



CITY OF BRYAN CONTRACTOR REGISTRATION PROGRAM

CLASS III VICINITY AND REPAIR

Application of:

- An Individual
- A Co-Partnership
- A Corporation
- Joint Venture
- Member of Joint Venture
- LLC/LLP/LP

Registered In What State (if applicable)? _____

Official Address _____
(Street) (P.O. Box)

City _____ State _____ (Zip Code)

Phone Number _____ Fax Number _____

E-Mail _____ Cell Phone _____

Contact Person _____ Date Application Prepared _____

OFFICIAL USE ONLY				
Date Received	Received By	Omitted Documents Requested	Omitted Documents Received	Contractor Notice of Approval

Registration Class	Description
I. Capital Project	This registration class is for contractors that desire to bid and construct public infrastructure projects for the City of Bryan. A Sub-contractor may receive stand-alone registration for work on public projects through the class registration. Holders of this registration are automatically registered for Class II, III, and IV.
II. Development	Construction of privately funded infrastructure projects that are inspected, accepted by, and ultimately maintained by the City of Bryan. This includes excavation and embankment, paving, sidewalks and other flatwork, underground utilities, storm sewer and stormwater detention facilities.
<input checked="" type="checkbox"/> III. Vicinity & Repair	Private utility installation and repair within City of Bryan right-of-way, easements, and alleys. This work may include, but is not limited to, telecommunication and wireless node construction, gas line construction, pipeline installation, water lines, and subsurface utility locations requiring excavations.
IV. Residential ¹	Above ground improvements on residential property including: driveways, driveway repair and replacement, culvert installation, walkways, sidewalk construction and repair, masonry mailboxes, etc. Class IV projects will only include shallow excavations (< 18" in depth).

Construction Elements	Registration Class			
	I	II	III	IV
Reinforced concrete street pavement, sidewalk, misc. flatwork	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Asphalt street pavement	<input type="checkbox"/>	<input type="checkbox"/>		
Street pavement grinding/milling	<input type="checkbox"/>	<input type="checkbox"/>		
Gravity sewer pipe (sanitary or storm)	<input type="checkbox"/>	<input type="checkbox"/>		
Pressure sewer pipe (force main)	<input type="checkbox"/>	<input type="checkbox"/>		
Water pipe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sanitary Sewer Lift (pump) Station	<input type="checkbox"/>	<input type="checkbox"/>		
Excavation / Grading	<input type="checkbox"/>	<input type="checkbox"/>		
Drilled piers / pile driving	<input type="checkbox"/>	<input type="checkbox"/>		
Wastewater Treatment Plant Construction / Modification	<input type="checkbox"/>	<input type="checkbox"/>		
Water Well Drilling / Groundwater monitoring wells	<input type="checkbox"/>			
Water Storage Tank (Concrete or Steel)	<input type="checkbox"/>			
Water Production Plants	<input type="checkbox"/>			
Traffic Signalization	<input type="checkbox"/>	<input type="checkbox"/>		
Traffic Control (signage, striping, barricades)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Telecommunications / Fiber			<input type="checkbox"/>	
Gas Main			<input type="checkbox"/>	
Boring (wet, dry, directional)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Park Improvements	<input type="checkbox"/>	<input type="checkbox"/>		
Landscaping ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Subsurface utility locations requiring excavations			<input type="checkbox"/>	

¹ Please refer to the [Design Manual for Right-of-Way Installations](#) - Chapter II Section C. - Registration Information.

² Landscaping – for Class III will only include the repair and/or replacement of disturbed earth and/or flora.

I certify by my signature that:

1. All information provided is truthful and accurate; and, as a contractor working within the Bryan city limits and ETJ, we will comply with all applicable Federal, State and local codes, ordinances, standards, specifications and regulations.
2. I agree to immediately notify the City of any damage to utilities or other public infrastructure that occurs during the work we perform.
3. I acknowledge that all repairs resulting from damage to City facilities will be repaired as prescribed by the City of Bryan Design Manual for Right of Way Installations.

