

STATE OF CALIFORNIA THE RESOURCES AGENCY DEPARTMENT OF WATER RESOURCES

CONTRACTOR'S SAFETY PERFORMANCE

To be filed with the State of California, Department of Water Resources by Contractors proposing to bid on State Projects in accordance with provisions of the Public Contract Code.

Issue Prequalification To:

Name of Firm: _____
(Name must correspond EXACTLY with Contractor's License in every detail)

Address: _____
(Street address AND P. O. Box if applicable)

(City) (State) (Zip Code)

Application Submitted By (Co. Representative): _____

Telephone: () _____

Date: _____



INFORMATION

1. The safety prequalification process is primarily intended to provide Department of Water Resources (DWR) with knowledge of past and current safety performance of contractors working on DWR construction contracts. Contractors will be required to provide information such as Experience Modification Rates (EMR), injury and illness incidence rates, regulatory citation history, and general safety and health practices prior to bidding on DWR construction projects. Contractors will be required to provide full-time safety professionals if specified thresholds are not met.
2. The Safety Prequalification Questionnaire is to be filled out on a yearly basis.
3. Any questions or information relating to filing this questionnaire may be obtained at:

Department of Water Resources
Division of Engineering
Contract Development Section
1416 Ninth Street, Room 418
Sacramento, CA 95814
Attention: Safety Prequalification Coordinator
(916) 651-9707

4. Pursuant to PCC § 10161, the Director of the Department of Industrial Relations approved the standard form of this questionnaire and the guidelines on December 9, 2014.

Date:

- New SPQ Application
 SPQ Reapplication

SECTION A – GENERAL INFORMATION

Contractor Firm Name:	Firm Address:
Telephone:	E-mail:
Contact person:	Contractor License No.:
	License Expiration Date:

Identify the highest ranking safety/health professional in your company or assigned to this project:

Name:	Title:
Phone:	E-mail:

SECTION B – SAFETY & HEALTH PERFORMANCE

1.) Provide your Workers' Compensation Experience Modification Rate (EMR) Data:

	Policy Year	EMR
Current EMR*:		
1 Year Ago:		
2 Years Ago:		
3 Years Ago:		

***If your current EMR is greater than 1.25, initialing here certifies that you will provide a competent, full-time person or representative responsible for safety for all DWR projects: _____**

***Initialing here certifies that your firm does not have an EMR: _____
 (Submit a copy of your firm's Loss Run Reports for the last three years if your firm does not have an EMR.)**

Name of your firm's Workers' Compensation carrier:

Phone number of Workers' Compensation carrier:

2.) Is your firm self-insured for Workers' Compensation claims? YES NO (If yes, please attach a copy of the latest Annual Report to the State of California Department of Industrial Relations and/or State of California Certificate of Self-Insurance.)

SECTION C – LOST WORKDAY INCIDENCE RATES & CITATION HISTORY

Provide your actual injury and illness data below:

Provide the NAICS Code Number that best represents your firm:

(Provide any additional numbers here:)

(Provide three full years of data)	Last Year	2 Years Ago	3 Years Ago
Year:			
Number of hours worked by all employees:			
Total Recordable Incident Rate*:			
Incident Rate for Days Away from Work, Restricted Duty and/or Job Transfer*:			
Total Number of Fatalities:			

Incident Rate = [(Total Recordable Cases X 200,000 hours) / Number of hours worked by all employees]

***If your latest incident rates are greater than 100% of the industry average for all your NAICS Code Numbers listed, initialing here certifies that you will provide a competent, full-time person responsible for safety for all DWR projects: _____. The industry average can be found at <http://www.bls.gov/news.release/osh.nr0.htm>.**

CITATION HISTORY

1. Have you received any regulatory (EPA, OSHA, MSHA, DOE, Coast Guard, etc.) citations in the last three years? YES NO
If yes, please answer the question below.
2. Have you abated all of the citations issued to you in the last three years? YES NO If no, please submit your citations and abatement action plan.

SECTION D – SAFETY POLICIES AND PROCEDURES

Provide responses to the questions below:

