

SOUTH CAROLINA DEPARTMENT of TRANSPORTATION

PRIME CONTRACTOR PREQUALIFICATION APPLICATION

for

HIGHWAY CONSTRUCTION PROJECTS

SUBMIT THE COMPLETED APPLICATION TO:

Director of Construction South Carolina Department of Transportation 955 Park Street, Room 332 Columbia, South Carolina 29201

For questions concerning prequalification with SCDOT, contact SCDOT Prequalification Coordinator at (803)737-2043 or send e-mail to prequal@scdot.org.

LONG FORM CA-1L, Rev. June 2024

NOTICES

The term "your Company" or "the Company" used in this application is the business entity seeking prequalification with the South Carolina Department of Transportation.

Before submitting a bid for work let to contract by the SCDOT, all prime contractors must be prequalified in accordance with South Carolina Code of Regulations, 63-300 through 63-307.

The requirements for prequalification are outlined in Subsection 102.1 of the SCDOT 2007 Standard Specifications. A copy of this manual may be found on the following SCDOT web page:

https://www.scdot.org/business/pdf/2007_full_specbook.pdf

The polices and procedure for prequalification are outlined in a document entitled Policies & Procedures for Prime Contractor Prequalification, which can be found on the following SCDOT web page:

https://www.scdot.org/business/pdf/contractor/Policies_Procedures_for_Prequalification.pdf

There are two SCDOT Prequalification forms; the Long Form CA-1L and the Short Form CA-1S. First-time prequalifiers or contractors whose prequalification has expired should use the Long Form. Contractors renewing their prequalification will use the Short Form.

The SCDOT relies upon the bidder's bonding company to determine the bidder's financial capacity to accomplish the work being bid. THEREFORE, DO NOT SUBMIT ANY FINANCIAL DOCUMENTS WITH THIS PREQUALIFICATION APPLICATION.

All questions must be fully answered. If questions are left unanswered or not fully answered, requested documents or information not provided, or required initials or signatures omitted, the application will not be processed until the missing information is submitted by the Contractor. Delays caused in obtaining missing information are the sole liability of the Contractor.

If there is a question that does not apply, enter "Not Applicable" or "N/A." If additional space is required to complete an answer, use additional pages and securely attach them to the application. If information is provided on added pages, they must include all the requested information, be properly referenced, and securely attached to the application. The attachments shall be considered covered by the affidavit and its oath.

BIDDING WITH SCDOT

Unless otherwise stated in the letting advertisement, only electronic bids submitted through the electronic bidding service, Bid Express, will be accepted. To submit an electronic bid through Bid Express, a bidder must:

- 1. Subscribe to Bid Express.
- 2. Download and install the free electronic bidding program, Expedite Bid, from Bid Express.
- 3. Obtain a Digital ID from Bid Express to view SCDOT letting information on Bid Express. The Contractor must furnish the SCDOT Vendor No. shown on the Prequalification Certificate to obtain the Digital ID from Bid Express.
- 4. Pay a Bid Express Bidding fee for bidding in South Carolina.

Allow 7 to 14 days for obtaining the preceding items from Bid Express. For information about procedures and fees for services from Bid Express, go to: www.bidx.com.

INSTRUCTIONS

THE FOLLOWING DOCUMENT MUST BE SUBMITTED WITH THE APPLICATION:

1. Using the link below, please provide the requested information for subcontractors that have furnished quotes to your Company for subcontract work in relation to bids, which your Company has submitted ON SOUTH CAROLINA DEPARTMENET OF TRANSPORTATION PROJECTS during the past 12 months.

