

CONTRACTOR'S CHECKLIST - RENEWAL

APPLICATION:

- Pages 3 through 4.
 - All pages must be completed.
 - If a question does not apply insert the word NONE or N/A.
- Page 11 - Work Type Request & Reference Form.
 - This form must be completed for **each** work type requested. By completing this form you will facilitate a prompt and accurate assignment of work types.
- Pages 15 through 21.
 - These pages must be completed and **signed by the independent CPA** that performed the audit or review.
- Page 22.
 - This page must be **signed by an officer** of the company.
- Pages 22-23.
 - These pages must be **signed and notarized by a Notary Public**.

ATTACHMENTS:

- Resumes of Key Construction Personnel** (see page 12 for sample resume). Be specific with the type of work performed, size and materials used to perform jobs and reference individuals.
- Vendor Information Change Form** – Must be completed with an original signature if there are any changes. Include W-9 Form (see below) if there is a name change.
- W-9 Form** – If there is a name change, must be completed and returned with an original signature.
- Applicants who are a member of a consolidated organization, and do not have an individual audited or reviewed financial statement, **must** provide a CONSOLIDATING BALANCE SHEET showing the applicant's financial information in addition to providing an audited or reviewed consolidated financial statement for the consolidated organization.
- Certificate issued by the Secretary of State authorizing the company to do business in Ohio (for out of state companies only) must be included in your submission. To apply on-line visit www.state.oh.us/sos/ or call toll free (877)767-3453.
- Affidavit (in lieu of Work Type Request & Reference Form and Resumes if applicable)
- Submit Independent Certified Public Accountant's Report and audited/reviewed Financial Statements along with the complete footnote disclosures.**
- Declaration Regarding Material Assistance/Nonassistance To A Terrorist Organization
- Submit completed packet to:**

**Ohio Department of Transportation
Office of Contracts, Contractor Qualifications Section
1980 West Broad Street – 1st Floor
Columbus, Ohio 43223**

Questions:

If you have any questions, please contact the Office of Contracts Contractor Qualifications Section, at (800)461-2823 or (614)466-2824.

Link to Ohio Administrative Code - <http://codes.ohio.gov/oac/5501%3A2-3>

STATE OF OHIO
DEPARTMENT OF TRANSPORTATION
COLUMBUS, OHIO



CONFIDENTIAL

**QUALIFICATION
APPLICATION**

**Used in Qualifying and Classifying Bidders
for State of Ohio Highway Work**

(Exact Applicant Name and Address Must Appear Below)

Submitted By (Company Name): _____

Federal Tax Identification No.: _____

Phone: _____

Fax: _____

E-Mail Address: _____

Qualification Street Address (Required)

Street: _____

City: _____

State: _____ **Zip:** _____

REQUIRED BY SECTIONS 5525.01 to 5525.09 OF THE OHIO REVISED CODE

It is unlawful for any applicant for qualification to knowingly make a false statement with respect to the applicant's financial worth. (Any person violating the above statutes is subject to a fine and shall be disqualified from submitting bids on work let by the Department of Transportation for a period of two years following the date of conviction.)

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COMPANY INFORMATION

<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Co.	<input type="checkbox"/> Individual
<input type="checkbox"/> General Co-Partnership	<input type="checkbox"/> Limited Co-Partnership	

Date Incorporated or Organized _____ State _____

Type of Work Done _____

Other Lines of Business _____

Type of work usually sublet to other companies

1. If company succeeded another organization, indicate:

Name of Predecessor	Type of Work Performed	Operated During Period

2. List all current Owners*, Officers, and Directors (Note: If ESOP list Officers and Directors. If partnership limited, explain fully):

Name & Title	Address – City, State & Zip	Fractional Interest in Firm	Social Security #

3. List all Subsidiaries and Affiliates:

Name of Company	Address – City, State & Zip	Type of Business	Indicate if currently prequalified to perform work for ODOT

4. List other businesses in which any Owners*, Officers, and Directors participate or have financial interest:

Name of Company	Tax ID No.	Name of Owner, Officer, ,or Director Interested	Extent of Interest	Indicate if currently prequalified to perform work for ODOT

* Applicant has an affirmative obligation to continuously notify ODOT if any information in this section changes.

* Administrative Rule 5501:2-3-01(B)(5) states: "Owners shall include sole proprietors, partners, shareholders, members or other forms of direct ownership, including immediate family members to be defined as family members whom an owner might control or influence or by whom they might be controlled or influenced because of the family relationship."

COMPANY INFORMATION, CONT'D

5. Has the company, its predecessors or owner (sole proprietor) ever filed for protection from its creditors in United States Bankruptcy Court?

Yes No

If yes, please explain (include dates)

6. Has the company or its principals, including its key construction personnel, ever been convicted of crimes involving fraud that includes but is not limited to bribery, falsification of documents, theft and any offense that directly reflects on the integrity of the business?

Yes No

If yes, please explain (include dates)

7. Has the company or its principals, including its key personnel, ever been debarred or suspended by the United States Government, any other states or any other Ohio state agencies from bidding on or working on their projects?

