

**STATE OF NORTH CAROLINA**  
**North Carolina Office of Recovery and Resiliency (NCORR)**

# **Request for Prequalification of General Contractors (“RFPQ4”)**

**Prime Contractors for Residential Construction Services**

Request for Qualification #19-RFPQ-00002-DAD

Date of Issue: July 26, 2022  
Applications Accepted on an Ongoing Basis

Email Completed Application to: [Construction@ReBuild.NC.Gov](mailto:Construction@ReBuild.NC.Gov)

## PURPOSE

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The North Carolina Office of Recovery and Resiliency (NCORR), a division of the North Carolina Department of Public Safety (DPS), is seeking to develop and maintain a list of pre-qualified prime construction contractors to perform, or cause to be performed: rehabilitation, demolition, elevation and/or mitigation services of eligible structures through NCORR recovery programs. Pursuant to N.C.G.S. § 143-131 construction assignment contracts can be entered into up to \$29,999.99 without competitive bidding. The pre-qualified general contractors from this list would be assigned construction or demolition work pursuant to 143-131. Projects that are above the §143-131 threshold will be competitively bid on the State’s Interactive Purchasing System (IPS) and eProcurement Sourcing tool.

This Construction Assignment List is not a contract. The individual Assignment Contracts / Work Orders (“WO”) will be the contract.

General Contractors that submit an Application to be added to the Construction Assignment List will be expected to accept the terms and conditions of the Assignment Contract. By submitting this Application, the Vendor acknowledges they have reviewed the sample Assignment Contract, including the terms and conditions. Sample Assignment Contract is located at [Construction Assignment List | ReBuild NC](#).

## QUESTIONS ABOUT REQUEST FOR CONSTRUCTION ASSIGNMENT LIST

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Written questions regarding this Request for Construction Assignment List shall be emailed to [Construction@ReBuild.NC.Gov](mailto:Construction@ReBuild.NC.Gov).

Responses to questions will be posted to [Construction Assignment List | ReBuild NC](#).

## METHOD OF ADDITION TO CONSTRUCTION ASSIGNMENT LIST

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There is no limit on the number of GCs to be added to the Construction Assignment List. The process will be open, in that, it will be publicly posted to allow additional GCs the opportunity to be added to the List.

NCORR shall review the applications to confirm that they meet the requirements. For any GC which has previously been prequalified by the State pursuant to 19-RFP-014914-GSX, that GC will be waived into this Construction Assignment List unless that status was rescinded.

The State may request additional formal responses or submissions from any or all GCs for the purpose of clarification or to amplify the materials presented in any part of the Application. GCs are cautioned, however, the State is not required to request clarification, and often does not. Therefore, all Applications should be complete.

## **ASSIGNMENT OF CONTRACTS**

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GCs will be assigned based upon an agreed-upon assignment factor applied to the Estimated Cost of Repair (“ECR”); and will be assigned based on procedures of the Program Delivery Office (PDO). The assignment factor will be set by NCORR, which will include overhead and profit. The GC will then either accept or reject the assignment factor. GCs that do not accept the assignment factor will not be awarded contracts.

Assigned contracts will be in the form of an Assignment Contract / Work Order. All Work Orders shall be issued by NCORR in writing, signed by both the GC and NCORR, and shall include a Scope of Services, a list of tasks to be performed by GC, a time schedule, a list of deliverables, if any, and such other information or special conditions as may be necessary for the work requested.

## **CONSTRUCTION ASSIGNMENT LIST RESCISION**

Vendor may be removed from the Construction Assignment List because of poor performance, material breaches of contract, substantiated non-payments to subcontractors/valid payment bond claims, substantiated complaints from homeowners that are serious (e.g., violations of policies concerning alcohol, illegal drugs, possession of firearms, disrespectful behavior, theft of personal property, GC damage to real property not subject to rehabilitation, etc.), False Claim Act violations, and misrepresentation of experience, violations of permits, illegal disposal of hazardous materials, any major OSHA or several minor OSHA violations, significant injuries to any person during construction caused by failure to follow required safety practices, and/or negative GC evaluations.

## ATTACHMENT A: QUESTIONNAIRE

This form gathers information about the contractors seeking to be added to the Construction Assignment List. **Completing this questionnaire does not guarantee being added to the List.** Evaluation of the submittal shall be performed by the prequalification committee.

