



MIDLAND COUNTY *DRAIN* COMMISSIONER

CONTRACTOR PRE-QUALIFICATION POLICY

PURPOSE:

The purpose of this pre-qualification process is to develop and maintain a list of pre-qualified contractors to perform non-petitioned maintenance work on behalf of the Midland County Drain Commissioner and the various drainage districts under the jurisdiction of the Drain Commissioner.

PROCESS/CRITERIA:

To be eligible to contract for non-petitioned drain maintenance that is not undergoing the bidding process, a contractor must submit an application to the Drain Commissioner, which at a minimum includes:

1. W-9
2. Proof of Worker's Compensation or Exemption
3. List of Contractor's Available Equipment
4. Reference List

The Drain Commissioner shall have complete discretion in approving or denying an application based on the totality of the information provided in the application.

LIST:

Upon approval of an application, the Contractor shall be placed on the Pre-Qualified Contractor List, which shall be posted on the Drain Commissioner's or County's website. The list shall be updated once a year.

REMOVAL:

A contractor may be removed from the Pre-Qualification List upon:

1. Contractor's request to be removed, or termination of a Contractor's legal entity; or
2. Contractor's failure to sustain any of the above required criteria evaluated in the application process.
3. Drain Commissioner's determination, at his/her sole discretion, that contractor has failed to demonstrate quality or timely performance of work under a contract with a drainage district or under any other contract for similar work.

*Please note that placement on the list does not guarantee a contractor will be selected to perform work. The Drain Commissioner sustains full discretion and authority to either bid non-petitioned maintenance work or to select any contractor from the prequalified list to perform said non-petitioned maintenance work.



Midland County Drain Commissioner
220 W. Ellsworth St.
Midland, MI 48640
(989) 832-6770

CONTRACTOR PRE-QUALIFICATION APPLICATION

CONTRACTOR/COMPANY INFORMATION

CONTRACTOR NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

CONTACT PERSON: _____ CONTACT CELL #: _____

FAX: _____ EMAIL: _____

ORGANIZATION TYPE: Corporation Partnership LLC/LLP Individual

STATE OF ORGANIZATION: _____ YEARS BUSINESS HAS BEEN ORGANIZED: _____

COMPANY'S BONDING LIMITS:

PER PROJECT: _____

AGGREGATE: _____

NAME OF BONDING AGENT: _____

PLEASE ATTACH THE FOLLOWING:

- Confirmation that you are a current vendor with Midland County
- Completed W9 (N/A if already vendor with County)
- Certificate of liability insurance showing type and current coverage amounts
- Proof of workers compensation insurance or exemption

EQUIPMENT OWNED:

Please check the pieces of equipment in each category that you own:

- | | |
|--|--|
| <input type="checkbox"/> Mini Excavator (Under 12k #) | <input type="checkbox"/> Lead Dump Trailer |
| <input type="checkbox"/> Medium Excavator (12k to 30k#) | <input type="checkbox"/> Single Axle Dump Truck |
| <input type="checkbox"/> Large Excavator (Over 30k #) | <input type="checkbox"/> Tandem/Tri-axle Dump Truck |
| <input type="checkbox"/> Long Reach Excavator | <input type="checkbox"/> Equipment Tag Trailer |
| <input type="checkbox"/> Excavator Mounted Brush Mower (Mini/Med. Excavator) | <input type="checkbox"/> Gravel Train |
| <input type="checkbox"/> Excavator Mounted Brush Mower (Large Excavator) | <input type="checkbox"/> Field Tile Trencher |
| <input type="checkbox"/> Dragline (Under ¾ yard) | <input type="checkbox"/> Trench Box |
| <input type="checkbox"/> Dragline (¾ yard or larger) | <input type="checkbox"/> Straw Mulcher |
| <input type="checkbox"/> Tractor Backhoe | <input type="checkbox"/> Dewatering Pumps (larger than 3") |
| <input type="checkbox"/> Skid Steer Loader | <input type="checkbox"/> Dewatering Well Points |
| <input type="checkbox"/> Rubber Tired Loader | <input type="checkbox"/> Wood Chipper |
| <input type="checkbox"/> Farm Tractor/Landscape Tractor | <input type="checkbox"/> Sewer Vacuum |
| <input type="checkbox"/> Dozer | <input type="checkbox"/> Hydro-seeder |
| <input type="checkbox"/> Semi-tractor/Lowboy | <input type="checkbox"/> Steel Sheet Piling (Over 10') |

Additional equipment you currently own that is not listed above:

REFERENCES/CREDENTIALS:

Please list the county drain commissioners you are currently working for, or have worked for in the past 3 years, and contact person:

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Please list other municipalities/references you are currently working for, or have worked for in the past 3 years, and contact person:

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Please list any pre-qualifications you have, if any (i.e. MDOT, City of _____)

Has your company ever failed to complete any work awarded to you? _____ If so, where and why? (Attach a letter if needed)

Has any officer or partner of your organization ever been an officer or partner of some other organization that failed to complete a construction contract? If so, state name of individual, other organization, and reason for not completing contract (Attach a letter if needed)

DRAIN CONSRUCTION ABILITIES:

Please check the type of work your company has the equipment, manpower, and experience to complete:

- | <u>Enclosed Drain</u> | <u>Open Drain</u> |
|---|--|
| <input type="checkbox"/> Storm Sewer, up to 5' deep | <input type="checkbox"/> Open Drain Cleanout |
| <input type="checkbox"/> Storm sewer, 5' to 10' deep | <input type="checkbox"/> Licensed herbicide contractor |
| <input type="checkbox"/> Storm sewer, deeper than 10' | <input type="checkbox"/> Woody Debris Management |
| <input type="checkbox"/> Maximum diameter of pipe capable of installing | <input type="checkbox"/> Brush Mowing |
| <input type="checkbox"/> Sewer Televising | <input type="checkbox"/> ROW/Easement Clearing |
| <input type="checkbox"/> Sewer Jetting, Hydro Excavation | <input type="checkbox"/> Landscaping/Restoration Work |

List other areas of experience you believe would be applicable to drain maintenance:

I, the undersigned, in applying to be placed on the Pre-Qualified Contractor's List for non-petitioned maintenance, certify and attest that the above provided information is, to the best of my knowledge, true and accurate.

Applicant Signature: _____ Date: _____