

OHIO TURNPIKE AND
INFRASTRUCTURE COMMISSION
682 Prospect Street
Berea, Ohio 44017
440-234-2081
www.ohioturnpike.org



CONFIDENTIAL

FINANCIAL STATEMENT

AND EXPERIENCE QUESTIONNAIRE

Used in Qualifying Bidders on Ohio Turnpike Work

Company Name _____

Address _____

City _____ State _____ Zip _____

Telephone No. (____) _____ E-Mail _____

Submitted by _____

Date _____

NOTE: All Bidders must complete the Experience Questionnaire and Affidavit. However, if you have an audited financial statement which is a year or less old, such document may be submitted in lieu of the Contractor's Financial Statement.

CONTRACTOR'S EXPERIENCE QUESTIONNAIRE

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

Name of Contractor _____	CHECK ONE: <input type="checkbox"/> A Corporation <input type="checkbox"/> A General Co-Partnership <input type="checkbox"/> A Limited Co-Partnership <input type="checkbox"/> An Individual <input type="checkbox"/> Joint Venture
Principal Address _____	
Incorporated or Organized - Date _____ State _____	
Radius of Operation _____	
Type of Work Done _____	
Other Lines of Business _____	
Work Usually Sublet _____	

1. How many years have you operated under the above name (a) As General Contractor? _____
(b) As Sub-Contractor? _____

2. If you succeeded some other organization, indicate:

NAME OF PREDECESSOR	TYPE OF WORK DONE	OPERATED DURING PERIOD

3. List of all Partners or Officers (Note: If partnership limited, explain fully):

NAME AND TITLE	ADDRESS – CITY AND STATE	FRACTIONAL INTEREST IN FIRM OR NO. OF SHARES OWNED

4. List all Subsidiaries and Affiliates:

NAME OF COMPANY	ADDRESS – CITY AND STATE	TYPE OF BUSINESS

5. List other Businesses in which any Partner or Officer is actively engaged:

NAME OF OTHER COMPANY	PARTNER OR OFFICER INTERESTED	EXTENT OF HIS OR HER INTEREST

6a. List of Key Personnel and their position within the organization:

NO.	NAME	POSITION	AGE	YEAR HIRED	PRESENT POSITION OR CAPACITY
(a)					
(b)					
(c)					
(d)					
(e)					
(f)					
(g)					

6b. Provide Construction Experience of Key Personnel identified above.

NO.	FROM (YEAR TO YEAR)	NAME AND PLACE OF TRAINING OR EMPLOYMENT	TYPE OF TRAINING OR CAPACITY EMPLOYED
(a)			
(b)			
(c)			
(d)			
(e)			
(f)			
(g)			

6c. List Full-Time, Year-Round Staff by Title or Trade (i.e. Project Managers, Office Assistants, Carpenter, Laborers, Plumbers, Electricians):

Position	Number of Employees	Cumulative Years with firm	Cumulative Years of Experience	Description of Position's Duties or Capacities

7. List Contracts on which Work Is Not Completed:

NO.	DATE AWARDED	NAME OF OWNER AND ADDRESS	JOB LOCATION AND PROJECT NUMBER	TYPE OF WORK	CONTRACT AMOUNT	%COMP.
1						
2						
3						
4						
5						
6						
7						

8. List Major Improvements Completed By Your Organization in the last three (3) years:

NO.	NAME OF OWNER, ADDRESS AND PHONE NUMBER	LOCATION PROJECT NUMBER	TYPE OF WORK	DATE AWARDED DATE COMPLETED
1				
2				
3				
4				
5				

9. Capacity:

LAST YEAR

YEAR BEFORE LAST

(a) Aggregate volume of Contract Sales

(b) Approximate amount of (a) that was sublet

Volume directly performed

(c) Largest volume on hand at any one time

10. List of Subcontractors you intend to use on this project for major items of work:

NAME OF SUBCONTRACTOR	ADDRESS	TYPE OF WORK SUBLET

11. List of Surety Companies that have written surety bonds for you last 2 years:

NAME OF SURETY COMPANY	ADDRESS	LARGEST CONTRACT BONDED

12. List of Companies from whom you have purchased equipment last 2 years:

NAME OF COMPANY	ADDRESS	EQUIPMENT PURCHASED

13. List Producers, Manufacturers and Jobbers from whom you have purchased principal materials during the last year:

FROM WHOM PURCHASED	ADDRESS	TYPE OF MATERIAL

14. Liens, Suits, Judgments, Defaults and Contingent Liabilities:

- (a) Have you ever failed in business or compromised with creditors? _____
- (b) Has your company ever failed to complete a contract? _____. If yes, identify the contract and the owner/
public authority and the reason for the failure: _____

