

INSTRUCTIONS FOR COMPLETING THE NEW YORK STATE UNIFORM CONTRACTING QUESTIONNAIRE

***Please Read Before Completing Questionnaire**

Complete all sections of the Questionnaire.

Submit this form as required by the contracting agency after being announced the low bidder for any competitively bid contract, or when proposed for subcontract work. If you have submitted one within 6 months of the bid date with any contracting agency, as long as the information remains unchanged and accurate, you may submit a complete certified copy of that form, together with an Affidavit of No Change, to the Agency with which you are bidding. A contracting agency may require additional information deemed necessary for its review. **Whenever more space is needed to answer any question or you wish to give further explanation, complete by attaching extra pages. All questions must be answered.**

For question #16, if your firm has OSHA citations, attach copies of each citation. Add additional explanatory material for any other affirmative answers.

A certified annual financial statement, including Accountant's Review Report and Accompanying Notes, will be acceptable in lieu of completing the financial disclosure forms in the questionnaire.

If you wish material in this Questionnaire to be held as confidential and exempt from disclosure under Freedom of Information, place an asterisk in front of all information you do not want disclosed to outside sources.

This Questionnaire is generally valid for one calendar year, unless major changes have occurred (firm purchased by another business, bankruptcy, etc.), in which case re-submittal is required.

Submit completed questionnaires marked "**CONFIDENTIAL**" to:

Republic Airport
Airport Manager
7150 Republic Airport, Room 216
East Farmingdale, NY 11735-3930
(631) 752-7707

Republic Airport
UNIFORM CONTRACTING QUESTIONNAIRE

INSTRUCTIONS

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NOTE: Please indicate whether you believe that any of the information supplied herein is confidential and should be exempt from disclosure under the Freedom of Information Law: ___yes, ___no. If you checked "yes" you must identify the information you feel is confidential by placing an asterisk in front of the appropriate question number(s) and you are requested to attach an additional sheet(s) upon which the basis for such claim(s) is explained.

GENERAL INFORMATION

1. NAME OF FIRM _____

DBA NAME ,IF ANY _____

MAILING ADDRESS _____ PHONE NO.(____) _____

CITY _____ COUNTY _____ STATE _____ ZIP _____ FAXNO.(____) _____

ACTUAL LOCATION _____

E-MAIL ADDRESS _____

2. TYPE OF FIRM (check(T) only one) ___CORPORATION ___PARTNERSHIP ___PROPRIETORSHIP ___JOINT VENTURE ___ LLC ___ LLP

3. HOW MANY YEARS HAS THE FIRM BEEN IN BUSINESS? _____ # OF YEARS UNDER THE SAME NAME? _____ FORMER NAME: _____

4. WHAT IS THE FIRM'S BONDING RANGE? \$ _____ SINGLE PROJECT \$ _____ AGGREGATE (ALL PROJECTS)

5. ARE YOU CERTIFIED AS A DBE ___ MBE ___ WBE ___ IF SO, WITH WHOM? _____

OWNERSHIP, MANAGEMENT, AFFILIATION

6. Identify each person who is, or has been within the past five years, an owner of 5.0% or more of the firm's shares, or one of the five largest shareholders or a director, an officer, a partner or a proprietor. Joint ventures: provide information for all firms involved. Fill in name, % owned, office held; indicate by Y or N whether director, officer or partner:

| FIRST NAME | MI | LAST NAME | DATE OF BIRTH | % OWNED | DIRECTOR (Y or N) | OFFICER (Y or N) | TITLE | PARTNER (Y or N) |
|------------|----|-----------|---------------|---------|-------------------|------------------|-------|------------------|
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

7. Identify any other firms in which, now or in the past five years, the firm or any of the individuals listed in question six above, either owned or owns 5.0% or more of the shares of, or was or is one of the five largest shareholders or as a director, officer, partner or proprietor of said other firm:

| FEDERAL ID NO. | % OWNED | FIRM/COMPANY NAME | FIRM/COMPANY ADDRESS |
|----------------|---------|-------------------|----------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