Applicant Name: _____

Title: _____

Applicant Signature _____

State of _____

County of _____

Before me on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, 20____.

Notary Public Signature
(seal)

CONTRACTOR REGISTRATION EVALUATION SCORING

Information supplied in the application will be evaluated upon the criteria as described below. The “Pages” column represents the maximum number of pages allowed for submittal in each specific evaluating criteria. Wherever used, "page" refers to single spaced, 10-point minimum font. The “Points” column represents the maximum points the city can place on evaluating each criteria. The “Points Awarded” column represents the points the city will score for each criteria. See below for additional information regarding requested information.

<i>No business entity may be deemed registered unless a minimum score of 70 points is achieved from the mandatory criteria in Categories A-E listed below</i>			
Criteria	Pages	Points	Consideration Items
A	5	10	Company Introduction, Organization and Integrity
B	10	25	Demonstrate the Competence and Qualifications of the Project Managers / Job Superintendents Responsible For the Construction Activities
C	20	25	Training and Technical Adequacy of the Onsite Personnel
D	30	25	Demonstrate the Ability of the Company to Safely Work Near Public Infrastructure
E	5	15	Knowledge of the Right of Way Permit Requirements, Local Construction Criteria, and Site Conditions in Bryan.
	Total	100	

CONTRACTOR REGISTRATION CONSIDERATION ITEMS

Consideration Item (a): *Company Introduction, Organization and Integrity*

Briefly introduce your Company, providing a summary of the administration, organization and staffing of your Company, including multiple offices, if applicable. Provide completed Performance and Integrity Questionnaire.

- (1) Provide an organizational chart indicating the positions and names of the core management team including down to the job superintendent level.
- (2) Identify the name and address of your organization. Please include federal ID. If maintaining multiple offices, list all.
- (3) Submit proof of the ability to obtain insurance in accordance with the City's requirements.³
- (4) Complete the Performance and Integrity Questionnaire⁴ included in the Appendix.

Consideration Item (b): *Demonstrate the Competence and Qualifications of the Project Managers / Job Superintendents Responsible for the Construction Activities*

State the qualifications of the project manager and/or job superintendent(s) that will be responsible for construction activities within City right-of-way and easements. Of specific interest is personnel having direct control over the onsite daily work. At a minimum, they shall keep current on the below listed training, but further demonstration of qualifications by experience or training shall be provided depending on the area of registration being sought. Demonstrate project management experience, technical competency, qualifications, and compliance with legal requirements by providing a resume which reflects:

- (1) educational background;
- (2) licenses or certifications as applicable;
- (3) continuing education efforts including specific courses and dates;
- (4) documented specialized expertise demonstrating such specialized capabilities pertinent to public infrastructure construction;
- (5) descriptions and examples of specific projects by each individual and their role in the work. This should include at a minimum the following information: Project name/location, Project Description, Company name work performed under, Year completed, Owner representative's name, title, address, and phone number;
- (6) Superintendent Certifications⁵ (see attached form in the Appendix) – Include one for each individual planned to be used as a Superintendent for any project.

Superintendent Expectations:

Each project should have only one Superintendent assigned to it. The Superintendent may have multiple projects to which they are assigned. They are the designated responsible parties with whom the City of Bryan will communicate. The Superintendent needs to be available on site regularly or during critical points in the project and available by phone at all times. Additional expectations include but are not limited to:

- Be familiar with the City of Bryan Design Manual for Right-Of-Way Installations and permitting process
- Contact the City inspector at least 48 hours before commencing work
- Oversee the implementation of the Traffic Control Plan and/or coordination with the subcontractor hired to provide Traffic Control
- Identify and immediately report any damage to City facilities

³ Appendix pg. 2

⁴ Appendix pg.3

⁵ Appendix pg. 1

Superintendents, Foremen or Crew Leaders shall provide documentation of the following certifications and/or continuing education (maximum of 3 years old):