List all subcontractors that have furnished quotes even if your Company was not successful in obtaining the Contract or even if your Company gave no work to the subcontractor. A subcontractor that has quoted multiple times need only be listed once.

https://www.scdot.org/business/docs/contractor/Annual-Subcontractors-List.xlsx?v=4

Please be advised that the Contractor's Prequalification Certificate will be withheld until the SCDOT Prequalification Coordinator receives their annual Subcontractor List. Spreadsheet needs be emailed to: **prequal@scdot.org**

- 2. Attach a copy of **ONE** of the following:
 - a. A copy of an EMR (Experience Modification Rate) Notification sheet from the National Council of Compensation Insurance (NCCI) showing the Company Name, EMR, and Effective Date of the EMR (date must be within 12 months of the submission of the prequalification application).
 - b. A statement from your Workers Compensation agent or carrier, on their letterhead, that includes the **Company Name**, **EMR**, and **Effective Date of the EMR** (date must be within 12 months of the submission of the prequalification application).
 - c. If an EMR has not been issued, attach a copy of a letter from your Workers Compensation insurance agent stating the reason an EMR has not been issued and the effective date of the Worker's Compensation Policy.

ALL ATTACHED PAGES MUST BE CLEARLY LABELED AND IDENTIFIABLE.

If approved, the SCDOT will issue a Prequalification Certificate to the Contractor. The certificate will have a Vendor Number and an Expiration Date. To maintain uninterrupted prequalification, a new prequalification application must be submitted before the Expiration Date on the certificate.

If prequalification is not renewed before the Expiration Date, the Contractor will be considered a new applicant and may not bid on SCDOT projects until a Long Form prequalification application is approved.

SUBMISSION OF FALSE OR MISLEADING INFORMATION
MAY RESULT IN DENIAL OF PREQUALIFICATION

SOUTH CAROLINA DEPARTMENT of TRANSPORTATION PRIME CONTRACTOR PREQUALIFICATION APPLICATION

for

HIGHWAY CONSTRUCTION PROJECTS

(When filling-in this application on-line, hover the cursor over the field for help.)

| Pre-qualification status: | | |
|---|---------------------------|-----------------------------|
| 2. The full legal Name of the Company: | | |
| 3. Name and telephone number (including Area concerning the preparation and information | | Contact Person for question |
| Name: | Phone: | Ext.: |
| Date Prepared: E-Mail: | | |
| 4. Company's street address to which letters an | | |
| Street: | | |
| City/Town: | | Zip Code: |
| 5. Company's US Post Office Box, if applicable, | | |
| City: | | Zip Code: |
| 6. Company's Main Telephone No.: | | |
| 7. Contact person's company E-Mail: | | |
| 8. Federal Employer ID No. (FEIN): | | |
| 9. SAM Unique Entity ID (System for Award M | | |
| 10. Since SCDOT only accepts bids through BII Company a subscriber to BID EXPRESS: | DEXPRESS, an electronic b | idding service, is the |
| If No please | explain why below: | |
| | | |
| | | |

| Company personi | nel and equipment. | | |
|----------------------|--------------------------|--|--|
| Name: | | | |
| Title: | | | |
| Office Phone: | | _ Ext.: Cell : | Phone: |
| E-Mail: | | | |
| 12. List ALL the Off | ficers of the Company in | the table below: | |
| Full Name | Title or Positio | on Office Phone Number | E-Mail |
| | | | |
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| | prequalified for highway | | rime or Subcontractor with any information in the table below. |
| State DOT | Prime, Sub, or Both | What Areas of W | orks and Limits (if any) |
| | | | |
| | | | |
| | | | |
| 14. How is the Compa | any presently organized | : | |
| | | , Limited Partnership, Lim vs of what State was it orga | nited Liability Partnership, or anized? |
| | | CTACH a copy of the C e Secretary of State of | Certificate of Existence or the foreign State. |

