



**JOHNSON COUNTY, IOWA  
Post-Bid Information**

**GENERAL CONTRACTOR QUALITY ASSURANCE  
QUESTIONNAIRE**

Pursuant to Iowa Code §26.9 which requires that contracts for public improvements be awarded to the "lowest responsive, responsible bidder," and also recognizes that a governmental entity may obtain information from the lowest responsible bidder to determine bidder's responsibility relating to the bidder's experience, number of employees, and ability to finance the cost of the public improvement, and in accordance with Iowa law allowing public entities to consider factors other than price in determining who is the lowest responsible bidder; Johnson County does hereby provide the following Questionnaire to the bidder to whom award of a Contract is under consideration ("Contractor") submitting bids for work on the \_\_\_\_\_ ("Project"). The fully completed Questionnaire, with attachments, shall be submitted to the Special Project Manager **within 14 calendar days of notification** to the apparent lowest bidder. Contractors who do not complete the following questionnaire may be deemed to be non-responsive or non-responsible.

1. Full name of Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_  
Email \_\_\_\_\_
  
2. All other names under which Contractor has operated in the past five (5) years: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Provide Contractors' Registration Number and full names of Registration Holders as per Iowa Construction Contractor Registration requirements: \_\_\_\_\_  
\_\_\_\_\_  
Contractor Registration Expiration Date \_\_\_\_\_
  
4. Has Registration ever been suspended or revoked in any jurisdiction?
  - a. Yes \_\_\_\_
  - b. No \_\_\_\_If "yes", provide information regarding suspension/revocation and attach all relevant documents.

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5. Within the past five (5) years, has Contractor been debarred by any federal, state or local governmental entity from bidding on projects?
- Yes \_\_\_
  - No \_\_\_
- If "yes", provide information related to debarment.
6. On a separate sheet, list construction projects in value in excess of \$5 million dollars that Contractor has in progress, giving the name of the project, owner, architect, contract amount, key Contractor personnel, percent complete and scheduled completion date.
7. On a separate sheet, list the major projects Contractor has completed in the past three (3) years, giving the name of the project, owner, architect, contract amount, Officer in Charge, Project Manager, Project Superintendent and any other key Contractor personnel, date of completion and percentage of the total project performed by your own employees.
8. On a separate sheet, identify the individuals Contractor intends to be the Officer in Charge, Project Manager, Project Superintendent and any other key personnel on this project.
9. On a separate sheet, list the Contractors last five (5) completed projects, and for each, the scheduled completion date and the final completion date, noting any owner approved extensions.
10. Within the past three (3) years, has Contractor defaulted on a contract, or been disqualified, removed or otherwise prevented from bidding on or completing any project?
- Yes \_\_\_
  - No \_\_\_
- If "yes", provide the year of the incident, name, address and telephone number of the owner of the project, project name and location.
11. Has Contractor ever been unable to obtain a bond or been denied a bond?
- Yes \_\_\_
  - No \_\_\_
- If "yes", please provide all relevant details.
12. On a separate sheet, list all surety/bonding companies Contractor has utilized in the past five (5) years.
13. Has Contractor ever declared bankruptcy or been in receivership?
- Yes \_\_\_
  - No \_\_\_
- If "yes", please provide all relevant details.
14. Is Contractor currently being investigated for or previously been found to have violated in the past five (5) years any of the following state or federal laws: Iowa Minimum Wage Act; Iowa

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Non-English Speaking Employees Act; Iowa Child Labor Act; Iowa Labor Commissioner's Right to Inspect Premises, Iowa Compensation Insurance Act; Iowa Employment Security Act; Iowa Competition Act; Iowa Income, Corporate and Sales Tax Code; a "willful" violation of the Iowa or Federal Occupational Safety and Health Act; Iowa Employee Registration Requirements; Iowa Hazardous Chemical Risks Act; Iowa Wage Payment Collection Act; Federal Income and Corporate Tax Code; The National Insurance and Social Security Act; The Fair Labor Standards Act:

a. Yes \_\_\_

b. No \_\_\_

If "yes", please explain:

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15. Has Contractor ever failed to complete any work awarded to it?

a. Yes \_\_\_

b. No \_\_\_

If "yes", please provide all relevant details.

16. Are there any judgments, arbitration proceedings or suits pending or outstanding against Contractor or its officers that relate to, arise out of or are in the course of the Contractor's business?

a. Yes \_\_\_

b. No \_\_\_

If "yes", please provide all relevant details.

17. Has Contractor filed any lawsuit or demanded arbitration with regard to any construction contract within the past five (5) years?

a. Yes \_\_\_

b. No \_\_\_

If "yes", please provide all relevant details.

18. Has Contractor been found by a court or agency of competent jurisdiction to be delinquent in meeting its obligations under local, state or federal tax laws within the last five (5) years? ("delinquent" shall include, but is not limited to: failure to file, failure to pay or imposition of tax liens)

a. Yes \_\_\_

b. No \_\_\_

If "yes", please provide all relevant details.

