



12. Has any officer or partner of your organization been an officer or partner of some other organization within the past 5 years that failed to complete a construction contract during that period? \_\_\_\_\_ If so, attach a statement indicating the name of the individual, other organization and reason therefore.
13. Has any officer or partner of your organization with the past 5 years failed to complete a construction contract handled in his or her own name? \_\_\_\_\_ If so, attach a statement indicating the name of individual, name of owner and reason therefore.
14. Has your organization, any of its owners, a subsidiary or corporate parent, or any officer or director thereof, been convicted in the last 3 years of violating Sec. 133.03, Wisconsin Statutes (Unlawful Contracts: Conspiracies)? If so, indicate:
- Date \_\_\_\_\_
  - Claimant \_\_\_\_\_
  - Claimant's Mailing Address: \_\_\_\_\_
- d. Attach a statement reciting the particulars of such violation(s).
15. Attach a list of major projects your organization has completed within the past 3 years, including for each project: the class of work, the contract amount, the completion date, and the name and address of the owner or contracting officer.
16. List any projects previously completed for the City of Cedarburg in the last 10 years.
17. Attach a list of the major equipment which is available to your organization for the proposed Work.
18. Attach a statement of your organization's experience in the construction of work similar in nature and importance to this Project.
19. Credit Available: \_\_\_\_\_  
Attach a letter from your bank(s) or other financial institution(s) advising line of credit set up for your organization.
20. Name of Bonding Company and name, address and telephone number of agent.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
21. Financial Statement:  
Condition of close of business on \_\_\_\_\_ 20\_\_\_\_
- Assets**
- Cash \$ \_\_\_\_\_
  - Accounts Receivable \$ \_\_\_\_\_
  - Real Estate Equity \$ \_\_\_\_\_

d. Materials in Stock \$ \_\_\_\_\_  
 e. Equipment, Book Value \$ \_\_\_\_\_  
 f. Furniture, Fixtures Book Value \$ \_\_\_\_\_  
 g. Other Assets \$ \_\_\_\_\_

Total Assets \$ \_\_\_\_\_

**Liabilities**

h. Accounts, Notes and Interest Payable \$ \_\_\_\_\_  
 i. Other Liabilities \$ \_\_\_\_\_

Total Liabilities \$ \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 2015

Name of Organization: \_\_\_\_\_

By: \_\_\_\_\_

(Print Name and Title)

State of: \_\_\_\_\_  
 County of: \_\_\_\_\_

Being duly sworn says that he/she is \_\_\_\_\_ of  
 (Name and Title)

\_\_\_\_\_ and that answers to the foregoing questions and  
 (Name of Organization)

all statements contained herein and in the attachments are true and correct.

Subscribed and sworn to me before this \_\_\_\_\_ day  
 of \_\_\_\_\_ 2015

Notary Public \_\_\_\_\_  
 My commission expires \_\_\_\_\_

End of this Section