

**CONTRACTOR QUALIFICATION GENERAL QUESTIONNAIRE**

1. Name/Name of Agency/Company:
2. Address:
3. Telephone/FAX:
4. Does your Company anticipate any mergers, transfer of organization ownership, management reorganization, or departure of key personnel within the next twelve (12) months that may affect the organization's ability to carry out its proposal?  
Yes\_\_\_ No\_\_\_
5. Is your Company authorized and/or licensed to do business in California?  
Yes\_\_\_ No\_\_\_ Indicate License#\_\_\_\_\_
6. Where is the Company's corporate headquarters located?
7. a. Does the Company have an office located in California?  
Yes\_\_\_ No\_\_\_
  - b. If the answer to the previous question is "yes", how long has the Company conducted business from its California office?  
\_\_\_\_\_(years) \_\_\_\_\_(months)
  - c. State the number of full-time employees at the California office.
8. a. If the Company does not have a California office, does the Company have an office located in another State?  
Yes\_\_\_ No\_\_\_
  - b. If the answer to the previous question is yes, how long has the Company conducted business from its other State office?  
\_\_\_\_\_(years) \_\_\_\_\_(months)
  - c. State the number of full-time employees:
9. Has the Company or any of its principals been debarred or suspended from contracting with any public entity? Yes\_\_\_ No\_\_\_

If yes, identify the public entity and the name and current phone number of a representative of the public entity familiar with the debarment or suspension, and state the reason for or circumstances surrounding the debarment or suspension, including but not limited to the period of time for such debarment or suspension.

10. Indicate person whom the HACCC may contact concerning your proposal or setting dates for meetings.  
Name:  
Address:  
Telephone:  
FAX:  
Email:
11. Surety Information  
Have you or the Company ever had a bond or surety canceled or forfeited? Yes ( ) No ( ).

If yes, state the name of the bonding company, date, amount of bond and reason for such cancellation or forfeiture.

12. Bankruptcy Information

Have you or the Company ever been declared bankrupt or filed for protection from creditors under state or federal proceedings? Yes ( ) No ( )

If yes, state the date, court, jurisdiction, cause number, amount of liabilities and amount of assets.

13. Provide any other names under which your business has operated within the last 10 years.