**SE-115**

**CONSTRUCTION PREQUALIFICATION SELECTION COMMITTEE MEMBER  
CONTRACTOR EVALUATION**

**AGENCY:**

**PROJECT NAME:**

**PROJECT NUMBER:**

|  |  |
| --- | --- |
| **CONTRACTORS SUBMITTING QUALIFICATIONS** | |
| **A**. | **F.** |
| **B.** | **G.** |
| **C.** | **H.** |
| **D.** | **I.** |
| **E.** | **J.** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EVALUATION CRITERIA** | | **Ranking**  **Range** | **CONTRACTORS** | | | | | | | | | |
| **A** | **B** | **C** | **D** | **E** | **F** | **G** | **H** | **I** | **J** |
|  | Past Performance with Ability to Meet Time & Budget |  |  |  |  |  |  |  |  |  |  |  |
|  | Ability of Proposed Personnel |  |  |  |  |  |  |  |  |  |  |  |
|  | Financial Information Regarding the Contractor’s Ability to Provide Required Bonding and Insurance |  |  |  |  |  |  |  |  |  |  |  |
|  | Location of the Contractor’s Proposed Office in Relation to the Project Area |  |  |  |  |  |  |  |  |  |  |  |
|  | Contractor’s General Project Experience |  |  |  |  |  |  |  |  |  |  |  |
|  | Volume of State Contracts Awarded, if any |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Criteria Included in the Solicitation: |  |  |  |  |  |  |  |  |  |  |  |
| **TOTAL POINTS *(Use whole numbers only and break all ties before ranking)*** | | |  |  |  |  |  |  |  |  |  |  |
| **RANKING OF CONTRACTORS *(1,2,3…) (Transfer to SE-117)*** | | |  |  |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **EVALUATOR CERTIFICATION**  I hereby certify that all the contractors listed were evaluated and ranked by me based on the Evaluation Criteria shown above and no other criteria were used. | |
| **EVALUATOR NAME:** | **DATE:** |
| **SIGNATURE:** | |