

SPECIAL NOTICE TO AWARDING AUTHORITY
BIDDERS' UPDATE STATEMENTS ARE NOT PUBLIC RECORDS AND
ARE NOT OPEN TO PUBLIC INSPECTION (M.G.L. C.149, §44D)

Commonwealth of Massachusetts
Division of Capital Asset
Management

UPDATE STATEMENT

TO ALL BIDDERS AND AWARDING AUTHORITIES

A COMPLETED AND SIGNED UPDATE STATEMENT MUST BE SUBMITTED WITH EVERY BID FOR A CONTRACT SUBJECT TO M.G.L. C.149, §44A. ANY BID SUBMITTED WITHOUT AN APPROPRIATE UPDATE STATEMENT IS INVALID AND MUST BE REJECTED.

BIDDER'S AFFIDAVIT

I swear under the pains and penalties of perjury that I am duly authorized by the bidder named below to sign and submit this Update Statement on behalf of the bidder named below, that I have read this Update Statement, and that all of the information provided by the bidder in this Update Statement is true, accurate, and complete as of the bid date.

Bid Date

Print Name of Bidder

Project Number (or
name if no number)

Business Address

Awarding Authority

Telephone Number

SIGNATURE ⇨

Bidder's Authorized Representative

INSTRUCTIONS

INSTRUCTIONS TO BIDDERS

- You must give complete and accurate answers to all questions and provide all of the information requested. **MAKING A MATERIALLY FALSE STATEMENT IN THIS UPDATE STATEMENT IS GROUNDS FOR REJECTING YOUR BID AND FOR DEBARRING YOU FROM ALL PUBLIC CONTRACTING.**
- Information is to cover the period from the date your most recent annual Certificate of Eligibility was issued (not extended) to the date of the bid.
- You must use this official form of Update Statement. Copies of this form may be obtained from the awarding authority and from the Asset Management Web Site: www.state.ma.us/cam/.
- If additional space is needed, please copy the appropriate page of this Update Statement and attach it as an additional sheet.
- See the section entitled "Bidding Limits" in the *Instructions to Awarding Authorities* for important information concerning your bidding limits.

INSTRUCTIONS TO AWARDING AUTHORITIES

Determination of Bidder Qualifications

- It is the awarding authority's responsibility to determine who is the lowest eligible and responsible bidder. You must consider all of the information in the low bidder's Update Statement in making this determination. **Remember:** this information was not available to the Division of Capital Asset Management at the time of certification.
- The bidder's performance on the projected listed in Parts 1 and 2 must be part of your review. Contact the project references.
- **AWARDING AUTHORITIES ARE STRONGLY ENCOURAGED TO REVIEW THE LOW BIDDER'S ENTIRE CERTIFICATION FILE AT THE DIVISION OF CAPITAL ASSET MANAGEMENT. Telephone (617) 727-9320 for an appointment.**
- If you determine that the bidder does not demonstrably possess the skill, ability, and integrity necessary to perform the work on your project, you must reject the bid.

Bidding Limits

Single Project Limit: The total amount of the bid, including all alternates, may not exceed the bidder's Single Project Limit.

Aggregate Work Limit: The annual value of the work to be performed on the contract for which the bid is submitted, when added to the annual cost to complete the bidder's other currently held contracts, may not exceed the bidder's

Aggregate Work Limit. Use the following procedure to determine whether the low bidder is within its Aggregate Work Limit:

- Step 1** Review Update Statement Question #2 to make sure that all requested information is provided and that the bidder has accurately calculated and totaled the annualized value of all incomplete work on its currently held contracts (column 9).
- Step 2** Determine the annual dollar value of the work to be performed on your project. This is done as follows:
- (i) If the project is to be completed in less than 12 months, the annual dollar value of the work is equal to the full amount of the bid.
 - (ii) If the project will take more than 12 months to complete, calculate the number of years given to complete the project by dividing the total number of months in the project schedule by 12 (calculate to 3 decimal places), then divide the amount of the bid by the calculated number of years to find the annual dollar value of the work.
- Step 3** Add the annualized value of all of the bidder's incomplete contract work (the total of column 9 on page 5) to the annual dollar value of the work to be performed on your project. **The total may not exceed the bidder's Aggregate Work Limit.**

Correction of Errors and Omissions in Update Statements

Matters of Form: An awarding authority shall not reject a contractor's bid because there are mistakes or omissions of form in the Update Statement submitted with the bid, provided the contractor promptly corrects those mistakes or omissions upon request of the awarding authority. [810 CMR 4.09(1)].

