



# RESPONSIBLE BIDDER CHECKLIST

## CITY OF HAMMOND

### PRE-QUALIFICATION FORM

**BUSINESS & CONTACT NAME**

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**ADDRESS**

**CITY**

**STATE**

**ZIP**

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**BUSINESS PHONE**

**CELL PHONE**

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**EMAIL**

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**PRE-QUALIFICATION REQUIREMENTS. ALL ITEMS ON THE CHECKLIST MUST BE TURNED IN.**

- 1. INDIANA SECRETARY OF STATE ON-LINE RECORDS
- 2. BUSINESS NAMES FOR LAST 10 YEARS
- 3. COURT OR GOVERNMENT AGENCY VIOLATIONS
- 4. EVIDENCE OF APPRENTICESHIP PROGRAM
- 5. WRITTEN EMPLOYEE DRUG TESTING PROGRAM
- 6. MANAGEMENT EXPERIENCE
- 7. NAME OF ASSIGNED GM OR SUPERINTENDENT
- 8. PROOF OF PROFESSIONAL OR TRADE LICENSE
- 9. SURETY COMPANY
- 10. TAX LIENS OR DELIQUENCIES
- 11. STATEMENT OF PROPER JOB CLASSIFICATIONS
- 12. SIMILAR-SIZED PROJECTS
- 13. BIDDER AND SUBCONTRACTORS QUALIFIED UNDER EITHER IC 4-13.6-4 OR IC 8-23-10
- 14. LETTER DISCLOSING SUBCONTRACTOR NAMES, ADDRESSES, WORK TYPES

FORM TO BE FILED AND SUBMITTED WITH: **HAMMOND INSPECTIONS DEPARTMENT**  
**5925 CALUMET AVENUE**  
**HAMMOND, IN 46320**