Construction Element	REQUIRED TRAINING				
	OSHA 10 or equal	OSHA 30 or equal	Workzone Traffic Control*	Trench Safety	Stormwater MS4
Telecommunications/Fiber	✓		✓		✓
Gas Main		✓	✓		✓
Directional Boring			✓		✓
Water Lines	✓		✓	✓	✓
Pipelines		✓	✓	✓	✓
Subsurface Utility Locations Req. Excavations	✓		✓		✓

**If traffic control is furnished by an outside firm, list provider in Consideration Item (a) and provide contract information for the individual that is responsible for implementation. Note that failure to maintain adequate traffic control will result in the revocation of your Contractor Registration, regardless of who is providing the traffic control measures.*

If your company provides in-house safety training that is equivalent to the requirements listed in the table on page 5, provide the following information:

- (1) Course/training session name
- (2) Copy of course materials and topics covered
- (3) Duration of training
- (4) Sign in sheet or other proof showing employee attendance

Consideration Item (c): *Training and Technical Adequacy of the Onsite Personnel.*

The Company must be able to staff the project with personnel who possess talent and expertise in the field of Construction. Indicate the number of personnel by skill and qualification presently employed by your Company whom you would intend to utilize on public infrastructure projects. Specific information shall include years of construction experience, magnitude and type of work and the capacity of each individual when the experience was obtained.

Attach résumés of professional personnel that may be utilized on these projects. Include educational level, training, experience and related certifications. Attach certificates of continuing education indicating most recent classes.

Demonstrate technical competency, qualifications, and compliance with legal requirements by providing resumes which reflect:

- (1) continuing education efforts including specific courses and dates, including continuing education certificates if available
- (2) documented specialized expertise demonstrating such specialized capabilities pertinent to public infrastructure construction
- (3) descriptions and examples of specific projects by each individual and their role in the work. This should include at a minimum the following information: Project name/location, Project Description, Company name work performed under, Year completed, Owner representative's name, title, address, and phone number
- (4) documented specialized expertise in a particular construction element

Consideration Item (d): *Demonstrate the Ability of the Company to Safely Work Near Public Infrastructure.*

List and briefly describe at least 3 projects completed within the last five years located within a city or municipal utility district which best illustrate your experience **for each construction element that is checked on pg. 2 of this application.**

Include the following information:

- (1) Project name
- (2) Name of the Project Manager and/or superintendent included in Consideration Item (b) or (c)
- (3) Start and completion dates
- (4) Description of the scope of the company's role and list of sub-contractors (if any)
- (5) Describe the size and complexity of each project
- (6) Describe any utility conflicts encountered during construction
- (7) Indicate the type of organization for which work was performed (governmental, private, nonprofit, etc.)
- (8) Name, address, and phone number of the city or utility district contact who can respond to questions about the work

Consideration Item (e): *Knowledge of the Local Construction Criteria, Specifications, Details and Site Conditions in the City of Bryan.*

Briefly describe the Company's experience and knowledge of the City of Bryan, including but not limited to the following local conditions and considerations.

- (1) building material availability and use
- (2) local soil conditions
- (3) environmental issues and considerations
- (4) local design standards and construction specifications

END OF SECTION

APPENDIX

Project Superintendent Certification:

I certify, by my signature on this application, that I am very familiar with the construction standards, specifications, and details associated with building Public Infrastructure in the City of Bryan and that I understand the expectations of the Project Superintendent as outlined in the City of Bryan Public Infrastructure Contractor Registration Program. I further certify that all work will be performed in accordance with applicable federal, state and local codes and regulations.

Project Superintendent Applicant Name: _____

Title: _____

Applicant Signature _____

State of _____

County of _____

Before me on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, 20____.