Yes No

If yes, please explain (include dates)

8. Capacity:

	Last Fiscal Year	Fiscal Year Before Last
(a) Aggregate volume of contracts:	\$	\$
(b) Approximate amount of (a) that was sublet: Volume directly performed:	\$	\$
(c) Largest volume of uncompleted work on hand at any one time:	\$	\$
9. List the amount of largest surety bond written for the applicant during the last 2 fiscal years:	\$	\$

10. List the contact person for questions regarding WORK TYPES REQUESTED, KEY CONSTRUCTION PERSONNEL, CONTRACTS, AND SUBCONTRACTS HELD:

NAME	
POSITION	
TELEPHONE	
FAX	
E-MAIL	

11. List the contact person for questions regarding the FINANCIAL INFORMATION provided in this application:

NAME	
POSITION	
TELEPHONE	
FAX	
E-MAIL	

INSTRUCTIONS FOR WORK TYPE SECTION

1. **Pages 6-10:** Select Work Types for which your organization holds the competencies necessary to perform such work.
2. **Page 11:** A SEPARATE Work Type Request & Reference Form must be completed for **EACH** work type indicated on pages 6-10. Do not request more than one work type on each form. Work types for which the Minimum Skills Requirements for Work Types set out additional requirements beyond the general knowledge and experience will require more than one form to satisfy the requirement. Example: Level 1 Bridge requires the construction of a minimum of five structures of the appropriate type within the last eight years. Submit five Work Type Request Forms to properly document adequate knowledge and experience for Level 1 Bridge. Complete information must be provided in order for ODOT to accurately assign work types to your firm.
3. **Page 12:** List and attach resumes for all key construction personnel in the format shown. An applicant has an affirmative obligation to continuously notify ODOT if any construction personnel are no longer employed by the applicant and provide a resume for each new person who possesses the required experience.
4. **Page 13:** Attach a listing of owned equipment and/or leased equipment that relates to the work types for which you have applied.

WORK TYPES

Application is hereby made to the Director of Transportation for a Certificate of Qualification to bid on the following checked types of work as required in Sections 5525.01 to 5525.09 inclusive, of the Ohio Revised Code:

Placing an "X" next to the work type indicates that your organization holds the competencies necessary to perform such work. Supporting documentation as to the competency of your organization is to be provided on page 11 – **Work Type Request & Reference Form. A separate form is to be completed for each work type checked below.**

- 1. Clearing And Grubbing**
This work type includes removal of brush, trees, stumps and other protruding obstructions. It also includes scalping materials from the surface of the ground.
- 2. Building Removal**
This work type includes the demolition of buildings, the disposal of demolition debris and other related work.
- 3. Gas, Oil, Water Well Abandonments**
This work type includes all work necessary to remove, plug, or otherwise abandon gas, oil, or water wells.
- 4. Roadway Excavation and Embankment Construction**
This work type includes the excavation of materials of any nature for roadways or channels; disposal of unsuitable and surplus materials; construction of embankments; preparation of subgrade; finishing surfaces to proper lines and grades. Excavation for this work type is limited to less than 750,000 c.y. (573,416 cubic meters) per project.
- 5. Major Roadway Excavation**
This work type includes the excavation of earth and rock on projects with more than 750,000 c.y. (573,416 cubic meters) of excavation.
- 6. Incidental Grading**
This work type includes all grading and related work of a minor nature (usually less than 10,000 c.y. (7646 cubic meters) of the total of excavation and embankment). It also includes all grading work paid for on a linear basis, the reconditioning of shoulders and the placement of shoulder aggregate.
- 7. Soil Stabilization**
This work type includes increasing soil strengths or altering soil characteristics by adding various admixtures and agents (cementing agents, binding agents, lime, etc.) to the soil. It also includes stabilization by mechanical methods including improving gradation and consolidation.
- 8. Temporary Soil Erosion & Sediment Control**
This work type includes the installation, maintenance and removal of various items for the temporary control of soil erosion, siltation and water pollution during construction.
- 9. Aggregate Bases**
This work type includes the placing and compacting of one or more uniform courses of aggregate.
- 10. Flexible Paving**
This work type includes the placing and compacting of one or more courses of bituminous mixture and other related work.
- 11. Apply Bituminous Treatments**
This work type includes the preparation and treatment of a surface with liquid bituminous material and aggregate.