8. Identify any affiliate not listed in your answers to questions 6 and 7. For purposes of this question your firm and another are affiliates when, either directly or indirectly, one controls or has the power to control the other, or a third party or parties controls, or has the power to control both:

| FEDERAL ID NO. | COMPANY NAME | ADDRESS |
|----------------|--------------|---------|
| | | |
| | | |
| | | |
| | | |
| | | |

9. Identify any and all shareholders, directors, officers, owners, partners, or proprietors in common between your firm and any firm listed in response to questions 6,7 or 8:

| FEDERAL ID NO. | FIRST NAME, MI & LAST NAME | POSITION | OTHER FIRM |
|----------------|----------------------------|----------|------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

10. List the ten most recent contracts the firm has completed. If less than ten, include most recent subcontracts on projects up to that number:

| AGENCY/OWNER, CONTACT PERSON & TELEPHONE NO. | CONTRACT NO. | PRIME OR SUB | DESIGN ARCHITECT AND/OR DESIGN ENGINEER | AWARD DATE | AMOUNT | DATE COMPLETED |
|--|--------------|--------------|---|------------|--------|----------------|
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| 6. | | | | | | |
| 7. | | | | | | |
| 8. | | | | | | |
| 9. | | | | | | |
| 10. | | | | | | |

11. List all current uncompleted construction contracts:

| AGENCY/OWNER, CONTACT PERSON & TELEPHONE NO. | CONTRACT NO. | PRIME OR SUB | DESIGN ARCHITECT AND/OR DESIGN ENGINEER | TOTAL \$ AMOUNT OF FIRM'S CONTRACT (OR SUBCONTRACT) | \$ AMOUNT SUBLET TO OTHERS | UNCOMPLETED \$ AMOUNT OF FIRM'S CONTRACT (OR SUBCONTRACT) |
|--|--------------|--------------|---|---|----------------------------|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

GRAND TOTAL: _____

12. Gross Sales for Firm's Previous 3 Fiscal Years:

YEAR

_____ \$ _____

_____ \$ _____

_____ \$ _____

Average Backlog for Firm's Previous 3 Fiscal Years:
(Estimated total value of uncompleted work on outstanding contracts)

YEAR

_____ \$ _____

_____ \$ _____

_____ \$ _____

13. Has the firm, or any firm listed in response to questions 6,7 or 8, defaulted or been terminated on, or had its surety called upon to complete, any contract awarded within the past five years? NO { } YES { } If, yes, give date(s), agency(ies)/owner(s), project(s), contract numbers, and describe including the result: _____

14. For all contracts within the past five years: (a) list and describe all liens or claims over \$25,000 filed against the firm and remaining undischarged or unsatisfied for more than 90 days; and (b) list and describe all liquidated damages assessed _____

FINANCIAL INFORMATION

15. Complete the attached financial statement or attach a copy of the firm's most recent annual financial statement and accompanying notes.

OTHER INFORMATION

16. Within the past five years has the firm, any affiliate, any predecessor company or entity, or any person identified in question number 6 above been the subject of any of the following: (respond to each question and describe in detail the circumstances of each affirmative answer; attach additional pages if necessary)

- (a) a judgment of conviction for any business-related conduct constituting a crime under local, state or federal law? no__ yes__
- (b) a criminal investigation or indictment for any business-related conduct constituting a crime under local, state or federal law? no__ yes__
- (c) a grant of immunity for any business-related conduct constituting a crime under local, state or federal law? no__ yes__
- (d) a federal, state or local suspension or debarment? no__ yes__
- (e) a rejection of any bid for lack of qualifications, responsibility or because of the submission of an informal, non-responsive or incomplete bid? no__ yes__
- (f) a rejection of any proposed subcontract for lack of qualifications, responsibility or because of the submission of an informal, non-responsive or incomplete bid? no__ yes__
- (g) a denial or revocation of prequalification? no__ yes__
- (h) a voluntary exclusion from bidding/contracting agreement? no__ yes__
- (i) any administrative proceeding or civil action seeking specific performance or restitution in connection with any public works contract except any disputed work proceeding? no__ yes__
- (j) an OSHA Citation and Notification of Penalty containing a violation classified as serious? no__ yes__
- (k) an OSHA Citation and Notification of Penalty containing a violation classified as willful? no__ yes__
- (l) a prevailing wage or supplement payment violation? no__ yes__
- (m) a State Labor Law violation deemed willful? no__ yes__
- (n) any other federal, state or local citations, Notices, violation orders, pending administrative hearings or proceedings or determinations of a violation of any labor law or regulation? no__ yes__