11. Name and telephone numbers (including Area Codes and Extension) of an Emergency Response

Contact Person who will be available to take a call from SCDOT 24/7, and is authorized to mobilize

| Limited Liability Company, has it filed transact business in South Carolina? | | 1 / | |
|--|--|--|---|
| If NO, be aware that the Compan Carolina Secretary of State before | | | |
| 17. Does the Company owe delinquent taxo | | · | |
| 18. Check the box where the Company's gr | ross receipts would | fall for the last fo | all fiscal year: |
| 19. Company's latest Experience Modificat Works Compensation insurance carrier to | | , | the |
| EMR was issued by: | | Effective Date | e of EMR: |
| Name of Worker's Compensation insuranc | e carrier: | | |
| Name of Insurance Agency: | | | |
| Name of Agent: | Telepl | none No.: | Ext.: |
| Attach a copy of the latest EMR no Compensation Insurance (NCCI), Star The notification MUST show the Comp Company does not qualify for an EMI Compensation Insurance Agent or Car for an EMR. The letter must include the PREQUALIFICATION WILL NOT SUBSTANTIATING DOCUMENTS. | te Insurance Board pany's Name, EMR, R, attach a copy of rier stating the rea he Effective Date of | or Commission and Effective Description a letter from the Son why the Control the Workers Co | ate of the EMR. If the e Company's Workers mpany does not qualify ompensation Policy. A |
| 20. Name of the last Surety company used by the Company: | | | |
| Name of Agent: | | | |
| Address: | | | |
| City/Town: | | | Zip Code: |
| Telephone No.: | Ext.: | | |

| 21. Has the Company done work for the SCDOT as a prime contractor or a subcontractor under another name or names? |
|---|
| If YES, what other names: |
| 22. Has the Company done roadway construction work? |
| 23. How many years of experience does the Company have working as a Prime Contractor? |
| 24. How many years of experience does the Company have working as a Subcontractor? |
| 25. Does the Company have a current General Contractor's or Mechanical Contractor's license issued by the SC Department of Labor, Licensing, and Regulation? If YES, provide the License Number: |
| Classifications and Limits: |
| Name of Qualifying Person(s): |
| 26. If the Company is a painting Contractor, answer this question, otherwise, skip to next question. Please select which certificate is the most current and provide a copy of your selection: |
| Select a Certificate: |
| 27. In order to evaluate the Company's manpower, provide the following information: (DO NOT INCLUDE Officers or Administrative personnel unless they actually perform the duti of the job titles and work in the Company's Construction Division.) |
| How many employees are in the Construction Division of the Company? |

| 28. l | In the following table, provide the Name, Length of Time Employed (with the Company), and | |
|--------------|--|---|
| • | Years of Construction Experience of the three most experienced Project Managers, Estimators, | |
|] | Field Superintendents, and Foremen. DO NOT SUBMIT RESUMES IN LIEU OF THIS TABLE | E |

| NAME (First Name, MI, Last Name) | Length of Time with Company | Years of Construction Experience |
|-------------------------------------|-----------------------------------|----------------------------------|
| Projects Managers | | |
| | | |
| | | |
| | | |
| Estimators | | |
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| Field Superintendents | | |
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| Foremen | | |
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Note: For questions 29-36, if you answer 'Yes', please submit a separate page for each instance with complete details at the end of this application.

- 29. Has the Company <u>ever</u> failed to complete a construction contract or project for the SCDOT or any Federal, State, County, Municipal, or any other government agency?
- 30. Has any principal of the Company <u>ever</u> owned an interest in a company that failed to complete a construction contract or project for SCDOT or any Federal, State, County, Municipal, or any other government agency?