WORK TYPES, CONT'D

- 12. Rigid Paving**
This work type includes the construction of pavement and bases composed of Portland cement concrete in quantities greater than 1,500 square yards per paving location and the construction of Portland cement stabilized bases. It also includes placement of reinforcement and load transfer devices, as required, and all other related items of work.
- 13. Pavement Planing, Milling, Scarification**
This work type includes removing a specified thickness of Portland cement concrete or bituminous concrete by grinding or other mechanical means leaving a surface texture as required.
- 14. Concrete Texturing**
This work type includes the restoring or creating of longitudinal or transverse striations by mechanical means.
- 15. Sawing**
This work type includes sawing Portland cement concrete or asphalt concrete as required.
- 16. Flexible Replacement**
This work type includes the removal of existing pavement of any nature and replacement with bituminous concrete and all other related work.
- 17. Rigid Pavement Replacement**
This work type includes the removal of existing pavement of any nature and replacement with Portland cement concrete and all other related work.
- 18. Pavement Rubblizing, Breaking, Pulverizing**
This work type includes rubblizing, breaking, cracking, or pulverizing a concrete pavement to the required size or crack pattern and seating of the broken material.
- 19. Structure Removal**
This work type includes the removal of a bridge, culvert, or other similar structure, including substructure and piling when required.
- 20. Level 1 Bridge**
This work type includes the construction of structures of the following types:
 - *All cast in place retaining walls over 8' in height.
 - *Prestressed box beam bridges on capped pile substructure.
 - *Single span concrete slab.
 - *Continuous span concrete slab bridges on capped pile substructure.
 - *Structural plate corrugated metal structures on concrete footings.
- 21. Level 2 Bridge**
This work type includes the construction of structures of the following types:
 - *All Level 1 bridges.
 - *Prestressed box beam bridges and continuous span concrete slab bridges on any substructure.
 - *Railroad bridges.
 - *All single or multi span rolled beam and plate girder on any substructure.
 - *All single or multi span concrete beam bridges.
 - *Truss bridges with span length less than **150 feet (45.75 meters)**.
- 22. Level 3 Bridge**
This work type includes the construction of structures of the following types:
 - *All Level 1 and 2 bridges.
 - *All structures not listed in Level 1 and Level 2 such as but not limited to the following:
 - Truss bridges greater than 150 feet in length.
 - Mechanical structures.
 - Other complex structures.

WORK TYPES, CONT'D

- 23. Reinforcing Steel**
This work type includes placing reinforcing steel and steel dowels.
- 24. Structural Steel Erection**
This work type includes the erecting of all structural steel and any work required to move existing steel structures, and to make necessary structural steel alterations.
- 25. Stud Welding**
This work type includes the welding of shear stud connectors to structural steel members.
- 26. Structural Steel Painting**
This work type includes the cleaning and painting of all new or existing steel surfaces and the proper containment and disposal of all waste.
- 27. Expansion & Contraction Joints, Joint Sealers, Bearing Devices**
This work type includes the installation of expansion and contraction joints, elastomeric compression seals for bridge deck joints (either armored with or composed of structural steel), vertical and horizontal extension of structural expansion joints, joint sealers or bearing devices.
- 28. Caissons/Drilled Shafts**
This work type includes drilling, placement of reinforcing steel, placement of concrete, and other related work.
- 29. Structure Repairs**
This work type includes removal and replacement of deteriorated concrete, preparation and placement of all deck overlay, adjustments of expansion joints, modifying structure drainage systems and construction or repair of concrete approach slabs.
- 30. Hydrodemolition**
This work type includes removal of unsound concrete by high pressure water jet stream and properly disposing of all debris.
- 31. Structural Steel Repairs**
This work type includes the repairing or altering of existing structural steel.
- 32. Heat Straightening**
This work type includes straightening damaged portions of existing structural steel using heat.
- 33. Tieback Installation**
This work type includes the drilling, installing, securing in place and testing of various types of tieback anchors.
- 34. Earth Retaining Structures**
This work type includes the installation of wall components and the placement and compaction of backfill materials for mechanically stabilized earth, crib, and cellular retaining walls and other similar type structures.
- 35. Drainage (culvert, misc.)**
This work type includes the construction of storm drains and culverts, sanitary sewers, water lines, underdrains, edge drains, aggregate drains and all related items. It also includes construction of slope and channel protection.
- 36. Guardrail/Attenuators**
This work type includes the construction or reconstruction of guardrail and impact attenuators.

WORK TYPES, CONT'D

- 37. Fence**
This work type includes construction of fence, post assemblies, gates and other related items.
- 38. Miscellaneous Concrete**
This work type includes the construction of retaining walls less than 8' in height, curbs, sidewalks, driveways, median barriers, slope and channel protection, Portland cement concrete pavement and base in quantities less than 1,500 square yards per paving location and other incidental concrete items.
- 39. Maintenance of Traffic**
This work type includes the installation, maintenance and subsequent removal of all temporary traffic control items such as signs, barricades, signals, lighting, surface maintenance materials, raised pavement markers, pavement markings, portable barriers, etc. for the maintenance of traffic through construction areas.
- 40. Waterproofing**
This work type includes applying waterproofing systems of any type to structures and drainage structures.
- 41. Raised Pavement Markers**
This work type includes the layout and placement of plowable raised pavement markers and prismatic retroreflectors.
- 42. Signing**
This work type includes the installation and erection/reerection of reflectorized traffic signs, sign supports and foundations.
- 43. Highway Lighting**
This work type includes the installation, replacement, and performance testing of electrical materials and equipment for permanent lighting of highways and signs.
- 44. Traffic Signals - Standard**
This work type includes the installation, replacement, and performance testing of electrical materials and equipment for traffic control signals.
- 45. Pavement Markings**
This work type includes the pavement preparation and uniform application of retroreflective pavement markings.
- 46. Landscaping**
This work type includes establishment of vegetative cover, permanent erosion, plantings, and other related landscaping work.
- 47. Mowing**
This work type includes controlling vegetative growth by cutting and trimming by mechanical means.
- 48. Trucking**
This work type includes hauling materials, to, from and within construction projects.
- 49. Herbicidal Spraying**
This work type includes the application of various chemicals to control vegetative growth.
- 50. Railroad Track Construction**
This work type includes the construction of railroad tracks, crossings and other related work.
- 51. Micro Tunneling**
This work type includes the construction of small diameter bores where the direction and control of the excavation and equipment are remotely controlled from outside of the excavation.