- (o) any criminal investigation, felony indictment or conviction concerning formation of, or any business association with, an allegedly false or fraudulent women's, minority or disadvantaged business enterprise? no__ yes__
- (p) any denial, decertification, revocation or forfeiture of Women's Business Enterprise, Minority Business Enterprise or Disadvantaged Business Enterprise status? no__ yes__
- (q) rejection of a low bid on a State contract for failure to meet statutory affirmative action or M/WBE requirements? no__ yes__
- (r) a consent order with the NYS Department of Environmental Conservation, or a federal, state or local government enforcement determination involving a violation of federal, state or local environmental laws? no__ yes__
- (s) any bankruptcy proceeding? no__ yes__
- (t) any suspension or revocation of any business or professional license? no__ yes__
- (u) any citations, Notices, violation orders, pending administrative hearings or proceedings or determinations of a violation of:
 - * federal, state or local health laws, rules or regulations no__ yes__
 - * federal, state or local environmental laws, rules or regulations no__ yes__
 - * unemployment insurance or workers compensation coverage or claim requirements no__ yes__
 - * ERISA (Employee Retirement Income Security Act) no__ yes__
 - * federal, state or local human rights laws no__ yes__
 - * federal, state or local security laws? no__ yes__
- (v) a request to withdraw a bid submitted to a public owner or any claim of an error on a bid submitted to a public owner? no__ yes__

CERTIFICATION

The undersigned recognizes that this questionnaire is submitted for the express purpose of inducing the State of New York or its agencies and instrumentalities to award a contract, or approve a subcontract; acknowledges that the State or its agencies and instrumentalities may in its discretion, by means which it may choose, determine the truth and accuracy of all statements made herein; and states that the information submitted in this questionnaire and any attached pages is true, accurate and complete. It is further acknowledged that intentional submission of false or misleading information may constitute a felony under Penal Law Section 175.35 or may constitute a misdemeanor under Penal Law Sections 175.30, 210.35 or 210.45, and may also be punishable by a fine and/or imprisonment of up to five years under 18 USC Section 1001 and may result in a denial of contract award or contract termination.

Sworn to before me this

_____ day of _____,

Signature of Officer

Notary Public

Title

Commission Expiration Date

Officer Name (Please Print)

As of (date): _____

ASSETS

Current Assets

| | | |
|--|----------|----------|
| 1. Cash | | \$ _____ |
| 2. Accounts receivable - less allowance for doubtful accounts | \$ _____ | |
| Retainers included in accounts receivable | _____ | |
| Claims included in accounts receivable not yet approved or in litigation | _____ | |
| Total accounts receivable | | _____ |
| 3. Notes receivable - due within one year | | _____ |
| 4. Inventory - materials | | _____ |
| 5. Contract costs in excess of billings on uncompleted contracts | | _____ |
| 6. Accrued income receivable | | |
| Interest | _____ | |
| Other (list) _____ | _____ | |
| _____ | _____ | |
| Total accrued income receivable | | _____ |
| 7. Deposits | | |
| Bid and plan _____ | _____ | |
| Other (list) _____ | _____ | |
| _____ | _____ | |
| Total deposits | | _____ |
| 8. Prepaid Expenses | | |
| Income Taxes | _____ | |
| Insurance | _____ | |
| Other (list) _____ | _____ | |
| _____ | _____ | |
| Total prepaid expenses | | _____ |
| 9. Other current Assets | | |
| (list) _____ | _____ | |
| _____ | _____ | |
| Total other current assets | | _____ |
| 10. Total Current Assets | | \$ _____ |