| debarred, or prohibited from working or bidding with the SCDOT or any Federal, State, County, Municipal, or any other government agency? | |
|--|---------------|
| 32. Is any principal of the Company presently suspended, disqualified, debarred, or declared ineligible to do business with the SCDOT or any Federal, State, County, Municipal, or any other government agency? | |
| 33. In the past three (3) years, has any person or company referred to in Questions 30, 31, 32, or 33 been indicted for, pled guilty to, pled nolo contendere to, or convicted of violation of an Antitrust law or of an act prohibited by a state or federal law committed in any jurisdiction of the United States involving fraud, collusion, or conspiracy with respect to bidding on or the performance of a public contract? | |
| 34. Is any person or company referred to in Questions 30, 31, 32, or 33 currently serving a sentence or owe restitution as a result of a violation of any acts or omissions prohibited by any State or Federal la with respect to bidding on or preforming a public contract? | l W |
| 35. In the past three (3) years, has any person or company referred to in Questions 30, 31, 32, or 33 been indicted for, pled guilty to, pled nolo contendere to, or convicted of crimes including, but not limited to fraud deceit, embezzlement, theft, forgery, bribery, falsification or destruction of records, bid rigging price fixing, making false statement, receiving stolen property, anti-trust violations, making false clai or making any unlawful payment or gratuity, obstruction of justice, or conspiracy to commit such violations of ethical standards? | to 5, m |
| 36. Is the Company under the protection of a Bankruptcy Court, or does the Company have a pending petition in a Bankruptcy Court, or has there been an assignment for the benefit of creditors? | |
| 37. Has the Company ever been under investigation for collusion or bid rigging? If YES, attach a page with complete details. Include whether or not indictments resulted. | |
| 38. Was there ever a contract on which the Company bid, did not win, but ended up working as a subcontractor to the winning bidder? | |

| _ | Name and Address | | | Name and Address |
|-------------------------------|--|-----|------------------------|-----------------------|
| s it Prequalified with SCDOT? | | | Prequalified SCDOT? | |
| _ | Name and Address | | | Name and Address |
| s it Prequalified with SCDOT? | | | requalified SCDOT? | |
| _ | Name and Address | | | Name and Address |
| | | | | |
| s it Prequalified with SCDOT? | | | Prequalified SCDOT? | |
| | nes of the individuals (internathan five percent (5%) in the | | , - | |
| | me of Person or Company on, First Name, MI, Last Nan | ne) | Amount (9 | %) of Financial Holdi |
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| • | advantaged Woman's Business Enterprise (DWBE) certified by the South Carolina Unified Certification Program? If YES, choose one: |
|------------|--|
| Lis | et certified work areas in the box below: |
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| 42. | Has the Company ever failed to meet a DBE or DWBE contract goal? |
| | If YES, attach a page with complete details. Include whether or not penalties were assessed. |
| 43. | Is the Company currently certified by the SCDOT as a Small Business Enterprise (SBE)? |
| 44. | Does the Company have ownership in a quarry, asphalt plant, or liquid AC terminal? |
| | If YES, attach a page with complete details. Include name of facility, location, products, other owner v long has the company been the owner, do you sell material to other contractors? |
| 45. | What is the <u>name</u> , <u>title</u> , <u>and address</u> of the Officer in the Company who is designated to receive the Company's Contractor Performance Score (CPS): |
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| | |

The Officer named above, is required to HAVE read the online document entitled CPE POLICIES & PROCEDURES, which is available on the SCDOT Internet website using the following link: https://www.scdot.org/business/pdf/contractor/CPE Policies & Procedures.pdf

On page 15 of this application, the officer designated above must sign a notarized statement, which states that the Officer has read and fully understands the affect that the CPE POLICIES & PROCEDURES may have on the Company's ability to bid on SCDOT projects.

46. In the table below, enter the NUMBER OF PIECES of each type of operational construction equipment that is owned or leased by the Company. This table must be filled in, attachments are not accepted.