WORK TYPES, CONT'D

- 52. Tunneling**
This work type includes the construction of an underground excavation large enough for workers to enter, control and perform the activity from within the excavation.
- 53. Piling**
This work type includes the installation of bearing piles; steel sheet piling to be left in place; cofferdams, sheeting, shoring, bracing or other materials necessary to support the sides of excavations, embankments, adjacent buildings, tracks or other premises and other similar work.
- 54. Post Tensioning Bridge Members**
This work type includes the post-tensioning of bridge members including the grouting of the post-tension ducts.
- 55. Fiber Optic Cable Installation, Splicing, Termination and Testing – Traffic Signal System**
This work type includes the installation, splicing, termination and performance testing of single mode and multimode fiber optic cable and related equipment necessary for the transmission of video, voice or data for outside plant applications. This work type includes fiber optic work associated with traffic signal projects.
- 56. Fiber Optic Cable Installation, Splicing, Termination and Testing – Intelligent Transportation System**
This work type includes the installation, splicing, termination and performance testing of single mode and multimode fiber optic cable and related equipment necessary for the transmission of video, voice, or data for outside plant applications. This work type includes all Traffic Signal System fiber optic work and work associated with Intelligent Transportation Systems projects.

KEY CONSTRUCTION PERSONNEL AND SAMPLE RESUME

Key construction personnel are on-site persons in responsible charge of the work, having direct supervision of the contractor's workforce and subcontractors. **Attach resumes of all key construction personnel in the format shown.** Resumes **must** be included in order for ODOT to make an informed decision regarding work types. An applicant has an affirmative obligation to continuously update the following list of key construction personnel and provide a resume for each person.

Name	Present Position	Phone Number	Social Security Number

Sample Resume of Key Construction Personnel:

**Joe Contractor
100 Gravel Road
Cleveland, Ohio
(330) 555-4321**

Current Job Title: Project Superintendent

Construction Operations Education/Training: Columbus State University
Associate of Applied Science-Civil Engineering
Graduated 1990

The Ohio State University
Civil Engineering
Attended 1991

Certified Concrete Testing Technician
1991 - current

Employment History:

1991 - 1993	ABC Contractors labor, backhoe operator
1993 - 1995	XYZ Contractors foreman
1995 - present	MNO Contractors project superintendent

Work Experience:

Date:	June 1995
Project No:	ODOT Project 600-95*
Job Location:	MOT-75-17.00

* For non-ODOT project list name, street address, city, and phone number of project owner or project manager.

Include one or two paragraph description of project and work actually performed by your firm, **as it relates** to the work type you are requesting. **General statements of work experience which do not cite specific projects, work performed, or indicate the relationship to the Department's work types cannot be considered for the assignment of work types.**

List duties performed: Daily on-site, direct supervision of labor force, select and procure equipment and supplies, maintain the project schedule, schedule and coordinate subcontractors.

OWNED AND LEASED EQUIPMENT LISTING

OWNED AND LEASED EQUIPMENT

Attach a listing of owned equipment and/or leased equipment. Specify for each piece of equipment whether it is owned or leased and Include the company name from where you will be renting the equipment. Note that the owned or leased equipment must be related to the work types for which you have applied. Equipment lists must be grouped by work type.

INSTRUCTIONS FOR THE FINANCIAL SECTION

ALL schedules on pages 15-20 must be completed. When not appropriate mark "None". If further space and/or information is required, please provide in clearly marked attachments. Failure to complete all schedules may result in delays in processing the application.

