

QUALIFICATION STATEMENT

PLEASE USE THE ATTACHED FORM TO SUBMIT A QUALIFICATION STATEMENT (IN A SEALED ENVELOPE) WITH YOUR BID. ONLY THOSE BIDDERS CONSIDERED FOR AWARD WILL BE OPENED.

FINANCIAL STATEMENT

PLEASE SUBMIT A COPY OF YOUR MOST RECENT FINANCIAL STATEMENT IN THE PACKAGE DESCRIBED ABOVE.

6S ENGINEERING, INC. P.O. BOX 689, PLEASANTON, TEXAS 78064



PAGE 2 QUALIFICATION STATEMENT

QUALIFICATION STATEMENT

| TO BE COM | PLETED AND SUBMIT | TED WITH THE BID: | | | | |
|------------------------------|---|------------------------------|------------------------|------------------------------------|--|--|
| Submitted t | 0: | | | | | |
| Ву: | (CORPORATION) | | | | | |
| Tax I.D. (FIEI | N) No.: | | | | | |
| Owners Nan | ne: | | | | | |
| Principal Off | fice: | | | | | |
| Address: | | | | | | |
| Phone Num | ber: | | | | | |
| - | ry of this questionnai tories hereinafter ma | - | nd accuracy of all sta | tements and of all answers | | |
| | | ganization been in busines | | | | |
| 2. How mar | ny years experience i | n this type of construction | work has your organ | nization had: | | |
| (a) as a general contractor? | | | | | | |
| | (b) as a subcontract | or? | | | | |
| 3. What pro | ojects has your organ | ization completed? | | | | |
| Contract Amount | Name of Project | Brief Project Description | When Completed | Name/Address Phone No. of Owner | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

4. Have you ever failed to complete any work awarded to you?



| | If so, where and | d why? | | | | |
|----|---|---|---|-----------------------------|--------------------------|-------|
| 5. | Have you comp | leted any p | projects within a 10-mile ra | dius of this project? | | |
| 6. | The work, if aw a. For Adr b. For Cor | arded to yo ninistrative ostruction S | ou, will have the personal s e Management? Superintendence? does the designated constr | upervision of whom? | | |
| 7. | • | | do you intend to sublet? Stype of work before. | Please list the names of | potential subcontractors | with |
| 8. | What equipmen Quantity | nt do you c ltem | own that is available for the Description, Size Capacity, Etc. | proposed work? Condition | Service | Locat |
| | | | | | | |

9. Do you have adequate bonding capacity to provide a performance bond and labor and material payment bond for this project? What is your available bonding capacity?



10. List the Construction Projects your organization has underway on this date.

| Contract Amount | Type of Work | Percent Completed | Company/Address/Phone umber of Owner or Contracting Officer Pho | Engineer Contact/ ne Number |
|--------------------|-----------------|----------------------|--|--------------------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

- 11. Please attach a copy of your most recent financial statement. Submit the following in a sealed envelope marked, "Financial Statement of (name of bidder) for (description of project)":
 - Provide most recent audited or reviewed yearend financial statements, if available.
 - Provide most current unaudited financial statements.
 - Include auditor's opinion, balance sheets, income statement, cash flow statement and footnotes.

This statement will be examined only if the bidder's Proposal is actively considered for award; otherwise it will be returned unopened after the award of the Contract.

12. Please attach a list with contact information of:

- Banking References
- Accountant
- Surety Agent
- 13. Are any of your employees or subcontractors' employees, who would be working on this project, covered by a collective bargaining agreement?

PAGE 5 QUALIFICATION STATEMENT (Name of Organization)

| | (Name & T | itle of Person Signing) |
|--|---------------------------|--------------------------|
| STATE OF | | |
| COUNTY OF | | |
| being duly swern denotes | and cause that he (cho is | |
| being duly sworn deposes a | and says that he/she is _ | |
| of the above(Name of Organizat | | |
| and that the answers to the foregoing questions and all stat | | ed are true and correct. |
| | Sw | vorn to before me this |
| - | Day of | 20 |
| | | |
| | (Nota | ry Public) |

My Commission Expires: _____