling "BIM"

This information is being updated solely for the use of Riley Construction Company, Inc. and may contain inaccuracies. Riley Construction Company, Inc. makes no representation regarding the accuracy, adequacy, completeness, legality, reliability or usefulness of the information contained within these files. Information contained within these files does not override or replace, nor is it intended to override or replace, any requirements under the contract documents, original drawings and specifications, the prime contract, or the subcontracts. Use of, and reliance on, any information contained within these files is done entirely at the user's risk. Riley Construction Company, Inc. takes no responsibility for accuracy or completeness of this information and shall not be held liable for any improper or incorrect use of the information described and/or contained herein and assumes no responsibility for anyone's use of the information.

User's agrees to defend, indemnify, and hold harmless Riley Construction Company, Inc., it's officers, and employees from all claims and expenses, including attorney's fees, arising from your use of the information.