No.	Question	YES	NO*
1	Has your company established, implemented and maintained an effective, written Injury and Illness Prevention Program (IIPP) (CCR Title 8 §3203(a) and §1509(a))? If yes, a copy of the Program will be required at the job site.		
2	Does your company conduct "toolbox" or "tailgate" safety meetings, or equivalent with employees at least every 10 working days? (CCR Title 8 §1509(e))		
3	Does your company have written procedures to identify and evaluate work place hazards, and correct unsafe or unhealthy conditions, work practices and work procedures in a timely manner? (CCR Title 8 §3203(a)(4) and (a)(6))		
4	In your system for ensuring that employees comply with safe and healthy work practices, does your company take disciplinary action? (CCR Title 8 §3203(a)(2))		
5	Does your company have a written Code of Safe Practices that relates to your company's operations? (CCR Title 8 §1509(b)) If yes, a copy of the Code of Safe Practices must be available for review, if requested.		
6	Does your company have a written Hazard Communication Program? (CCR Title 8 §5194(e))		
7	Does your company make a thorough survey of the conditions of worksites to determine, so far as practicable, the predictable hazards to employees and the kind and extent of safeguards necessary to prosecute the work in a safe manner? (CCR Title 8 §1511(b))		
8	Does your company instruct employees in the recognition of hazards (i.e. flammable liquids and gases, poisons, caustics, harmful plants and animals, toxic materials, confined spaces, etc), in the procedures for protecting themselves from injury, and in the first aid procedure in the event of injury? (CCR Title 8 §1510(c))		
9	Does your company have a procedure to investigate occupational injuries or occupational illnesses? (CCR Title 8 §3203(a)(5))		
10	Does your company review investigations of occupational accidents and causes of incidents resulting in occupational injury, occupational illness, or exposure to hazardous substances? (CCR Title 8 §3203(c)(4))		
11	Does your company have a written Emergency Action Plan? (CCR Title 8 §3220)		
12	In your system for ensuring that employees comply with safe and healthy work practices, does your company have training and retraining programs? (CCR Title 8 §3203(a)(2) and (a)(7))		
13	Does your company maintain records of scheduled and periodic inspections and documentation of safety and health training? (CCR Title 8 §3203(b))		

*Provide reason(s) for NO answer in the box below or on a separate sheet of paper. Please check the box if an extra page is attached.

SECTION E- CONTRACTOR CERTIFICATION STATEMENT

I certify under penalty of perjury that:

- (a) the information contained herein is true and correct to the best of my knowledge, and
- (b) no attempt has been made to give any false or misleading information or to withhold any information.

Signature of Authorized Representative

Title of Authorized Representative

Printed Name of Authorized Representative

Date Signed

THE DEPARTMENT OF WATER RESOURCES RESERVES THE RIGHT TO REQUEST ANY AND ALL DOCUMENTATION NECESSARY TO VERIFY RESPONSES SUBMITTED IN THIS SAFETY PREQUALIFICATION QUESTIONNAIRE.

QUESTIONNAIRE EVALUATION – DWR USE ONLY

Contractor is:

- Qualified and will be placed on the Qualified Contractor List, effective _____.
- Qualified, but Contractor must provide a competent, full-time person or representative responsible for safety, effective _____.
- Not Qualified.

Reviewer (Print Name): _____

Date: _____

Reason(s) contractor has been determined Not Qualified for this project:

SAFETY PREQUALIFICATION QUESTIONNAIRE

INSTRUCTIONS/GUIDELINES FOR COMPLETING QUESTIONNAIRE AND SCORING

The Safety Prequalification Questionnaire (SPQ) has been developed to evaluate each contractor's overall safety performance. Contractors must qualify in all sections prior to bidding on a Department of Water Resources project. If Qualified, Contractors shall be placed on a list that will be good for one year starting on the effective date listed on page 3 of the Safety Prequalification Questionnaire. Contractors will be required to apply each year.

SECTION A – GENERAL INFORMATION

Contractor shall complete all boxes in Section A. Contractor must provide license number and expiration date. Contractor must maintain a valid license through the life of the project. Failure to do so may result in work stoppage at contractor's expense and/or termination.

SECTION B – SAFETY & HEALTH PERFORMANCE

If EMR is greater than 1.25, then the contractor will provide a competent, full-time person responsible for safety for all DWR projects, at the expense of the contractor.

If no EMR, then the contractor must submit Loss Run Reports.

SECTION C – LOST WORKDAY INCIDENCE RATES & CITATION HISTORY

Contractors shall also be evaluated on OSHA incident rates compared to the most current data provided by the Annual Survey of Occupational Injuries and Illnesses conducted by the Bureau of Labor Statistics, U.S. Department of Labor ("BLS") <http://www.bls.gov/news.release/osh.nr0.htm>. Compare the contractor's incidence rates to the BLS incidence rates for the NAICS (North American Industry Classification System) code.

If incident rates are greater than industry average, then contractor will provide a competent, full-time person responsible for safety for all DWR projects, at the expense of the contractor.

Citation History:

Question No. 1 Response	Question No. 2 Response	ACTION
"NO"		<u>Qualified</u>
"YES"	"YES"	<u>Qualified</u>
"YES"	"NO"	Contractor must submit the following items to DWR: <ol style="list-style-type: none"> 1. Copies of all citations (violations) received in the full three-year period from the time this questionnaire was executed. 2. Abatement plan for each citation (violation).