- (c) 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 yes, identify the name of individual, the other organization,
and the contract, the owner/public authority and the reason for the failure: _____

- (d) Has any officer or partner of your organization ever failed to complete a construction project handled in their own
name? _____. If yes, state name of individual, name of owner and reason for the failure: _____

- (e) Are you financially interested in any other lines of business? _____. If yes, identify the business interest: _____

- (f) Have any liens ever been filed against any of your work? _____. If yes, identify the project and amounts: ____

- (g) Have you ever failed to qualify for bond after an award? _____
- (h) Have you ever had any serious controversy with anyone on any of your work or over the payment for labor or
material? _____
- (i) Are there any judgments, suits or claims pending against you? _____. If yes, identify the matter(s) and
amount(s): _____
- (j) Are there any judgments, suits or claims pending against your partners? _____. If yes, identify the matter(s) and
amount(s): _____
- (k) Are you acting as surety or bondsman for others? _____. If yes, identify the projects(s) and penal sum(s): ____

- (l) Are you acting as endorser for others on their notes or accounts? If yes, identify the projects(s) and amounts(s):

FURTHER EXPLAIN FULLY ANY AFFIRMATIVE ANSWERS:

CONTRACTOR'S FINANCIAL STATEMENT

STATEMENT OF ASSETS AND LIABILITIES AS OF _____, 20____

All assets must be wholly owned by applicant. Separate statements from indemnitors required.

1. Cash in Banks				
2. Cash on Hand (Explain)				
3. Bid Checks and Deposits				
4. Accounts Receivable from Sources Other than Construction Contract				
5. Accounts Receivable - Construction Contracts:				
a. Completed Contracts	\$ _____			
b. Earned Estimates - Uncompleted Contracts	\$ _____			
c. Retained Percentages - Uncompleted Contracts	\$ _____			
6. Materials and Supplies on Hand:				
a. For Contracts Underway (Not included in items 4 and 5)	\$ _____			
b. Other Materials	\$ _____			
7. Cash Surrender Value Life Insurance (Less policy loans)				
8. Marketable Securities				
9. Other Securities				
	TOTAL	CURRENT ASSETS		
10. Notes Receivable				
11. Prepaid Expense				
12. Land and Buildings:				
a. Cost	\$ _____			
b. Less Reserve for Depreciation	\$ _____			
13. Equipment:				
a. Cost	\$ _____			
b. Less Reserve for Depreciation	\$ _____			
14. Furniture and Fixtures				
15. Other Assets				
		TOTAL ASSETS		
16. Notes Payable:				
a. Banks (Exclusive of equipment obligations)	\$ _____			
b. Material & Equipment Suppliers (Exclude Notes Due After 1 YR)	\$ _____			
c. Others	\$ _____			
17. Accounts Payable:				
a. Material Suppliers	\$ _____			
b. Subcontractors	\$ _____			
c. Others	\$ _____			
18. Accrued Payrolls, Interest, Other Expenses				
19. Accrued Taxes:				
a. Withholding Tax	\$ _____			
b. Estimated Federal Income Tax (Current and prior years)	\$ _____			
c. Social Security Taxes	\$ _____			
d. Other	\$ _____			
20. Mortgages Due within One Year (Schedules 12 and 13)				
	TOTAL	CURRENT LIABILITY		
21. Mortgages Due after One Year (Schedule 12)				
22. Equipment Notes (Schedule 13) Due after One Year				
23. Reserves (Explain)				
24. Other Liabilities				
25. Capital Stock (Paid up) if a Corporation				
26. Net Worth				
		TOTAL LIABILITIES		

1 Cash in Banks \$ _____		
NAME AND ADDRESS OF BANK	DEPOSIT IN NAME OF	AMOUNT

3 Bid Checks and Deposits \$ _____			
DEPOSITED WITH - NAME AND ADDRESS	FOR WHAT	WHEN RECOVERABLE	AMOUNT

4* Accounts Receivable - Material Sales, Equipment Rentals, Etc \$ _____			
RECEIVABLE FROM - NAME AND ADDRESS	FOR WHAT	WHEN DUE	AMOUNT
Have any of the above been assigned, sold or pledged? _____			
If so, state amount, to whom, and reason _____			