### SECTION 1. GENERAL COMPANY INFORMATION

#### ORGANIZATION

##### Business Type (check box)

☐ Corporation   ☐ Partnership   ☐ Limited Liability Company   ☐ Sole Proprietor   ☐ Joint Venture

##### Indicate your North Carolina Statewide Uniform Certification (check only one box)

☐ **B** (Black)   ☐ **HA** (Hispanic)   ☐ **AA** (Asian American)   ☐ **AI** (American Indian)   ☐ **W** (Female)  
☐ **D** (Disabled)   ☐ **SED** (Socially Economically Disadvantaged)

See NC HUB website for information: <http://www.doa.nc.gov/hub/swuc.htm>

☐ Applied for North Carolina HUB certification; application pending.

☐ Not a HUB

##### Is your firm registered with the State of North Carolina to do business?   ☐ YES   ☐ NO

See Secretary of State website to confirm registered and in "**Active – Current**" status:  
[https://www.sosnc.gov/online\\_services/search/by\\_title/Business Registration](https://www.sosnc.gov/online_services/search/by_title/Business%20Registration)

##### Is your firm registered with SAMS?   ☐ YES   ☐ NO

Vendor **MUST register with SAMS**, <https://sam.gov>

You should NEVER have to pay for SAM registration, if you are prompted to pay you are not on the correct site. When registering select "Register for All Awards".

For assistance with SAMS registration contact **The Federal Service Desk at 866-606-8220**.

Video on **How to Register for SAMS**, [Entity Registration - Core Data – YouTube](#)

##### Is your firm owned or controlled by a parent or any other organization?   ☐ YES   ☐ NO

If "YES", describe Ownership:

##### List all other names your firm has operated as for the past three (3) years:

## **LICENSING INFORMATION**

Provide a General Contractor license for North Carolina as well as any additional North Carolina professional licenses required for you to perform the services in this RFPQ.

<b>NC LICENSE NUMBER / NAME OF LICENSEE</b>	<b>LICENSE LIMIT / LEVEL</b>	<b>STATE/COUNTY/CITY PRIVILEGE LICENSE</b>

**Provide a copy of all licenses listed.** Attach a sheet if additional space is needed to list licenses.

**Has any license ever been denied or revoked?** ☐ YES ☐ NO

If "YES", describe:

## **BONDING**

**Does your company have the ability to bond construction projects?** ☐ YES ☐ NO

## SECTION 2. GENERAL REQUIREMENTS

### **EXPERIENCE – SIZE/CAPACITY/WORKLOAD**

**Has your present company, its officers, owners, or agents ever been convicted of charges relating to conflicts of interest, bribery, or bid-rigging?** ☐ Yes ☐ No

If "YES", describe:

**Has your present company, its officers, owners, or agents ever been barred from being awarded public work in North Carolina?** ☐ Yes ☐ No

If "YES", describe:

By executing this Request for Prequalification, the Vendor acknowledges they have reviewed the sample Assignment Contract, including the terms and conditions.

<b>COMPLETE/FORMAL NAME OF VENDOR:</b>	<b>SAM.GOV UNIQUE ENTITY ID:</b> Vendor <i>MUST</i> register with SAM, <a href="https://sam.gov">https://sam.gov</a>
<b>STREET ADDRESS:</b>	<b>OFFICE PHONE NUMBER:</b>
<b>CITY &amp; STATE &amp; ZIP CODE:</b>	<b>CELL PHONE NUMBER:</b>
<b>PRINT NAME &amp; TITLE OF PERSON SIGNING ON BEHALF OF VENDOR:</b>	<b>EMAIL:</b>
<b>VENDOR'S AUTHORIZED SIGNATURE:</b>	<b>DATE:</b>

<p><b>FOR PROGRAM DELIVERY OFFICE (PDO) USE ONLY:</b></p> <p>Request for Prequalification Application</p> <p><input type="checkbox"/> <b>Accepted</b> _____ (date)</p> <p><input type="checkbox"/> <b>Declined</b> _____ (date)</p> <p>Reasons(s) Declined:</p>  <p>Application Reviewed (Approved/Denied) By: _____</p> <p style="text-align: right;"><i>PDO Signature</i></p>
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