1. All amounts are to be reported in U.S. dollars (USD \$).
2. Financial information must be from the **most recent** fiscal year-end or later.
3. Financial data supplied on pages 15-20 must correspond to the information presented in the CPA prepared Financial Statements. Discrepancies must be fully explained.
4. **Pages 15-20:** Complete the Balance Sheet, Accounts & Notes Receivable, Property and Equipment, Other Assets, Current Liabilities, Long-Term Liabilities, and Bank Letters or Letters of Credit schedules in their entirety. NOTE: As indicated, supporting asset/liability schedules require detailed information only for those individual items that equal or exceed 5 percent of the total asset/liability and a summation of the remaining items less than 5 percent. **Land and Buildings are to be reported at their Assessed Value for property tax purposes.** Long-term debt secured by land and buildings should correspond to the debt amounts reported in the Financial Statements' footnote disclosures. Equipment and Other Fixed Assets includes all depreciable equipment. **Equipment is to be reported at its True Value as determined under applicable state law.** Long-term debt secured by equipment and other fixed assets should correspond to the debt amounts reported in the footnote disclosures. See detailed instructions in the accompanying footnotes of this section.
6. **Pages 21-23: REPORT OF INDEPENDENT ACCOUNTANT** – It is required that an Independent Certified Public Accountant perform a review or audit of the Financial Statements in accordance with Administrative Rule 5501:2-3-02 (B) or 5501-2-3-02 (C) and issue a report opinion thereon. The Independent Certified Public Accountant is also required to certify the supplementary financial information included in the Qualification Application on pages 15-20 and issue a report thereon.
7. **FINANCIAL STATEMENTS** – It is required that the applicant **attach complete Financial Statements including complete footnote disclosures** along with the Independent Certified Public Accountant's report thereon for the most recent fiscal year. NOTE: Applicants requesting to become prequalified with the department to perform contract work, both prime and subcontract, in the **amount that is greater than an aggregate of \$2,000,000 yearly must provide AUDITED Financial Statements.** To become prequalified for amounts **less than an aggregate of \$2,000,000, CPA REVIEWED Financial Statements must be attached.** The contract work amount includes all uncompleted work for both Department and non-Department work inclusive of the bid amount.
8. Applicants who are a member of a consolidated organization, and do not have an individual audited or reviewed financial statement, must provide a CONSOLIDATING BALANCE SHEET showing the applicant's financial information in addition to providing an audited or reviewed consolidated financial statement for the consolidated organization. **CONSOLIDATED FINANCIAL STATEMENTS WILL ONLY BE ACCEPTED IF A CONSOLIDATING BALANCE SHEET IS INCLUDED AND THE APPLICATION IS COMPLETED USING ONLY THOSE FINANCIAL NUMBERS RELATED TO THE APPLICANT.** We remind you that we can only consider the financial status of the individual applicant when determining dollar qualification and not that of any subsidiaries or affiliates of the applicant. Financial figures for any company related to the applicant will not be reviewed when processing the dollar qualification of the applicant.

BALANCE SHEET
Financial Statement Date (not application date)
Fiscal Year-

ASSETS			
1	Cash and cash equivalents:		
	a. In financial institutions	\$	
	b. Other	\$	
2	Cash that is legally restricted as to its withdrawal or use	\$	
3	Investments:		
	a. Debt or equity securities	\$	
	b. Affiliates	\$	
	c. Joint ventures	\$	
	d. Other	\$	
4	Accounts receivable		
	a. Trade	\$	
	b. Retainage	\$	
	c. Unbilled	\$	
	d. Affiliates	\$	
	e. Owners	\$	
	f. Other	\$	
	g. Allowance for uncollectible accounts	\$	
5	Costs and estimated earnings in excess of billing uncompleted contracts	\$	
6	Notes receivable - owners:		
	a. Due within one year	\$	
	b. Allowance for uncollectible accounts	\$	
7	Notes receivable - other:		
	a. Due within one year	\$	
	b. Allowance for uncollectible accounts	\$	
8	Prepaid expenses	\$	
9	Inventories	\$	
10	Other assets (tangible) which mature within one year	\$	
11	Intangible assets (deferred taxes, etc.), maturing within one year	\$	
12	TOTAL CURRENT ASSETS	\$	
13	Cash surrender value of life insurance, net of policy loans	\$	
14	Notes receivable - owners:		
	a. Due after one year	\$	
	b. Allowance for uncollectible accounts	\$	
15	Notes receivable - other:		
	a. Due after one year	\$	
	b. Allowance for uncollectible accounts	\$	
16	Land and buildings:		
	a. Cost	\$	
	b. Less accumulated depreciation and/or depletion	\$	
17	Equipment and other fixed assets:		
	a. Cost	\$	
	b. Less accumulated depreciation and/or depletion	\$	
18	Other assets (tangible) which mature after one year	\$	
19	Other intangible assets which mature after one year		
	a. Goodwill	\$	
	b. Other	\$	
20	TOTAL ASSETS	\$	

BALANCE SHEET, CONT'D

LIABILITIES AND CAPITAL			
21	Accounts payable	\$	
22	Federal, state and local income taxes payable	\$	
23	Retainage payable	\$	
24	Billings in excess of costs and estimated earnings on uncompleted	\$	
25	Accrued payroll and related items; including (but not limited to) taxes on compensation, tax withholdings and worker's compensation	\$	
26	Current portion of term debt, lines-of-credit and revolving credit	\$	
27	Amounts payable to related parties and affiliates	\$	
28	Dividends and distribution payable	\$	
29	Other liabilities payable within one year:		
	a. Accrued warranty and guarantee liabilities	\$	
	b. Accrued deferred compensation agreements	\$	
	c. Accrued compensated absences	\$	
	d. Current portion of accrued pension costs	\$	
	e. Current portion accrued postretirement costs	\$	
	f. Current portion of unconditional promises to give	\$	
	g. Deferred income taxes	\$	
	h. Owners	\$	
	i. Other	\$	
30	TOTAL CURRENT LIABILITIES	\$	
31	Long-term portion of term debt, lines-of-credit and revolving credit	\$	
32	Other long-term liabilities, including deferred taxes	\$	
33	TOTAL LIABILITIES	\$	
34	Par value of stock	\$	
35	Additional paid-in capital	\$	
36	Individual(s), Partner(s) or Member(s) capital	\$	
37	Retained earnings	\$	
38	TOTAL LIABILITIES AND CAPITAL	\$	