SECTION D – SAFETY POLICIES AND PROCEDURES

You are required to answer all questions accurately. Notwithstanding the information provided, Contractors shall comply with all applicable laws, including but not limited to those pertaining to Cal/OSHA.

SECTION E – CONTRACTOR CERTIFICATION STATEMENT

If contractor provides information that is later determined to be false or withholds information, the contractor will be immediately considered Not Qualified.

SCORING THE SPQ

Section	Description	Reviewer to Select One*:
A	General Information	Qualified / Not Qualified
B	Safety & Health Performance	Qualified / Not Qualified
C	Lost Workday Incidence Rates & Citation History	Qualified / Not Qualified
D	Safety Policies and Procedures	Qualified / Not Qualified
E	Contractor Certification Statement	Qualified / Not Qualified

*If the contractor is determined to be Not Qualified, DWR must provide reason(s) to the contractor in writing.

APPEAL PROCESS (Public Contract Code Section 10161)

If DWR intends to disqualify a prospective bidder based upon the bidder's safety record, DWR will notify the prospective bidder in writing of that intention. DWR's notice of intention shall be sent by overnight mail via a delivery service that provides online tracking, and shall inform the bidder that the bidder has the right to a hearing. The bidder must request that hearing within ten calendar days of receiving such notice of intention. If the bidder does not request a hearing within this time, DWR's determination shall become final.

Within seven calendar days of receiving the bidder's request for a hearing, DWR shall notify the bidder in writing of the date, time and place of the hearing. The hearing shall be held no sooner than ten calendar days and no later than fifteen calendar days after the notice is given. The notice shall inform the bidder of his right to have counsel present and to present testimony and documents in support of his position. DWR may also have its counsel present.

The hearing shall be informal and shall be conducted before DWR's designee, who, after considering all testimony and documentation presented, shall issue a written decision no later than five calendar days following the hearing. The decision is not subject to further appeal to DWR.

The appeal process may take up to 45 days. The bidder shall not be entitled to bid on any contracts with DWR until it has met DWR's safety pre-qualification standards. The bidder shall have the right to withdraw its application for prequalification or its appeal at any time before DWR's decision becomes final. Such withdrawal will not preclude the bidder from re-applying for prequalification.

BIDDING INFORMATION

1. A contractor who has prequalified and who desires drawings, specifications and bid forms should make a request in writing or may request plans and bid forms by telephone to the Department of Water Resources, P.O. Box 94236, Room 418, Sacramento, CA 94236, (916) 653-4867.
2. Two or more contractors who have prequalified by filing separate statements and who wish to combine their assets for bidding on a single project may do so by filing a Statement of Joint Venture provided by the Department. Such Statement will be valid only for the specific project mentioned therein. Should the contractors desire to continue to bid jointly, a joint prequalification statement should be filed for the joint venture. Attention is called to the "Contractors' License Law" with respect to the license requirements for joint venturers.

PREQUALIFICATION LAW

(As of November 1, 2014)

10160. The department may require from prospective bidders answers to questions contained in a standard form of questionnaire and financial statement including a complete statement of the prospective bidder's financial ability and experience in performing public works. When completed, the questionnaire and financial statement shall be verified under oath by the bidder in the manner in which pleadings in civil actions are verified. Whenever prequalification is required of any bidder on a contract, it shall be required for all prospective bidders to that contract.

10161. The department may also require from prospective bidders the completion, under penalty of perjury, of a standard form of questionnaire concerning the past safety record of each prospective bidder, any officer of such bidder, and any managing employee of such bidder. The department may refuse to prequalify any prospective bidder who fails to submit a completed questionnaire when required, or for the reason that the information contained in the submitted questionnaire or otherwise known to the department indicates a continuing unsatisfactory safety record.

The director of the department shall prescribe guidelines listing criteria which will be utilized administratively in determining an unsatisfactory safety record. A refusal by the department to prequalify a prospective bidder shall be issued only after the department has granted such bidder a hearing.

This section shall in no way abridge or restrict the right of the department to later determine whether the low bidder on a particular project is the lowest responsible bidder for purposes of award of the contract, including the holding of hearings thereon.

The Director of Industrial Relations shall approve the standard form of questionnaire and the guidelines listing criteria which will be utilized administratively by the department in determining an unsatisfactory safety record prior to their use by the department.

10165. The questionnaires and financial statements are not public records and are not open to public inspection.

10166. The department shall furnish to each bidder a standard proposal form, which, when filled out and executed may be submitted as his bid. Bids not presented on forms so furnished shall be disregarded. The department shall not furnish proposal forms to any person who is required to submit and has not submitted a questionnaire and financial statement for prequalification at least FIVE days prior to the date fixed for publicly opening sealed bids and been prequalified for at least ONE day prior to that date.