

STATE OF HAWAII  
STANDARD  
QUALIFICATION QUESTIONNAIRE  
FOR  
OFFERORS  
issued by the  
PROCUREMENT POLICY BOARD  
STATE OF HAWAII

To be filed with the procurement officer calling for offers  
in accordance with Section 103D-310, HRS, as amended.

**Project:**                   **Cultural Public Market**  
                                  **Hawaii Community Development Authority**  
                                  **RFP No.: HCDA 01-2014**

Submitted By \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

## STANDARD QUALIFICATION QUESTIONNAIRE

COVERING EXPERIENCE, EQUIPMENT AND FINANCIAL STATEMENT OF OFFERORS. THE OFFICER CALLING FOR OFFERS MAY REQUIRE THE OFFEROR TO FURNISH ADDITIONAL INFORMATION NOT SPECIFICALLY COVERED HEREIN. ALL ITEMS MUST BE ANSWERED AND OMISSIONS MAY BE CONSIDERED GOOD CAUSE FOR UNFAVORABLE CONSIDERATION.

### GENERAL INFORMATION

1. The statements contained in this Questionnaire are being furnished for consideration in submitting an offer for the following project:
  - (a) Project Title \_\_\_\_\_
  - (b) Location \_\_\_\_\_
  - (c) Offer Due Date \_\_\_\_\_
  
2. The Questionnaire is being submitted in behalf of:
  - (a) Name of Offeror \_\_\_\_\_
    - A Corporation
    - A Partnership
    - An Individual
    - A Joint-Venture
  - (b) Address \_\_\_\_\_
  - (c) Telephone No. \_\_\_\_\_
  - (d) Date Submitted \_\_\_\_\_
  
3. If the bid is submitted by a joint venture, composed of two or more individual firms, then each member firm comprising the joint venture must submit all information listed on pages 3 through 16, inclusive, of the Questionnaire and, in addition, answer the following:
  - (a) Members of joint Venture \_\_\_\_\_
  - (b) Date of Joint Venture Agreement \_\_\_\_\_
  - (c) Is agreement between members comprising the joint venture joint and several liability? \_\_\_\_\_

If not, state the terms of agreement in this respect: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EXPERIENCE QUESTIONNAIRE

Submitted by \_\_\_\_\_

- A Corporation
- A Partnership
- An Individual
- A Joint-Venture

Principal Office \_\_\_\_\_

**The signatory of this questionnaire guarantees the truth and accuracy of all statements and of all answers to interrogatories hereinafter made.**

1. How many years has your organization been in business as a [General Contractor, Developer, Design Professional, Etc.] under your present business name? \_\_\_\_\_  
\_\_\_\_\_
  
2. How many years experience in [design, construction] \_\_\_\_\_ has your organization had: (A) as a [General Contractor] \_\_\_\_\_; (B) as a [Developer] \_\_\_\_\_; (C) as a [Designer] \_\_\_\_\_; (D) as a [Other] \_\_\_\_\_
  
3. Show what projects your organization has completed in the past five (5) years in the following tabulation:

Contract Amount	Description	Date Completed	Name and Address of Owner

4. Have you ever failed to complete any work awarded to you?\_\_\_\_\_ If so, state when, where and why?\_\_\_\_\_

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5. Has any officer or partner of your organization in the past five (5) years been an officer or partner of some other organization that failed to complete a contract? If so, state name of individual, other organization and reason therefore.\_\_\_\_\_

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6. Has any officer or partner of your organization in the past five (5) years failed to complete a contract handled in his own name?\_\_\_\_\_ If so, state name of individual, name of Owner and reason therefore.

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7. In what other lines of business are you financially interested?\_\_\_\_\_

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8. For what corporations or individuals in the past five (5) years have you performed work, and to whom do you refer?\_\_\_\_\_

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9. For what counties within the State of Hawaii have you performed work and to whom do you refer?

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10. For what Bureaus or Departments of the State government -have you performed work and to whom do you refer?

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11. Have you performed work for the U. S. Government? \_\_\_\_\_ If so, when and to whom do you refer?

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12. Have you ever performed any work for any other governmental agencies outside the State of Hawaii? If so, when and to whom do you refer?

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13. What is the experience of the principal individuals of your organization? Partnership? Joint Venture?

Individual's Name	Position	Years of Work Experience	Magnitude and Type of Work

14. In what manner have you inspected this proposed work?

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15. Explain your plan or layout for performing the proposed work.

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16. The work, if awarded to you, will have the personal supervision of whom?

