

Department of Public Works 211 Walnut St., P.O. Box 426, Neenah, WI 54957-0426 Phone: 920-886-6240 Fax: 920-886-6250

Website/e-mail: www.ci.neenah.wi.us

Address	I	Date Phon	e		
City & State		Fax E-Ma	ail		
A. Concrete 1. 2. 3. 4. 5. 6.	pavement - slip formed pavement - non slip formed pavement - patch work curb & gutter - slip form curb & gutter - non slip form sidewalk, flatwork, curb patch	В.	<u>Street</u>	1 2 3.	excavation - new excavation - rebuild grading & gravel
1. 2. 3. 4. 5. D. <u>Utilities - new con</u> 1. 2.	storm sewer-shallow & small diameter storm sewer - large diameter storm sewer - catch basins sanitary sewer - main - new sanitary sewer - main - replacement struction outside existing traveled road sanitary sewer (main, laterals, manholes storm sewer (main, laterals, manholes, sever (main, latera	s, inc		watern watern water s	y sewer - laterals nain - new nain - replacement services
E. Landscape F. Pond Excavation G. Blasting H. Other	watermain (main, services, incidentals) (topsoil, fine grade, seed, fertilize ———————————————————————————————————		ulch)		

CITY OF NEENAH BIDDERS PROOF OF RESPONSIBILITY

The contents of this questionnaire will be considered confidential. If the Public Services and Safety Committee is not satisfied with the sufficiency of the answers to the questionnaire and financial statement, it may refuse to issue proposal forms, reject the bid or disregard the same or require additional information.

Sı	ubmitted by	(A Corporation (A Partnership (An Individual		
Pr	incipal Office			
	incipal Office Street and Number	City, State, Zip Code		
1.	How many years has your organization been in bubusiness name?			
2.	How many years experience inhad: (a) As a principal contractor?	construction work has your organization (b) As a subcontractor?		
3.	3. Have you ever paid liquidated damages or penalties for failure to complete work of per contract? Have you ever failed to complete any work awarded to you? Has any Officer, Member or Partner of your Organization ever been an Officer, Mem Partner in any Organization that failed to complete any work awarded to it? Has any engineering firm or municipality refused to pre-qualify your firm? If so, state the detail, naming the Officer(s) or Person(s) and Organization(s) and reafor such failure(s) and the Name(s) of the Surety(ies).			
4.	In what other lines of business are you financiall	y interested?		
5.	For whom have you performed work, and to wh titles and addresses of all references.	om do you refer? Give complete names,		

6. What is the construction experience of the principal individuals 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

Construction Experience

List below construction work performed by you, or other experience on or about construction work during the last five (5) years. Airport, sewer, water, building construction, curb and gutter, street and highway projects may be included if pertinent to the type of work for which a proposal is desired. Under "Capacity" state whether as Contractor, Engineer, Superintendent, Foreman, etc.

Year	Type of Work	Capacity	Cost of Work

Additional sheets as may be required to develop fully the experience of the Applicant may be attached.

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.

C	ondition at close of business on	, 20	
	ASSETS	Dollars	Cents
1.	Cash		u.
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.	Stock and Bonds		
9.	Materials in Stock (not included in Item 4)		
10.	Real Estate		
11.	Construction Plant and Equipment		
12.	Furniture and Fixtures		
13.	Intangible Assets		
14.	Other Assets		
	Total Assets		
1.	LIABILITIES Notes Payable		
2.	Notes Payable		
3.	Accrued Payrolls, Taxes, Interest, Etc		
3. 4.	Real Estate Encumbrances		
т. 5.	Other Liabilities		
٥.	Total Liabilities		
	Total Elabilities		
	NET WORTH		
6.	Individual or Partnership Capital		
	Capital Stock		
	Surplus		
٥.	Total Liabilities and Net Worth		
	CONTINGENT LIABILITIES		
Liab	ility on notes receivable discounted or sold		
	ility on accounts receivable pledged, assigned or sold		
	ility as bondsman		
	ility as guarantor on contracts or on accounts of others		
	er contingent liabilities		
	Total Contingent Liabilities		