| Type of Equipment | 0 | L | Type of Equipment | 0 | L | List Addition Equipment (i | if requir | ed) |
|--------------------------|--|-------------|-----------------------------|---|---|----------------------------|-----------|--|
| Truck w/Aerial Lift | | | Pugmill | | | Type of Equipment | 0 | L |
| Truck w/pole trailer | | | Joint/Crack Sealer | | | | | |
| Truck, Articulated | | | Rock Crusher | | | | | |
| Truck, Dump | | | Rock Saw | | | | | |
| Truck, Flatbed | | | Roller, Rubber-Tire | | | | | |
| Truck, Off-Road Dump | | | Roller, Sheepsfoot | | | | | |
| Truck, Pickup | | | Roller, Vibratory | | | | | |
| Truck, Service/Lube/Fuel | | | Aerial Lift | | | | | |
| Truck, Tanker | | | Air Compressor | | | | | |
| Truck, Tractor Traile | | | Barge/Safety Boat | | | | | |
| Truck, Utility/Box | | | Br. Deck Snooper | | | | | |
| Truck, Water | | | Crane, Rubber Tire | | | | | |
| Trailer, Cable/Wire | | | Crane, Track | | | | | |
| Trailer, Equipment | | | Concrete Breaker | | | | | |
| Trailer, Lowboy | | | Generator | | | | | |
| Trailer, Pole | | | Jack Hammer | | | | | |
| Trailer, Utility | | | Industrial Heater/Cooler | | | | | |
| Backhoe, Rubber Tire | | | Pile Driving Equipment | | | | | |
| Backhoe, Track | | | Jack & Bore Equipment | | | | | |
| Bulldozer | | | Pipe Fusion Machine | | | | | |
| Drag-Line | | | Pipelayer | | | | | |
| Milling Machine | | | Trench Box | | | | | |
| Motor Grader | | | Trencher | | | | | |
| Pulverizer | | | Cultivator/Tractor | | | | | |
| Road Widener | | | Hydroseeder | | | | | |
| Scraper/Pan | | | Logging/Clearing Equip. | | | | | |
| Skip Loader | | | Mower | | | | | |
| Soil Stabilizer | | | Chipper | | | | | |
| Asphalt Paver | | | Tub Grinder | | | | | |
| Asphalt Plants | | | Bridge Painting Equipment | | | | | |
| Grinder | | | Dust/Paint Contain. Equip. | | | | | |
| Reclaimer | | | Sand/Shot/Water Blaster | | | | | |
| Sweeper/Broom | | | Skid Steer/Bobcat | | | | | |
| Liquid Asphalt Sprayer | | | Crack Sealing Equipment | | | | | |
| Chip Distributer | | | Line Painting Equipment | | | | | |
| Cold Planer | | | Arrowboard | | | | | |
| Concrete Barriers | | | Message Board | | | | | |
| Concrete Batch Plant | | \Box | RPM Application Equip. | | | | | |
| Concrete Br. Deck Screed | | \Box | Thermoplastic Applicator | | | | | |
| Concrete Deck Finisher | | | Truck-Mounted Attenuator | | | | | |
| Concrete Dowel Bar Drill | | | Light Tower | | | | | |
| Concrete Floats | | | Power Washer | | | | | |
| Concrete Forms | | | Snow Plow | 1 | | | | |
| Concrete Mixer, Truck | | | Motar Mixer | | | | | |
| Concrete Mixer, Portable | | \Box | Forklift | 1 | | | | |
| Concrete Slipform Paver | | \forall | Storage Container | 1 | | | | |
| Slipform, Curb/Barrier | | \forall | Tool Storage Container | 1 | | | | |
| Concrete Pump | | | Construction Office/Trailer | | | | | |
| г | | | | + | | | | 1 |

WORK CODES FOR CONTRACTOR WORK EXPERIENCE FOR USE IN QUESTIONS 48, 49, & 50 (USE ONLY WORK CODES FOR WORK PERFORMED BY YOUR COMPANY'S OWN FORCES AND EQUIPMENT)