PROPERTY AND EQUIPMENT

LAND AND BUILDINGS (Line 16, Page 15)				\$
Location & Description of Property	In Whose Name is Title	Long Term Debt Secured By Land & Buildings (3)	Net Book Value	ASSESSED Value as determined by State/Local Taxing Authority
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Leasehold Improvements Taxed as Real Property		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
TOTALS		\$	\$	\$
TOTAL LONG TERM PORTION OF DEBT SECURED BY LAND & BUILDINGS. (Line 31, Page 16)		\$		

EQUIPMENT AND OTHER FIXED ASSETS (Line 17, Page 15)			
	TRUE VALUE as reported on State/Local Personal Property Tax Return (1)(2)	Net Book Value	Total Portion of Long Term Debt Secured by Equipment and Other Fixed Assets (Line 31, Page 16) (3)
Total Equipment and Other Fixed Assets	\$	\$	\$
Total Leasehold Improvements taxed as personal property	\$	\$	\$
Total	\$	\$	\$
80 percent of Total	\$	\$	

- (1) OHIO CONTRACTORS** – List the **TRUE VALUE** of property as reported on Form 920 or Form 945. For property not subject to Ohio personal property tax (vehicles, etc) show net depreciable book value computed using the appropriate True Value percentages recognized by the Ohio Department of Taxation for personal property taxes. For information on the True Value computation, go to: <http://www.state.oh.us/tax/business.html>
- (2) FOREIGN CONTRACTORS (Located outside the State of Ohio)** – Report the appropriate tax value on the applicant's personal property tax return. If no personal property tax return is utilized by the applicant's state, show net depreciated book value computed on the basis of rates of depreciation recognized within the United States federal tax return for such personal property.
- (3)** Report all long-term debt secured by equipment and other fixed assets. This figure should correspond to the debt amounts reported in the Notes to Financial Statements.

OTHER ASSETS

OTHER TANGIBLE ASSETS (a) Due within one year (Line 10, Page 15)	\$
(b) Due after one year (Line 18, Page 15)	\$
TOTAL	\$
<i>DETAIL ITEMS 5% OR MORE OF TOTAL- OTHER TANGIBLE ASSETS:</i>	Amount

CURRENT LIABILITIES

List separately each item amounting to 5 percent or more of total and combine remainder.

Current portion of term debt, lines-of-credit and revolving credit (Line 26, Page 16) \$	\$
<i>DETAIL ITEMS 5% OR MORE OF TOTAL:</i>	Amount
TOTAL OF ALL ITEMS UNDER 5% OF TOTAL	

Other Liabilities Payable Within One Year (Line 29(i), Page 16)	\$
<i>DETAIL ITEMS 5% OR MORE OF TOTAL – OTHER LIABILITIES:</i>	Amount
TOTAL OF ALL ITEMS UNDER 5% OF TOTAL – OTHER LIABILITIES	\$

LONG-TERM LIABILITIES

OTHER LONG TERM LIABILITIES (Line 32, Page 16)	\$	
<i>Detail items 5% or more of total - long term debt :</i>	Date Due	Amount
Total of all items under 5% of total – long term debt		\$

REPORT OF INDEPENDENT ACCOUNTANT

Review of Financial Statements Pursuant to Administrative Rules Section 5501:2-3-02 (B):

Applicants requesting to become qualified with the Department to perform contract work, both prime and subcontract, in the amount not to exceed an aggregate of \$2,000,000 shall have a review performed on the applicant's financial statements. **The \$2,000,000 or less amount includes all uncompleted work for both Departmental and non-Departmental work inclusive of the bid amount.**

Report of Independent Accountant - Review of Financial Statements

Our report dated _____ on the review of the financial statements of _____ as of _____ and for the _____ then ended, is included with this Qualification Application. Our review was made for the purpose of expressing limited assurance that there are no material modifications that should be made to the basic financial statements in order for them to be in conformity with generally accepted accounting principles. The supplementary information reflected on pages 15 through 20 is presented for the purpose of this Qualification Application and is not a required part of the basic financial statements. Such supplementary information has been subjected to the inquiry and analytical procedures applied in the review of the basic financial statements, and we are not aware of any material modifications that should be made thereto.

Signature: _____ **Certified Public Accountant No.** _____

Signature: _____ **Registered Public Accountant No.** _____

Audit of Financial Statements Pursuant to Administrative Rules Section 5501:2-3-02 (C):

Applicants requesting to become qualified with the Department to perform contract work, both prime and subcontract, in the amount greater than aggregate of \$2,000,000 shall have an audit performed on the applicant's financial statements. **The \$2,000,000 or more amount includes all uncompleted work for both Departmental and non-Departmental work inclusive of the bid amount.**

Report of Independent Accountant - Audit of Financial Statements

Our report dated _____ on the audit of the financial statements of _____ as of _____ and for the _____ then ended, is included with this Qualification Application. This audit was conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplementary information reflected on pages 15 through 20 is presented for the purpose of this Qualification Application and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Signature: _____ **Certified Public Accountant No.** _____

Signature: _____ **Registered Public Accountant No.** _____

AFFIDAVIT

The Independent Accountant's report must be executed by an Independent Certified Public Accountant or by a Registered Public Accountant, if said Public Accountant qualifies under Section 4701.22 of the Ohio Revised Code. Section 4701.22 provides that the financial statements may be certified by a Public Accountant holding a valid registration issued in this state if the Accountant certified a financial statement submitted to the Department of Transportation by an applicant for the previous year, or furnishes evidence that the Accountant has received a passing score as a result of a written examination designed to determine competency, prescribed and administered by the Accountancy Board of Ohio. Qualified or modified opinions will be accepted at the discretion of the Director.