19. Contractor affirms that it will retain only subcontractors who can fully comply with the bid specifications, including those that address requirements concerning the Subcontractor Quality Assurance Bid Requirements.

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- a. Yes \_\_\_
  - b. No \_\_\_

20. Contractor affirms that it will be responsible for ensuring that each subcontractor meets the Subcontractor Quality Assurance Bid Requirements.

- a. Yes \_\_\_
- b. No \_\_\_

21. Contractor agrees to submit to the Johnson County Special Projects Manager a list of all intended subcontractors **within 14 calendar days on notification** to the apparent lowest bidder. (In the event Contractor wishes to replace any originally- designated subcontractor or add a subcontractor, such may only occur with the approval of Johnson County. Such approval will not be unreasonably withheld)

- a. Yes \_\_\_
- b. No \_\_\_

22. Contractor attests that it will comply with each of the following:

Iowa's Minimum Wage Law:

- a. Yes \_\_\_
- b. No \_\_\_

Maintain workers' compensation insurance or be qualified as a self-insurer and provide proof of insurance or ability to self-insure upon request.

- a. Yes \_\_\_
- b. No \_\_\_

Properly license Contractor employees with the appropriate licensing authority.

- a. Yes \_\_\_
- b. No \_\_\_

23. Contractor will make available to the County or County's representative, upon County's request, documentation to satisfy the County, in Counties' sole discretion, that the Contractors' workers utilized on this project are actual employees, with unemployment and workers' compensation coverage not "leased employees" or independent contractors.

- a. Yes \_\_\_
- b. No \_\_\_

24. That Contractor will provide with this Questionnaire, the name, address, phone number and name of contact for three (3) entities which will provide references.

- a. Yes \_\_\_
- b. No \_\_\_

25. Contractor will only utilize on-site employees who have completed the Occupational Safety and Health Act (OSHA) 10 hour Construction Industry Training Program.

- a. Yes \_\_\_\_  
b. No \_\_\_\_

Provide Contractor's Federal ID Number \_\_\_\_\_

Provide Name and address of Contractor's Registered Agent \_\_\_\_\_  
\_\_\_\_\_

I hereby certify, that (1) all of the information provide by me in this Questionnaire is true and correct to the best of my knowledge; (2) I am authorized to sign this Questionnaire on behalf of the Contractor whose name appears in Question #1; (3) if any of the information I have provided herein becomes inaccurate, prior to execution of any Project Contract. I will immediately provide the Special Project Manager with updated accurate information in writing; and (4) I hereby authorize any person or entity named herein to provide the Special Project Manager with whatever information might be required to verify this Questionnaire.

THIS STATEMENT MUST BE NOTORIZED

NAME OF CONTRACTOR \_\_\_\_\_

BY: \_\_\_\_\_

Signature

Title

\_\_\_\_\_  
Type/Print Name

\_\_\_\_\_  
Date

STATE OF IOWA, \_\_\_\_\_ County, ss:

Subscribed and sworn to before me by the said \_\_\_\_\_ on this day of

\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public in and for the State of Iowa

\_\_\_\_\_  
Contractor Name

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JOHNSON COUNTY

SPECIAL PROVISION  
CONTRACTURAL REQUIREMENTS  
ON  
<PROJECT NAME>

SUBCONTRACTOR QUALITY ASSURANCE  
BID REQUIREMENTS

The following requirements are intended to be included in the Quality Assurance Sections of the Bid Specifications which the General Contractor will, along with all other quality assurance requirements, be required to manage:

**FOR ALL SUBCONTRACTORS**

Subcontractor must not be under current investigation for or previously have been found to have violated in the last five (5) years any of the following state or federal laws: Iowa Minimum Wage Act, Iowa Non-English Speaking Employees Act, Iowa Child Labor Act, Iowa Labor Commissioner's Right to Inspect Premises, Iowa Compensation Insurance Act, Iowa Employment Security Act, Iowa Competition Act, Iowa Income, Corporate and Sales Tax Code, a "willful" violation of the Iowa or Federal Occupational Safety and Health Act, Iowa Employee Registration Requirements, Iowa Hazardous Chemical Risks Act, Iowa Wage Payment Collection Act, Federal Income and Corporate Tax Code, The National Insurance and Social Security Act, The Fair Labor Standards Act. Subcontractor must notify the Contractor of any current investigation of Subcontractor for violation of any of the above laws.

Subcontractor will only utilize Subcontractor on-site employees that have completed the Occupational Safety and Health Act (OSHA) 10 hour Construction Industry Training Program.

Subcontractor must properly license employees with the appropriate licensing authority.

Subcontractor at all levels, that is even a subcontractor of a subcontractor, will only utilize workers on this Project that have unemployment and workers compensation coverage provided by the subcontractor by which the worker is employed. Subcontractor will make available to General Contractor or Owner such documentation that is necessary to satisfy Owner, in Owner's sole discretion, that subcontractor is in compliance with this provision.

**FOR SELECTIVE SUBCONTRACTS**

*List those subcontracts that will apply*