Notary Public Signature

(seal)



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

EXAMPLE	PRODUCER	CONTACT NAME:		FAX:	
		PHONE (A/C, No, Ext):		(A/C, No):	
		E-MAIL ADDRESS:			
		INSURER(S) AFFORDING COVERAGE		NAIC #	
		INSURER A:			
		INSURER B:			
	INSURER C:				
	INSURER D:				
	INSURER E:				
	INSURER F:				

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS:

INSR LTR	TYPE OF INSURANCE	ADDL. SUBR.		POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS	
		INSR	WVD					
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						EACH OCCURRENCE	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMPROP AGG	\$ 1,000,000
	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR						EACH OCCURRENCE	\$
	EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$
	DED: <input type="checkbox"/> RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OF FICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS #602W		<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A				<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER	
							E.L. EACH ACCIDENT	\$ 500,000
							E.L. DISEASE - EA EMPLOYEE	\$ 500,000
							E.L. DISEASE - POLICY LIMIT	\$ 500,000
	Professional Liability						PER CLAIM/AGGREGATE:	\$1,000,000/ \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Bryan shall be named as additional insured on all Commercial General Liability policies. Workers Compensation and Employer's Liability policies to include a Waiver of Subrogation in favor of the City of Bryan. (All endorsements must be provided when available.)

<p>CERTIFICATE HOLDER</p> <p>City of Bryan Attn: Risk Management Department P.O. Box 1000 Bryan, Tx 77805</p>	<p>CANCELLATION</p> <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> <p>AUTHORIZED REPRESENTATIVE</p>
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ACORD 25 (2014/01)

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Performance and Integrity Questionnaire:

1. How many years (yrs.) has your organization been in business under your present business name?
2. How many yrs. of experience in construction work has your organization had as a:
a) prime contractor b) sub contractor
3. Greatest number of contracts in excess of \$100,000 under construction at one time in the company's history:
4. Greatest number of contracts in excess of \$500,000 under construction at one time in the company's history:
5. Approximate average dollar volume of incomplete work outstanding under contract at any one time:
6. Has your organization ever failed to complete any work awarded? (Yes / No) If so, where and why?
7. Has any officer or partner of your organization ever been an officer or partner of some other organization that failed to complete work under a contract? (Yes / No) If yes, state name of individual, other organization and reason thereof.
8. Has any officer or partner of your organization ever failed to complete work under a contract handled in his own name? (Yes/ No) If yes, state name of individual, name of owner and reason thereof.
9. Within the last 10 yrs. has your company defaulted on any public works project? (Yes / No) If yes, indicate government agency and provide detailed description.
10. Within the last 3 yrs. have you, your company or any officers, agents or employees of you or your company been found to have violated any state or federal prevailing wage statute or regulation (including the federal Davis-Bacon and Related Acts) by the United States Department of Labor or by any court of competent jurisdiction? (Yes / No). If yes, provide copies of the final order or judgement in which this occurred and explain in detail: (circumstances behind a violation including amount not paid, whether the amounts have now been paid, the reasons for the violation, all efforts undertaken to ensure that future violations will not occur).
11. Have you pledged or transferred title to any of your equipment or other assets in favor of a surety company as part of an indemnity agreement for the issuance of a performance bond by any such surety? (Yes / No). If Yes, give date of transfer and also name / address of surety company requiring such transfer.
12. In what other lines of business are you financially interested?
13. List any organization owned or controlled by the applicant, its officers, directors, partners or anyone owning 10% interest in the Company or in which the applicant was or is an officer, partner, doing business in Texas under another name. If none, state so.
14. Is your Company under the protection of the bankruptcy court, have any pending petition in bankruptcy court, or have you made assignment for the benefit of creditors? (Yes / No) If yes, give detailed explanation.
15. In last 10 yrs. has your company received any unsatisfactory safety ratings or been in violation of any OSHA requirements/regulations. (Yes / No) If yes, give detailed explanation
16. In the last 10 yrs. has your company filed a formal claim against the City of Bryan or other municipality in the State of Texas? (Yes / No) If yes, please indicate project(s), claim amount and settlement amount.
17. In last 10 yrs. has your company been assessed liquidated damages on any City of Bryan or other municipal project in the State of Texas? (Yes / No) If yes, please indicate project, liquidated damage days assessed and amount.
18. Has your Company or any officer of your Company been indicted, pled guilty or been convicted of any offense that resulted in your Company currently being debarred or suspended from bidding or performing work for any State, local or Federal Government agency? If yes, please indicate government agency and provide detailed explanation.