11. Investments

| | | |
|--|----------|----------|
| Listed securities-present market value | \$ _____ | |
| Unlisted securities-present value | _____ | |
| Total investments | | \$ _____ |

12. Fixed Assets

| | | |
|--------------------------------|-------|----------|
| Land | _____ | |
| Building and improvements | _____ | |
| Leasehold Improvements | _____ | |
| Machinery and equipment | _____ | |
| Automotive equipment | _____ | |
| Office furniture and fixtures | _____ | |
| Other (list) _____ | _____ | |
| _____ | _____ | |
| Total | | \$ _____ |
| Less: accumulated depreciation | | _____ |
| Total fixed assets - net | | _____ |

13. Other Assets

| | | |
|--|-------|-------|
| Loans receivable - officers | _____ | |
| - employees | _____ | |
| - shareholders | _____ | |
| Cash surrender value of officers' life insurance | _____ | |
| Organization expense - net of amortization | _____ | |
| Notes receivable - due after one year | _____ | |
| Other (list) _____ | _____ | |
| _____ | _____ | |
| Total Other Assets | | _____ |

14. TOTAL ASSETS

=====

LIABILITIES

Current Liabilities

| | | | |
|--|----------|----------|----------|
| 15. Accounts payable | | \$ _____ | |
| 16. Loans from shareholders - due within one year | | _____ | |
| 17. Notes payable - due within one year | | _____ | |
| 18. Mortgage payable - due within one year | | _____ | |
| 19. Other payables - due within one year | | | |
| (list) _____ | \$ _____ | | |
| _____ | _____ | | |
| Total other payables - due within one year | | _____ | |
| 20. Billings in excess of costs and estimated earnings | | _____ | |
| 21. Accrued expenses payable - salaries and wages | | | |
| - payroll taxes | _____ | | |
| - employees' benefits | _____ | | |
| - insurance | _____ | | |
| - other | _____ | | |
| Total accrued expenses payable | | _____ | |
| 22. Dividends payable | | _____ | |
| 23. Income taxes payable | | | |
| - state | _____ | | |
| - federal | _____ | | |
| - other | _____ | | |
| Total income taxes payable | | _____ | |
| 24. Total Current Liabilities | | | \$ _____ |
| 25. <u>Deferred Income Taxes Payable</u> | | | |
| - state | _____ | | |
| - federal | _____ | | |
| - other | _____ | | |
| Total deferred income taxes | | | _____ |
| 26. <u>Long Term Liabilities</u> | | | |
| Loans from shareholders - due after one year | _____ | | |
| Notes payable - due after one year | _____ | | |
| Mortgage - due after one year | _____ | | |
| Other payables - due after one year | _____ | | |
| (list) _____ | _____ | | |
| _____ | _____ | | |
| Total long term liabilities | | | _____ |
| 27. <u>Other Liabilities</u> | | | |
| (list) _____ | _____ | | |
| _____ | _____ | | |
| Total other liabilities | | | _____ |
| 28. TOTAL LIABILITIES | | | ===== |

NET WORTH

29. Net Worth (if proprietorship or partnership) \$ _____

30. Stockholders' Equity

Common stock issued and outstanding \$ _____

Preferred stock issued and outstanding _____

Retaining earnings _____

Total _____

Less: Treasury stock _____

31. TOTAL STOCKHOLDERS' EQUITY _____

32. TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY _____

NOTE: IF ADDITIONAL SPACE IS REQUIRED, PLEASE NOTE AND ATTACH SCHEDULE TO STATEMENT

Dated this _____ day of _____, 20____.

Name of Organization

By: _____
Signature and Title

Name (please print)