The undersigned hereby swears to the truth of the foregoing statements of the financial condition as of the date of assets and liabilities shown herein and further swears to the truth of the statements of the experience of the individual, limited liability company, co-partnership or corporation named herein, and that this statement is for the express purpose of inducing the Ohio Department of Transportation to qualify the undersigned for a contract; and that any depository, vendor or other agency named is hereby authorized to supply such party with any information, necessary to verify these statements.

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.

(Construction Company Officer Signature)

(Title)

Individual

STATE OF _____

ss.:

COUNTY OF _____

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

Dated at _____ this _____ day of _____, 200__

Notary Public

AFFIDAVIT, CONT'D

Co-Partnership

STATE OF _____

ss.:

COUNTY OF _____

_____ being duly sworn, deposes and says he is a member of the firm of _____; that he is familiar with the books of the said firm showing its financial condition; that the foregoing financial statements and experience questionnaire, signed by him, taken from the books of the said firm, is a true and accurate statement of the said firm as of the date thereof and that the answers to the foregoing interrogatories are true.

Dated at _____ this _____ day of _____, 200__

Notary Public

Limited Liability or Corporation

STATE OF _____

ss.:

COUNTY OF _____

_____ being duly sworn, deposes and says that he is _____ of the _____, the corporation described in and which executed the foregoing statement; that he is familiar with the books of the said corporation showing its financial condition; that the foregoing financial statements and experience questionnaire, signed by him, taken from the books of the said corporation, is a true and accurate statement of the said corporation as of the date thereof and that the answers to the foregoing interrogatories are true.

Dated at _____ this _____ day of _____, 200__

Notary Public

GENERAL INFORMATION

DETAILED PLANS AND ESTIMATES - Detailed Plans and Estimates for the improvements advertised are on sale in the Office of Contracts, Ohio Department of Transportation, Columbus, Ohio. Unless credit has been established, the request accompanied by check in the prescribed amount made payable to the Treasurer, State of Ohio should be sent to the above office. Plans are also available for inspection but not for sale at the Department of Transportation District Offices.

BIDDING PROPOSALS - Bidding Proposals in duplicate will be forwarded directly from the Office of Contracts when requested, one of which is intended for the bidder's file.

SPECIFICATIONS - Copies of the Construction and Material Specifications may be ordered directly from the Office of Contracts.

QUALIFICATION - Bidders must make application to the Office of Contracts at least **30 days** before the date set to open bids. Information pertaining thereto, and qualifying blanks, may be obtained from the Qualification section of the Office of Contracts, Ohio Department of Transportation, Columbus, Ohio.

Request for Taxpayer Identification Number and Certification

**Give form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								

or

Employer identification number								

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here	Signature of U.S. person ▶	Date ▶
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Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien.

Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 4 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see *Special rules regarding partnerships* on page 1.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

Exempt payees. Backup withholding is not required on any payments made to the following payees:

1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
 2. The United States or any of its agencies or instrumentalities,
 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
 5. An international organization or any of its agencies or instrumentalities.
- Other payees that may be exempt from backup withholding include:
6. A corporation,
 7. A foreign central bank of issue,
 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 10. A real estate investment trust,
 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
 12. A common trust fund operated by a bank under section 584(a),
 13. A financial institution,
 14. A middleman known in the investment community as a nominee or custodian, or
 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt recipients except for 9
Broker transactions	Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker
Barter exchange transactions and patronage dividends	Exempt recipients 1 through 5
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt recipients 1 through 7 ²

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a federal executive agency.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee ¹
b. So-called trust account that is not a legal or valid trust under state law	The actual owner ¹
5. Sole proprietorship or single-owner LLC	The owner ³
For this type of account:	Give name and EIN of:
6. Sole proprietorship or single-owner LLC	The owner ³
7. A valid trust, estate, or pension trust	Legal entity ⁴
8. Corporate or LLC electing corporate status on Form 8832	The corporation
9. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
10. Partnership or multi-member LLC	The partnership
11. A broker or registered nominee	The broker or nominee
12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

³ You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules regarding partnerships* on page 1.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

AFFIDAVIT IN LIEU OF WORK TYPE KNOWLEDGE AND EXPERIENCE DOCUMENTATION

An officer or owner of a qualified contracting company may submit an affidavit stating that all information previously submitted to ODOT regarding the knowledge and experience of that company and its key construction personnel, remains unchanged and is an accurate representation of the current capability, experience, staffing and ability to provide all equipment necessary to perform work. This affidavit will be accepted in lieu of complete copies of previously submitted documentation of knowledge and experience in performing work.