| | Roadway Experience | Code | Highway Structures Experience | Code | Miscellaneous (Continued) |
|----|-----------------------------------|------|-----------------------------------|------|-----------------------------------|
| 2 | Road Construction - New | 40 | Bridges - New | 68 | Fencing |
| 3 | Roadway Widening | 41 | Bridge Replacement & Apprs. | 69 | Hardscapes or Streetscapes |
| 4 | Asphalt Paving & Resurfacing | 42 | Bridge Rehab & Widening | 70 | Hauling Construction Material |
| 5 | Asphalt Surf. Treat. (Chip Seal) | 43 | Bridge - Emergency Repair | 71 | Hazardous Material Removal |
| 6 | Full Depth Reclamation | 44 | Bridge Cleaning and Painting | 72 | Horizontal Jacking & Boring |
| 7 | Base & Subbase Work | 45 | Bridge Jacking | 73 | Impact Atten. / Crash Cushions |
| 8 | Catch Basins, Manholes, etc | 46 | Bridge Joint Install. or Repair | 74 | Landscaping & Planting |
| 9 | Clearing and Grubbing | 47 | Concrete Patching - Structures | 75 | Milled-In Rumble Strips |
| 10 | Concrete Paving - Roadway | 48 | Dredging or Channel Clearing | 76 | Mowing or Vegetation Control |
| 11 | Concrete Rdwy Joint Seals | 49 | Drilled Shafts or Pile Foundation | 77 | Noise Barriers |
| 12 | Concrete Sdwlks & Driveways | 50 | Mech. Stabilized Earth Walls | 78 | Overhead Sign Structures |
| 13 | Crack Sealing - Asphalt Rdwy | 51 | Non-AC Overlay - Br. Decks | 79 | Drainage & Pipe Installation |
| 14 | Curb or Curb & Gutter | 52 | Pile or Drilled Shaft Testing | 80 | Shotcreting |
| 15 | Roadway Excavation & Grading | 53 | Rebar - Placing & Tying | 81 | Sand, Shot, or Water Blasting |
| 16 | Asphalt Roadway Patching | 54 | Retaining Walls - CIP | 82 | Soil Stabilization |
| 17 | Concrete Roadway Patching | 55 | Structure Excavation | 83 | Traffic Control Services |
| 18 | Guardrail - Stl Bm or Cable Barr. | 56 | Structure Removal | 84 | Waterproof Substr. or Deck |
| 19 | Macro-surfacing | 57 | Temporary Bridges | 85 | Railroad Construction |
| 20 | Micro-surfacing | 58 | Culverts - New | 90 | Airport Runways & Taxiways |
| 21 | Milling & Grinding | 59 | Culverts - Replacement | 91 | Building Demolition & Removal |
| 22 | Pavement Markings | | Miscellaneous Experience | 92 | Buildings - New or Rehab. |
| 23 | Raised Pavement Markers | 60 | Brick, Block, Stone Masonry | 93 | Site Prep |
| 24 | Roller Compacted Concrete | 61 | Camera & ITMS Cable | 94 | Concrete Work - Non-Rdwy |
| 25 | Roadway Lighting | 62 | Cofferdams & Sheetpiling | 95 | Industrial Painting |
| 26 | Traffic Signals | 63 | Concrete Barriers - CIP | 96 | Marine Docks, Fenders, etc |
| 27 | Traffic Signs - Permanent | 64 | On call services | 97 | Paving & Resurf Non-Highway |
| 28 | Perm. or Temp. Vegetation | 65 | Environmental Mitigation | 98 | Public Utilities Install & Repair |
| 29 | Shoulder Widening | 66 | Epoxy/Grout Crack Injection | 99 | Storm Debris Remove |
| 30 | Design-Build Projects | 67 | Erosion Control | 100 | Water or Sewer Plants |

Note: The Department will assign the work experience classification of General Contractor based on diversity of experience and the number and size of completed projects.

PLEASE DO NOT REMOVE THIS PAGE FROM THE APPLICATION

47. As of the date of the preparation of this application, list the TEN (10) LARGEST construction projects the Company has been awarded as a prime OR a subcontractor, but has not completed. This table must be filled-in, or only a table with the same headings may be substituted.

| Contract Dollar Amount | Performed Work as a Prime or a Subcontractor | Type of work Performed (use codes) | Percent Complete | Name of Project Owner (Contact Person's Name, Address, and Telephone Number) | Project Reference File or No. |
|------------------------------|--|---|---------------------|--|-------------------------------------|
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48. As of the date of the preparation of this application list the LAST FIVE (5) construction projects the Company has completed as a prime contractor OR a subcontractor.

