

DRAGADOS USA

Project: NCDOT R-2514BC, NCDOT R-2514D, and NCDOT R-2514BCD - US17 SOUTH OF BELGRADE TO THE US17 NEW BERN BYPASS
Location: Craven, Jones and Onslow Counties, NC
Owner: North Carolina Department of Transportation
Owner Due Date: June 16, 2015 2:00pm EST
Quotes Due Date: **Monday, June 15, 2015**

INVITATION TO BID – PLEASE REPLY ASAP

You are hereby invited to submit a proposal for your work pertaining to the project referenced above. Please reply at your earliest convenience indicating below your preferred address and contact information for document delivery and project related communications. **This Project has 4% MBE & 7% WBE goals for BC and D Packages, and 4% MBE & 6% WBE for the D Package, so please indicate below if your firm has any Disadvantaged, Minority, Women-Owned, Veteran-Owned, SBA, HUB Zone, Service-Disable Veteran Owned**

Company name: _____ Estimator/ Contact: _____
 Address: _____ E-mail: _____
 City/ State/ Zip: _____ Phone: _____
 Fax: _____ Business Certifications: _____

Your attention is called for the following trades / items:

Scope of work: Please mark scope of interest or add scope if not shown below:

<input type="checkbox"/> Survey & Layout	<input type="checkbox"/> Asphalt Paving	<input type="checkbox"/> Seeding & Sodding
<input type="checkbox"/> Clearing & Grubbing	<input type="checkbox"/> Concrete Flatwork	<input type="checkbox"/> Permanent Signs
<input type="checkbox"/> Earthwork/Sitework/Grading	<input type="checkbox"/> Bridge Construction	<input type="checkbox"/> Striping/Pavement Markings
<input type="checkbox"/> Drainage	<input type="checkbox"/> Guardrail	<input type="checkbox"/> Traffic Control
<input type="checkbox"/> Box Culverts	<input type="checkbox"/> Fencing	<input type="checkbox"/> Concrete Barrier Wall
<input type="checkbox"/> Utilities (Waterline Works)	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Reforestation
<input type="checkbox"/> Subgrade and Base Course	<input type="checkbox"/> Erosion Control	<input type="checkbox"/> Other: _____

- **Contract Completion Date:** December 28, 2020 (Final completion)
- **Proposal:** please provide a detailed proposal including quantities, assumptions, inclusions, exclusions and any other information pertaining to the project and your bid.
- **Questionnaire:** please fill out the attached form.

ALL CORRESPONDENCE FOR THIS BID IS TO BE SENT TO:

Email: **Estimating.NC@Dragados-USA.com**

NYC Estimating Fax: **914-730-9954**

Alyssa Katz, Sub/Supplier Coordinator	Michelle Murdock, M/W/DBE Liaison
Ph. (212) 779-0900 Ext. 138	Ph. (212) 779-0900 Ext. 147

Documents & bid invitation response: bid packages per trade are available in electronic format; please provide us your preferred method of delivery:

- Yes. We will download files online from <http://dotw-xfer01.dot.state.nc.us/DSPlan/2015%20Highway%20Letting/06-16-15/Plans%20and%20Proposals/>
- Yes we will bid, we already have the plans and specs
- R-2514BC (Proposal 1)
 R-2514D (Proposal 2)
 R-2514BCD (Proposal 3/Cluster)
- No. We are not interested in bidding this project

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MINORITY SUBCONTRACTOR QUESTIONNAIRE

Name of Firm: _____

MINORITY DESIGNATION:

- | | |
|--|------------------------|
| <input type="checkbox"/> MBE (Minority Business Enterprise) | Expiration Date: _____ |
| <input type="checkbox"/> WBE (Women Business Enterprise) | Expiration Date: _____ |
| <input type="checkbox"/> DBE (Disadvantaged Business Enterprise) | Expiration Date: _____ |

NCDOT Reporting Number: _____

NCDOT PREQUALIFICATION CATEGORIES (I.E. NAICS CODES): _____

WORK HISTORY:

LIST PAST PROJECTS STARTING WITH THE MOST RECENT (Highlight any NCDOT Experience):

1. _____ SUBCONTRACT DOLLAR VALUE: _____
BEGINNING/ENDING DATES: _____
2. _____ SUBCONTRACT DOLLAR VALUE: _____
BEGINNING/ENDING DATES: _____
3. _____ SUBCONTRACT DOLLAR VALUE: _____
BEGINNING/ENDING DATES: _____

COMPANY RESOURCES (List Current Resources available to perform applicable Scope of Work):

No. of Employees (Labor): _____

No. of Employees (Mngt): _____

Equipment (i.e. trucks, dozers, excavators, loaders, etc.):

Type: _____	#Owned _____	#Leased _____
Type: _____	#Owned _____	#Leased _____
Type: _____	#Owned _____	#Leased _____

REFERENCES:

1. Company Name: _____
Company Representative Contact Name: _____
Contact Phone Number: _____ Contact Email: _____
2. Company Name: _____
Company Representative Contact Name: _____
Contact Phone Number: _____ Contact Email: _____

BONDABILITY:

IS SUBCONTRACTOR BONDABLE? YES NO

IF SO, WHAT IS BONDING CAPACITY? _____

IF NOT, WILL YOU ACCEPT RETAINAGE? YES NO

PAYMENT TERMS:

NET 30 NET 14 OTHER _____