

**APPLICATION FOR PRE-QUALIFICATION**

**Kittitas PUD No. 1**  
**1400 Vantage Highway**  
**Ellensburg, WA 98926**  
**PHONE: 509-933-7200 ext. 813 FAX: 509-933-7188**  
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Under the provisions of *Title 54.04.085 of the Revised Code of Washington*, Contractors wishing to be considered by **Public Utility District No.1 of Kittitas County** for designation as a pre-qualified bidder for electrical facility construction or improvement work are required to complete the following application and to submit all information as may be required in support thereof:

1. Name of Applicant \_\_\_\_\_
  
2. Address of Applicant:  
Mailing \_\_\_\_\_  
Business \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
Web Site Address \_\_\_\_\_  
Telephone (    ) \_\_\_\_\_ FAX (    ) \_\_\_\_\_
  
3. Contact Person Regarding This Application  
Name \_\_\_\_\_  
Title \_\_\_\_\_  
Telephone (    ) \_\_\_\_\_  
E-mail Address \_\_\_\_\_
  
4. Indicate whether applicant is a ( ) Corporation, ( ) Partnership, or ( ) Individual.
  
5. State in which corporation is incorporated \_\_\_\_\_
  
6. Names and addresses of principal officers of corporation or partnership, their length of time with corporation or partnership, years of experience in this business.  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Number of years applicant has been in business \_\_\_\_\_
8. Has applicant operated under different name previously? \_\_\_\_\_  
 Name: \_\_\_\_\_
9. If applicant is a wholly owned subsidiary of another company, please submit the name and address of the parent company: \_\_\_\_\_  
 \_\_\_\_\_
10. For which of the following classes of work are you seeking pre-qualification as a primary contractor? Indicate by use of "X" in proper square(s).

**A. DISTRIBUTION (15kV):**

- a. Hot work - Overhead.....
- b. Overhead Construction .....
- c. Underground – Primary (15kV) .....
- d. Underground – Secondary (600V) .....
- e. Plowing – cable or Electrical Conduit .....
- f. Trenching – Electrical Conduit .....
- g. Pipe Pushing and Directional Boring.....

**B. TRANSMISSION (35kV to 115kV):**

- a. Hot Work - Overhead.....
- b. Wood Pole .....
- c. Steel Tower.....
- d. Steel or Concrete Poles .....
- e. Stringing & Sagging Conductor.....
- f. Underground.....

**C. SUBSTATION, DE-ENERGIZED:**

- a. Excavation .....
- b. Concrete Foundations.....

**D. SUBSTATION, ENERGIZED (WA State Electrical License Required)**

- a. Excavation .....
- b. Concrete Foundations.....
- c. Complete Installation.....
- d. Panel Fabrication .....
- e. Maintenance of Power Transformer and LTC's.....
- f. Maintenance of High Voltage Breakers (115 kV) .....

**E. LIGHTING:**

- a. Street Lighting Installation.....
- b. Street Lighting Maintenance .....

11. Number of years applicant has performed work for which applicant is bidding \_\_\_\_\_
12. Number of years applicant has contracted as prime contractor \_\_\_\_\_
13. Number of years applicant has been bonded \_\_\_\_\_
14. Name and address of bank, including branch and name of individual in said bank to be contacted for financial reference. \_\_\_\_\_  
\_\_\_\_\_
15. Has applicant ever failed to complete any work awarded. \_\_\_\_\_  
If "Yes" note when, where and why:  
\_\_\_\_\_
16. Complete and attach Appendix A. List clients served within the last five years. List type of work, you are seeking pre-qualification. List:
  - Title of project
  - Name of Owner
  - Location of Project
  - Name of Project Manager and or consultant/engineer
  - Date project completed
  - Amount of project expressed in dollars
  - Describe type of work performed on project
17. Attach letter of bondability from bonding company evidencing their willingness to bond applicant and amount of applicant's bonding capacity.
18. Attach a copy of registration number that shows applicant is currently a registered contractor under provision of *RCW 18.27 No. 223-02-9585*. State of Washington, Department of Labor and Industries:  
Electrical Contractor's License No. \_\_\_\_\_  
Classification: General License No. \_\_\_\_\_  
**Or** specify account number under which industrial insurance, medical aid, etc. payments are reported \_\_\_\_\_
19. Provide Unified Business Identifier (UBI) nine (9) digit number per RCW 18.27 and 19.28 \_\_\_\_\_
20. Attach a general resume setting forth applicant's experience technical qualifications and organizational ability to perform the proposed construction. (*Company Resume*)
21. Attach a list of your supervisory personnel and their qualifications and years of experience, list the number and type of crafts people available.
22. Attach a copy of OSHA 300 Logs for the past three years.
23. Attach a copy of all Labor and Industries citations received within the last three years.
24. What is the maximum amount of work, expressed in dollars, which you consider you are capable of undertaking? \$ \_\_\_\_\_