Correction of Other Defects: An awarding authority may, in its discretion, give a contractor notice of defects, other than mistakes or omissions of form, in the contractor's Update Statement, and an opportunity to correct such defects, provided the correction of such defects is not prejudicial to fair competition. An awarding authority may reject a corrected Update Statement if it contains unfavorable information about the contractor that was omitted from the Update Statement filed with the contractor's bid. [810 CMR 4.09(2)].

PART 1 - COMPLETED PROJECTS

LIST ALL PUBLIC AND PRIVATE *BUILDING* PROJECTS YOUR FIRM HAS COMPLETED SINCE CURRENT CERTIFICATE OF ELIGIBILITY WAS ISSUED (NOT EXTENDED). *

PROJECT TITLE & LOCATION	WORK CATEGORY	CONTRACT PRICE	START DATE

Attach additional sheets if necessary

* If your firm has been terminated from a project prior to completion of the work or has failed or refused to c any contract, full details and an explanation must be provided. See Part 3 of this Update Statement.

PROVIDE THE FOLLOWING REFERENCE INFORMATION FOR EACH COMPLETED PROJECT LISTED ON THE PREVIOUS PAGE.

PROJECT TITLE	COMPANY NAME	CONTACT PERSON
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	

Is your company or any individual who owns, manages or controls your company affiliated with any owner, designer or contractor named above, either through a business or family relationship? YES NO

Are any of the contact persons named above affiliated with your company or any individual who owns, manages or controls your company, either through a business or family relationship? YES NO

If you have answered YES to either question, explain. _____

PART 2 - CURRENTLY HELD CONTRACTS

LIST ALL PUBLIC AND PRIVATE BUILDING AND NON-BUILDING *CONSTRUCTION* PROJECTS YOU HAVE OR WILL CONTRACT ON THIS DATE REGARDLESS OF WHEN OR WHETHER THE WORK COMMENCED.

1	2	3	4	5	6	7	
PROJECT TITLE & LOCATION	WORK CATEGORY	START AND END DATES	ON SCHEDULE (yes / no)	CONTRACT PRICE	% NOT COMPLETE	\$ VALUE OF WORK NOT COMPLETE (col. 5 x col. 6)	REMARKS

ANNUALIZED VALUE OF ALL INCOMPLETE CONTRACT WORK (Total of Column 9)

- Column 8
- If less than one year is left in the project schedule, write 1.
 - If more than 12 months are left in the project schedule, divide the number of months left in the project schedule by 12 (calculate to three decimal places).

PROVIDE THE FOLLOWING REFERENCE INFORMATION FOR EACH INCOMPLETE PROJECT LISTED ON THE PREVIOUS PAGE.

PROJECT TITLE	COMPANY NAME	CONTACT PERSON
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	
	OWNER DESIGNER GC	

Is your company or any individual who owns, manages or controls your company affiliated with any owner, designer or contractor named above either through a business or family relationship? YES NO

Are any of the contact persons named above affiliated with your company or any individual who owns, manages or controls your company, either through a business or family relationship? YES NO

If you have answered YES to either question, explain. _____

PART 3 - PROJECT PERFORMANCE

Please answer the following questions. Information is to cover the period from the date your current Certificate of Eligibility was issued to the bid date.

If you answer YES to any question, on a separate page provide a complete explanation. Include all details [project name(s) and location(s), names of all parties involved, relevant dates, etc.].