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17. Do you intend to sublet any other portions of the work (Design or Construction)? \_\_\_\_\_  
If so, state the name of the subcontractor/subconsultant. \_\_\_\_\_

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18. From which sub-contractors or agents do you expect to require a bond? \_\_\_\_\_

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## FINANCIAL STATEMENT

Submitted by \_\_\_\_\_

- A Corporation
- A Partnership
- An Individual
- A Joint-Venture

Principal Office \_\_\_\_\_

**The signatory of this questionnaire guarantees the truth and accuracy of all statements and of all answers to interrogatories hereinafter made.**

### STATEMENTS OF INCOME AND RETAINED EARNINGS For the Years Ended 2012 and 2013

	<u>2012</u>	<u>2013</u>
Contract revenues	\$ _____	\$ _____
Costs of contracts	\$ _____	\$ _____
Gross income from contracts	\$ _____	\$ _____
General and administrative expenses	\$ _____	\$ _____
Income from operations	\$ _____	\$ _____
Other income (expense)	\$ _____	\$ _____
Income before income taxes	\$ _____	\$ _____
Income taxes	\$ _____	\$ _____
Net income	\$ _____	\$ _____
Retained earnings, beginning of the year	\$ _____	\$ _____
Retained earnings, end of the year	\$ _____	\$ _____

If a corporation, answer this:

If a partnership, answer this:

Capital paid in cash, \$ \_\_\_\_\_

Date of organization: \_\_\_\_\_

When Incorporated: \_\_\_\_\_

Date registered in Hawaii: \_\_\_\_\_

In what State: \_\_\_\_\_

State whether partnership is general or limited: \_\_\_\_\_

Date registered in Hawaii: \_\_\_\_\_

\_\_\_\_\_

President's Name: \_\_\_\_\_

Name and address of partners: \_\_\_\_\_

Vice President's Name: \_\_\_\_\_

\_\_\_\_\_

Secretary's Name: \_\_\_\_\_

\_\_\_\_\_

Treasurer's Name: \_\_\_\_\_

\_\_\_\_\_

**The undersigned hereby declares: that the foregoing is a true statement of the financial condition of the individual, partnership or corporation herein first named, as of the date herein first given; that this statement is for the express purpose of inducing the party to whom it is submitted to award the offeror a contract; and that any depository, vendor or other agency herein named is hereby authorized to supply such party with any information necessary to verify this statement.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE: A partnership must give firm name and signatures of all partners. A corporation must give full corporate name, signature of official, and affix corporate seal.**

\_\_\_\_\_

**Affidavit for Individual**

STATE OF HAWAII )  
 ) SS.  
COUNTY OF \_\_\_\_\_)

\_\_\_\_\_, being duly sworn, deposes and says that the foregoing financial statement, taken from his/her books, is a true and accurate statement of his/her financial condition as of the date thereof and that the answers to the foregoing interrogatories are true.

Further affiant sayeth not.

\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

\_\_\_\_\_

My commission expires: \_\_\_\_\_

Doc. Date: _____ # Pages: _____
Notary Name: _____ Circuit _____
Doc. Description: _____
_____
_____
Notary Signature _____ Date _____
NOTARY CERTIFICATION

**Affidavit for Partnership**

STATE OF HAWAII )  
 ) SS.  
COUNTY OF \_\_\_\_\_)

\_\_\_\_\_, being duly sworn, deposes and says  
that he/she is a member of the firm of \_\_\_\_\_;  
and that he/she is familiar with the books of the said firm showing its financial condition: that the  
foregoing financial statement, taken from the books of the said firm, is a true and accurate  
statement of the financial condition of the said firm as of the date thereof and that the answers to  
the foregoing interrogatories are true.

Further affiant sayeth not.

\_\_\_\_\_

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_, 2014.

\_\_\_\_\_

My commission expires:\_\_\_\_\_

Doc. Date:_____ # Pages:_____
Notary Name:_____ Circuit
Doc. Description:_____
_____
_____
Notary Signature                      Date
NOTARY CERTIFICATION

**Affidavit for Corporation**

STATE OF HAWAII )  
 ) SS.  
COUNTY OF \_\_\_\_\_)

\_\_\_\_\_, being duly sworn, deposes and says that he/she is \_\_\_\_\_ of the \_\_\_\_\_, the corporation described in and which executed the foregoing statement; that he/she is familiar with the books of the said corporation showing its financial condition; that the foregoing financial statement, taken from the books of the said corporation, is a true and accurate statement of the financial condition of said corporation as of the date thereof and that the answers to the foregoing interrogatories are true.

Further affiant sayeth not.

\_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

\_\_\_\_\_

My commission expires: \_\_\_\_\_

Doc. Date: _____ # Pages: _____	
Notary Name: _____ Circuit _____	
Doc. Description: _____	
_____	
_____	
Notary Signature	Date
NOTARY CERTIFICATION	