5* Accounts Receivable - Construction Contracts..... \$ _____					
RECEIVABLE FROM - NAME AND ADDRESS	TOTAL AMOUNT OF CONTRACT	TOTAL AMOUNT EARNED	TOTAL ALREADY PAID	ACCOUNTS RECEIVABLE	
				RETAINAGE	PAYABLE NOW
Have any of the above been assigned, sold or pledged? _____					
If so, state amount, to whom, and reason _____					

* List separately each item amounting to 10% or more of total and combine the remainder.

6 Materials and Supplies on Hand (Not included in Items 4 or 5) \$			
DESCRIPTION OF MATERIAL	QUANTITY	ON WHICH CONTRACT DO YOU INTEND TO USE IT?	VALUE

7 Cash Value Life Insurance Owned by Contractor \$				
ON WHOSE LIFE	FACE AMT.	PAYABLE TO	COMPANY INSURING	CASH VALUE

Have any loans been made on or have any of the above been assigned or pledged? _____
 If so, state amount, to whom, and reason _____

8 Marketable Securities. \$					
9 Other Securities. \$					
NAME OF SECURITY	PAR VALUE	LAST DIV. DATE -%	MARKET QUOTATION	NO. OF SHARES	VALUE

If any securities are pledged or in escrow, state which, amount, to whom, and the reason _____

10 Notes Receivable. \$				
RECEIVABLE FROM - NAME AND ADDRESS	FOR WHAT	HOW SECURED	DATE OF MATURITY	AMOUNT

Have any of the above been discounted, pledged, or sold? _____
 If so, state amount, to whom, and reason _____

16 Notes Payable (Exclusive of Equipment) \$ _____				
TO WHOM-NAME AND ADDRESS	PURPOSE	WHAT SECURITY	WHEN DUE	AMOUNT

17 * Accounts Payable \$ _____				
TO WHOM-NAME AND ADDRESS	FOR WHAT	DATE DUE	AMOUNT OF RETAINAGE (Include in Total)	TOTAL PAYABLE

20-21 Mortgages (Exclusive of Equipment) \$ _____				
TO WHOM-NAME AND ADDRESS	PURPOSE	WHAT SECURITY	WHEN DUE	AMOUNT

* List items amounting to 10% or more of total and combine the remainder.

22 Notes Payable (On Equipment Only) \$ _____				
TO WHOM - NAME AND ADDRESS	PURPOSE	WHAT SECURITY	WHEN DUE	AMOUNT

24 Other Liabilities \$ _____	
DESCRIPTION	AMOUNT

25	SHARES AUTHORIZED	SHARES OUTSTANDING	AMOUNT
Capital Stock Paid Up { Common _____	_____	_____	\$ _____
{ Preferred _____	_____	_____	\$ _____

AFFIDAVIT

The undersigned hereby declares: that the foregoing is a true statement of the financial condition of the individual, co-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 submitter 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 co-partnership must give firm name and signature of all partners. A corporation must give full corporate name, signature of official and affix corporate seal.

SIGN HERE _____

=====

AFFIDAVIT FOR CORPORATION

STATE OF _____ }
COUNTY OF _____ } ss.:

_____ 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 and experience questionnaire, signed by him/her, taken from the books of the said corporation, is a true and accurate statement of the financial condition of the said corporation as of the date thereof and that the answers to the foregoing interrogatories are true.

Dated at _____ this _____ day of _____ 20__

Notary Public

=====

AFFIDAVIT FOR CO-PARTNERSHIP

STATE OF _____ }
COUNTY OF _____ } ss.:

_____ being duly sworn, deposes and says he/she is a member of the firm of _____; that he/she is familiar with the books of the said firm showing its financial condition; that the foregoing financial statement and experience questionnaire, signed by him/her, 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.

Dated at _____ this _____ day of _____ 20__

Notary Public

=====

AFFIDAVIT FOR INDIVIDUAL

STATE OF _____ }
COUNTY OF _____ } ss.:

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

Dated at _____ this _____ day of _____ 20__

Notary Public