	YES	NO
A. Has your firm been terminated on any contract prior to completing its work?	<input type="checkbox"/>	<input type="checkbox"/>
B. Has your firm failed or refused either to perform or complete any of its work under any contract prior to substantial completion?	<input type="checkbox"/>	<input type="checkbox"/>
C. Has your firm failed or refused to complete any punchlist work under any contract?	<input type="checkbox"/>	<input type="checkbox"/>
D. Has your surety taken over or been asked to complete any of your work under any contract?	<input type="checkbox"/>	<input type="checkbox"/>
E. Has your surety made payment to a materials supplier or other party under your payment bond on any contract?	<input type="checkbox"/>	<input type="checkbox"/>
F. Has any subcontractor filed a demand for direct payment with an awarding authority on a public project on any of your contracts?	<input type="checkbox"/>	<input type="checkbox"/>
G. Have any of your subcontractors or suppliers filed litigation to enforce a mechanic's lien against property in connection with work performed or materials supplied under any of your contracts?	<input type="checkbox"/>	<input type="checkbox"/>
H. Have there been any deaths of employee or others occurring in connection with any of your projects?	<input type="checkbox"/>	<input type="checkbox"/>
I. Has any employee or other person suffered an injury resulting in complete disability in excess of thirty working days in connection with any of your projects?	<input type="checkbox"/>	<input type="checkbox"/>

PART 4 - LEGAL PROCEEDINGS

Please answer the following questions. Information is to cover the period from the date your current Certificate of Eligibility was issued to the bid date.

The term "Administrative Proceeding" as used in this Update Statement includes (i) any action or proceeding brought by a governmental agency, department or officer to enforce any law, regulation, code or other legal requirement, except for those brought in state or federal courts, and (ii) any action taken by a governmental agency, department or officer imposing penalties, fines or other sanctions for failure to comply with any such legal requirement.

If you answer YES to any question, on a separate page provide a complete explanation of each proceeding and any judgement or decision. Include all details (name of court or administrative agency, title of case or proceeding, case number, date action was commenced, date judgement or decision was entered, fines or penalties imposed, etc.).

	YES	NO
A. Have any judicial proceedings (other than criminal proceedings) been brought or concluded adversely against your firm or a principal or officer of your firm relating to the procurement or performance of any construction contract, including actions to obtain payment brought by subcontractors, suppliers or others?	<input type="checkbox"/>	<input type="checkbox"/>
B. Have any criminal proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to any of the following offenses: graft, embezzlement, forgery, bribery, falsification or destruction of records, receipt of stolen property or environmental offenses?	<input type="checkbox"/>	<input type="checkbox"/>
C. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a violation of state or federal antitrust laws arising out of the submission of bids or proposals?	<input type="checkbox"/>	<input type="checkbox"/>
D. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a violation of state or federal laws regulating campaign contributions?	<input type="checkbox"/>	<input type="checkbox"/>
E. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a violation of chapter 268A of the Massachusetts General Laws?	<input type="checkbox"/>	<input type="checkbox"/>
F. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a violation of any state or federal law regulating prevailing wages?	<input type="checkbox"/>	<input type="checkbox"/>
G. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a violation of any state or federal law regulating hours of labor, minimum wages, overtime pay, equal pay, child labor or worker's compensation?	<input type="checkbox"/>	<input type="checkbox"/>
H. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a violation of any state or federal law prohibiting discrimination in employment?	<input type="checkbox"/>	<input type="checkbox"/>
I. Have any judicial or administrative proceedings been brought or concluded adversely against your firm or a principal or officer of your firm relating to a claim of repeated or aggravated violation of any state or federal law regulating labor relations or occupational health or safety?	<input type="checkbox"/>	<input type="checkbox"/>
J. Have any proceedings been brought by any state or federal agency to debar or suspend your firm or any principal or officer of your firm from public contracting?	<input type="checkbox"/>	<input type="checkbox"/>
K. Has your firm been fined by OSHA or any other state or federal agency for violations of any laws or regulations related to occupational health or safety?	<input type="checkbox"/>	<input type="checkbox"/>

PART 5 - SUPERVISORY PERSONNEL

List all supervisory personnel, such as project managers and superintendents, who will be assigned to the project if your firm is awarded the contract. **Attach the resume of each person listed below.**

NAME	TITLE OR FUNCTION

PART 6 - CHANGES IN BUSINESS ORGANIZATION OR FINANCIAL CONDITION

Have there been any changes in your firm's business organization, financial condition or bonding capacity since the date your current Certificate of Eligibility was issued? Yes No

If YES, attach a separate page providing complete details.