IT IS IMPORTANT THAT THE CONTRACTOR UNDERSTAND THE FOLLOWING:

- The department will review the previously submitted information annually.
- Approval of work types requested is dependant upon the results of this review, the affidavit does not ensure reassignment of work types previously held by the contractor.
- The department may require that the information regarding the contractor's experience and the experience of the contractor's staff be submitted in the format currently utilized by the department (see Work Type Request & Reference Form and sample resume of key construction personnel).
- The department may request additional information to support approval of work types requested.
- Work experience for bridges must be updated in order that the experience be obtained in the time periods required.
- The contractor must utilize the affidavit format provided.

Contracting Company Name

Affidavit

I, [_____] , state that I am [_____] of [_____] , and that all
name of affiant officer/owner contracting company name

information previously submitted to ODOT for the purpose of prequalification, regarding this company's knowledge and experience of having satisfactorily performed work or of having on staff a person or persons who have verifiable knowledge and experience of being in responsible charge of the work, remains unchanged and is an accurate representation of the current capability, experience, staffing and ability to provide all equipment necessary to perform work.

I understand that ODOT may require that information regarding the contractor's work experience, and the work experience of the contractor's staff, be submitted in the format currently utilized by the Department. I understand that the information previously submitted will be reviewed by the Department and that approval of work types requested is dependant upon the results of the annual review. Additional information may be required to support approval of work types requested. I understand that submission of this affidavit does not exclude the previously submitted information from an in-depth review or ensure approval of work type requests which were approved in previous years.

I swear or affirm that this statement is complete and true to the best of my knowledge and belief.

Signature of Affiant

Subscribed and duly sworn before me according to law by the above named person,

_____, this ___ day of _____, 200_ at _____,
Name of Affiant

County of _____, and State of _____.

Official Seal of Notary

Signature of Notary Public

Official Title

My Commission Expires _____



GOVERNMENT BUSINESS AND FUNDING CONTRACTS
In accordance with section 2909.33 of the Ohio Revised Code

DECLARATION REGARDING MATERIAL ASSISTANCE/NONASSISTANCE TO A TERRORIST ORGANIZATION

This form serves as a declaration of the provision of material assistance to a terrorist organization or organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List (see the Ohio Homeland Security Division website for a reference copy of the Terrorist Exclusion List).

Any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided. Failure to disclose the provision of material assistance to such an organization or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree.

For the purposes of this declaration, "material support or resources" means currency, payment instruments, other financial securities, funds, transfer of funds, and financial services that are in excess of one hundred dollars, as well as communications, lodging, training, safe houses, false documentation or identification, communications equipment, facilities, weapons, lethal substances, explosives, personnel, transportation, and other physical assets, except medicine or religious materials.

Form with fields: LAST NAME, FIRST NAME, MIDDLE INITIAL, HOME ADDRESS, CITY, STATE, ZIP, COUNTY, HOME PHONE, WORK PHONE.

COMPLETE THIS SECTION ONLY IF YOU ARE A COMPANY, BUSINESS OR ORGANIZATION

Form with fields: BUSINESS/ORGANIZATION NAME, BUSINESS ADDRESS, CITY, STATE, ZIP, COUNTY, PHONE NUMBER.

DECLARATION

In accordance with division (A)(2)(b) of section 2909.32 of the Ohio Revised Code

For each question, indicate either "yes," or "no" in the space provided. Responses must be truthful to the best of your knowledge.

- 1. Are you a member of an organization on the U.S. Department of State Terrorist Exclusion List?
2. Have you used any position of prominence you have with any country to persuade others to support an organization on the U.S. Department of State Terrorist Exclusion List?

GOVERNMENT BUSINESS AND FUNDING CONTRACTS - CONTINUED

3. Have you knowingly solicited funds or other things of value for an organization on the U.S. Department of State Terrorist Exclusion List?
 Yes No
4. Have you solicited any individual for membership in an organization on the U.S. Department of State Terrorist Exclusion List?
 Yes No
5. Have you committed an act that you know, or reasonably should have known, affords "material support or resources" to an organization on the U.S. Department of State Terrorist Exclusion List?
 Yes No
6. Have you hired or compensated a person you knew to be a member of an organization on the U.S. Department of State Terrorist Exclusion List, or a person you knew to be engaged in planning, assisting, or carrying out an act of terrorism?
 Yes No

In the event of a denial of a government contract or government funding due to a positive indication that material assistance has been provided to a terrorist organization, or an organization that supports terrorism as identified by the U.S. Department of State Terrorist Exclusion List, a review of the denial may be requested. The request must be sent to the Ohio Department of Public Safety's Division of Homeland Security. The request forms and instructions for filing can be found on the Ohio Homeland Security Division website.

CERTIFICATION

I hereby certify that the answers I have made to all of the questions on this declaration are true to the best of my knowledge. I understand that if this declaration is not completed in its entirety, it will not be processed and I will be automatically disqualified. I understand that I am responsible for the correctness of this declaration. I understand that failure to disclose the provision of material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List, or knowingly making false statements regarding material assistance to such an organization is a felony of the fifth degree. I understand that any answer of "yes" to any question, or the failure to answer "no" to any question on this declaration shall serve as a disclosure that material assistance to an organization identified on the U.S. Department of State Terrorist Exclusion List has been provided by myself or my organization. If I am signing this on behalf of a company, business or organization, I hereby acknowledge that I have the authority to make this certification on behalf of the company, business or organization referenced on page 1 of this declaration.

X

Signature

Date