25. Attach Statement of Financial Condition including Contractor's latest regular dated financial statement, which must contain the following items:

**Comparative Balance Sheets:** (Assets, liabilities, and equity).

**Comparative Income Statements:** (Revenues and expenses).

Name of firm preparing statement \_\_\_\_\_

Submitting an in-complete application or failure to submit financial information will automatically disqualify your application.

26. Applicant affirms that he/she will comply with governmental regulations regarding non-discrimination of employment and employment practices on the basis of race, color or national origin. *Please initial here* \_\_\_\_\_

27. Applicant affirms that he/she will pay wages and benefits for craftsmen employed on PUD work which prevail in the locality on the work as determined by the Department of Labor & Industries. *Please initial here* \_\_\_\_\_

28. Applicant affirms that he/she shall meet and follow all Kittitas PUD #1 safety rules, regulations, and procedures. Rules as adopted by Kittitas PUD #1 shall be adhered and will meet or exceed the current standards of OSHA(Occupational Safety and Health Administration) and WAC296-45(Washington State Department of Labor and Industries) or the APPA(American Public Power Safety Manual). *Please initial here* \_\_\_\_\_

29. All equipment shall have current annual inspections completed prior to presenting to our facility for any work. Verification required. *Please initial here* \_\_\_\_\_

30. Assure that all employees or contractor/labor force have current I-9 forms on file. Please initial here as to verification of current I-9 forms. \_\_\_\_\_

Submitted this \_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
Name of Applicant

**By:** \_\_\_\_\_

**Title:** \_\_\_\_\_

Subscribed and Sworn to me

This \_\_\_\_ day of \_\_\_\_\_, 20\_\_

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

Residing at \_\_\_\_\_

**APPENDIX A**  
*Attach additional pages as needed*

List Types of Work, Seeking Pre-Qualification:

\_\_\_\_\_

Title of Project: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Location of Project: \_\_\_\_\_ Name of Project Manager: \_\_\_\_\_

Date Project Completed: \_\_\_\_\_

Amount of Project, Expressed in Dollars: \_\_\_\_\_

Specific Description of Work Performed:

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



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Date Project Completed: \_\_\_\_\_

Amount of Project, Expressed in Dollars: \_\_\_\_\_

Specific Description of Work Performed:

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

**SAMPLE - APPENDIX A**

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List Types of Work, Seeking Pre-Qualification:

Aa Ab \_\_\_\_\_

Title of Project: LONG LINE FEEDER REBUILD

Name of Owner: BIG TIME UTILITY

Location of Project: BIG ISLAND, WA Name of Project Manager: TOM JOHNSON

Date Project Completed: October 20, 2005

Amount of Project, Expressed in Dollars: \$850,000

Specific Description of Work Performed:

REBUILD EXISTING OVERHEAD FEEDER FROM 1/0 ACSR TO 795 ACSR ON 45-FT WOOD POLES, 8-FT CROSS ARMS FOR 8-MILES RURAL AND 2-MILES URBAN.

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