



New Mexico Department of Transportation PREQUALIFICATION PACKET

NEW

RENEWAL

(For NMDOT use only)			
Receipt Date:	Approval Date:	Approved By:	Yearly Prequalification Factor:
Notice of Receipt Date:			

INSTRUCTIONS:

1. Prime Contractors must have an approved prequalification status at least seven (7) calendar days prior to bid opening or bid will be rejected. (Deadlines are calculated from the date OIG receives the packet.)
2. Subcontractors must have an approved prequalification status before performing any work.
3. Packets will be issued electronically unless the contractor requests a hardcopy in writing. Please submit completed packet electronically. E-mail completed packet to: nmdot.prequal@state.nm.us
4. Only a timely, complete, and conforming packet will be accepted for approval. **Every box** must be completed. If the information does not apply to your company, please respond with **NONE or NO**. Do not answer with **N/A** or not applicable. Do not leave questions blank.
5. Attach additional sheets as needed. Indicate the section and question number in the upper right hand corner of the additional sheet.
6. Renewal packets will NOT be accepted more than thirty (30) calendar days before the date of expiration of the applicant's prequalification status.
7. It is your responsibility to timely complete and submit the packet before your prequalification status expires each year. Prequalified status automatically terminates one year from the prequalified date on the Prequalified Contractors and Subcontractors List.
8. Compass forms for closed projects will be sent to the contact person and e-mail address provided on the current packet. Limit one contact person and e-mail address per packet, multiple e-mail addresses will not be accepted.
9. All supporting information must be issued to and match the business name of the applicant.

PART I: GENERAL INFORMATION

Business Name:		Telephone Number:	Fax Number:
Mailing Address:		City, State, Zip Code:	
Physical Address:		City, State, Zip Code:	
Name of Contact: <i>See #8 of instructions</i>	Telephone Number:	Email Address: <i>See #8 of instructions</i>	
Business Type: Corporation: Partnership: Sole Proprietorship Consolidated Company <small>(Cooperative Associations, Professional Corporations, Indian Pueblos, Business Corporations, and Limited Liability Companies)</small> <small>(Uniform Partnership, Limited Liability Partnership)</small>			
Status: Prime Subcontractor		Federal Tax ID:	NM GRT Number:
EMR Number: <i>Required</i> <i>Attach verification</i>	Age of Business:	SAM.gov UEI/DUNS Number: <i>Required</i>	NMDOT Vendor No.

PART III: BUSINESS TYPE & OTHER INFORMATION

1. My business is a corporation, complete No Yes, complete below:				
Date Incorporated:	State Incorporated:			
2. How many years has your business been a:				
Prime Contractor:	Subcontractor:			
3. USDOT and/or Motor Transportation Division (MTD) Number: <i>(Attach Copy of Verification)</i>	4. New Mexico Public Regulation Commission Number/ New Mexico Secretary of State Number: <i>(Attach Copy of Verification)</i>			
5. Has your business defaulted on any public works project in the preceding three (3) years? <i>If yes, please specify:</i>				
Government Agency:	Project:	Date:	Yes	No
Detailed Explanation: (Attach additional sheet if necessary)		Location:		
6. Have you, your director(s), officer(s), owner(s), member(s), partner(s) or employee(s) of your business pled guilty, been convicted of, or have a civil judgment entered for any offense listed in NMSA 1978, Section 13-1-178 (2013) or 18.28.4.8 NMAC?				
Detailed Explanation: (Attach additional sheet if necessary)			Yes	No
Name:		Date:		
7. Have you, your director(s), officer(s), owner(s), member(s), partner(s) or employee(s) of your business been debarred or suspended by any State, Local or Federal entity?				
Detailed Explanation: (Attach additional sheet if necessary)			Yes	No
Name:		Date:		
8. If your company is licensed to work in New Mexico, provide your license number, classification and expiration date.				
License Number:	Classification(s):	Expiration Date:		