This table must be filled-in or only a table with the same headings may be substituted.

| Contract Dollar Amount | Worked as a Prime or Subcontractor | Type of Work Performed (use codes) | Date Company's Project Work Completed | Name of Project Owner (Contact Person's Name, Address, and Telephone Number) | Project Reference File or No. |
|------------------------------|---|---|--|--|-------------------------------------|
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49. List the THREE (3) LARGEST construction projects in the history of the Company that were completed as a prime contractor OR a subcontractor Do not include projects listed in Question 48. This table must be filled-in, or only a table with the same headings may be substituted.

| Contract Dollar Amount | Worked as a Prime or Subcontractor | Type of Work Performed (use codes) | Date Company's Project Work Completed | Name of Project Owner Contact Person: Name Address Telephone No. | Project Reference File or No. |
|------------------------------|---|---|---|---|-------------------------------------|
| | | | | | |
| | | | | | |
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| Full Name | Title | Office Phone Number | E-Mail | Documen Code |
|-----------|-------|------------------------|--------|-----------------|
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50. In the table below, provide the names of people who are authorized to approve, sign, and execute on

the behalf of the Company the type of documents in the list below.

Document Type Code Nos.:

AFFIDAVIT

Note: The name of the person being sworn and executing this Affidavit must be in the table in Question 50, on the previous page, and must have authority to approve, sign, and execute Code 1 documents as defined on the preceding page.

| ne of Applicant Company) Drized Signature) |
|---|
| orized Signature) |
| , |
| Print Name) |
| Print Title) |
| |
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information lines are filled out.

ACKNOWLEDGEMENT of the SCDOT CONTRACTOR PERFORMANCE EVALUATION POLICIES and PROCEDURES

By signing this form as an Officer of the Company named below, I have read and fully understand and acknowledge the SCDOT Contractor Performance Evaluation Policies and Procedures document posted on the SCDOT Internet website; and further, that I fully understand its impact on the Contractor's ability to bid on SCDOT construction projects.

| (Print the Name of the | Company) | |
|--|-----------------------------------|-------------------|
| (Print Name of O | fficer) | |
| (Print Title of Of | ficer) | |
| (Signature of Of | ficer) | |
| NOTICE: Notary cannot be an Officer of the Company. | Subscribed and sworn to before me | |
| • • | on | 20 |
| | Print th | ne Name of Notary |
| | Sign | nature of Notary |
| | | otary Public for |
| Notary Public seal is not required if all Notary information lines are filled out. | State of My Commission Expires: | |
| mormation mes are med out. | | |

ACKNOWLEDGEMENT of the PRIME CONTRACTOR'S RESPONSIBILITIES

IF THERE IS ANY CHANGE TO THE INFORMATION PROVIDED IN THIS APPLICATION AFTER IT HAS BEEN SUBMITTED, IT IS THE SOLE RESPONSIBILITY OF THE CONTRACTOR TO SUBMIT A WRITTEN DOCUMENT ADVISING THE DIRECTOR OF CONSTRUCTION'S OFFICE OF THE CHANGE WITHIN FIFTEEN (15) DAYS OF THE OCCURRENCE OF THE CHANGE.

IT IS THE SOLE RESPONSIBILITY OF THE CONTRACTOR TO RENEW ITS PREQUALIFICATION BEFORE THE EXPIRATION DATE OF THE CURRENT CERTIFICATE.

By signing this form as an Officer of the Company, I acknowledge and accept the responsibilities stated above on behalf of the Company named below:

| (Print Name of Company) | | | | |
|---|-----------------------------------|--|--|--|
| (Print Name of | Officer) | | | |
| (Print Title of Officer) | | | | |
| (Signature of | f Officer) | | | |
| NOTICE: Notary cannot be an Officer of the Company. | Subscribed and sworn to before me | | | |
| | on20 | | | |
| | Print the name of Notary | | | |
| | Signature of Notary | | | |
| | Notary Public for | | | |
| | County of | | | |
| Notary Public seal is not required if all Notary | State of | | | |
| information lines are filled out. | My Commission Expires: | | | |
| | on | | | |