BREAKDOWN OF ITEM 11 OF ASSETS SHOWN ON FINANCIAL STATEMENT

Construction equipment at book value \$ _____

Quantity	Description, Name and Capacity of Items	Age of Items	Purchase Price	Depreciation Charged Off	Book Value		
Quartity	Capacity of Items	Itoms	1 1100	Onarged On	Value		
Are there any liens against above? If so, state total amount \$							
If a Corpora	ation answer this:						
If a Corporation, answer this: Licensed to do business in Wisconsin (date), 20, 20							
License No, 20							
When Incorporated In what State							
Capital Paid in Cash \$							
President's Name							
Vice President's Name							
	Name						
=	Name						

AFFIDAVIT FOR PARTNERSHIP

STATE OF		
COUNTY OF	SS)	
		hoing duly awarn, danger and cay
That they are the membe	-	being duly sworn, depose and say:
correct and that they are that the foregoing finance accurate statement of the answers to the foregoing of inducing the party to we depository, vendor or oth with any information necessity.	familiar with the books of the sial statement, taken from the financial condition of the sa interrogatories are true; that whom it is submitted to awarder agency herein named is sessary to verify this statemental statements.	atements therein contained are true and a said firm showing its financial condition; ne books of the said firm, is a true and aid firm as of the date thereof and that the this statement is for the express purpose at the submittor a contract; and that any hereby authorized to supply such party ent. These signatories further agree to ah, Wisconsin, relative to the submission
Sworn to before me this _	day	
_		All partners must sign
of	, 20	
Notary Public		
•	AFFIDAVIT FOR CORF	PORATION
STATE OF)	
	SS	
COUNTY OF)	
		being duly sworn, depose and say:
statement of experience as are familiar with the book foregoing financial statement of the accurate statement of the the answers to the foregoing purpose of inducting the that any depository, vending party with any information abide by the rules and rego for bids and execution of of Sworn to before me this	and all statements therein concerns of the said corporation ment, taken from the books of financial condition of said coning interrogatories are true; party to whom it is submitted for or other agency herein nath necessary to verify this state gulations of the City of Neen contracts. day	e foregoing statement; that the foregoing ntained are true and correct and that they showing its financial condition; that the s of the said corporation, is a true and orporation as of the date thereof and that and that this statement is for the express of the award the submittor a contract; and amed is hereby authorized to supply such attement. The signatories further agree to each, Wisconsin relative to the submission
of	, 20	
Notary Public		Secretary

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If a Net Worth of \$10,000 or over is indicated, the following Certificate must be executed. If the Certificate is not executed, Contracts will be limited to \$10,000 or less; or at its option the City may decline to award a contract.

CERTIFICATE OF ACCOUNTANT

NOTICE TO ACCOUNTANT: The signing of the following Certificate implies that the Accountant had 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 Certi	fied Public Account of any State.	
	have audited the books of acc	count and records of
	for the period beginning	, 20
and ending , 20 a	nd hereby certify that the attache	ed balance
sheet and supporting schedules, in	opinion, correctl	y reflect the financial
condition of	as of	, 20
	Name	
	Title	
	AVIT FOR INDIVIDUAL	
STATE OF)	
COUNTY OF	SS)	
	being duly sworn,	donosos and save:
That the foregoing statement of experi correct and that the foregoing financial statement of his financial condition as continuous interrogatories are true; that this stater whom it is submitted to award the submagency herein named is hereby author to verify this statement. The signatory the City of Neenah, Wisconsin relative	ence and all statements therein statement, taken from his books of the date thereof and that the arment is for the express purpose nittor a contract; and that any depized to supply such part with any further agrees to abide by the respect to the supplement of the	contained are true and accurate is a true and accurate aswers to the foregoing of inducing the party to ository, vendor or other information necessary ules and regulations of
APPLICANT SIGNATURE	DATE _	
Sv	vorn to before me this day	of,20
		Notary Public
	My Commission Expires On:	