

**RFQ # 730-1017-08: OREGON DEPARTMENT OF TRANSPORTATION  
ODOT Small Contracting Program for Construction (SCPC) Registration Form**

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**SUBMIT COMPLETED REGISTRATION FORM TO:**

**Mail**

ODOT Procurement Office  
Attn: Debbie Janke  
455 Airport Road SE, Building K  
Salem OR 97301-5348

**Email:** [Debra.L.Janke@odot.state.or.us](mailto:Debra.L.Janke@odot.state.or.us)

**Fax:** (503) 986-5790

**PART 1. Contractor Contact Information**

Legal Name of Company:		DBA (if different than Legal Name):		
Street Address:		City:	State:	Zip Code:
Mailing Address (if different than above):		City:	State:	Zip Code:
County:		Phone Number:		Fax Number:
Contact Person:	First Name:		Last Name:	
Title:		Phone Number:	Email Address:	

**PART 2. Company's Information**

1. Select the type of business you are:

<input type="checkbox"/> Company is a Corporation	<input type="checkbox"/> Company is a Limited Liability Company
<input type="checkbox"/> Company is a Partnership	<input type="checkbox"/> Company is a Sole Proprietorship

**FOR ODOT OFFICE USE ONLY**

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**PART 2. Company's Information (continued)**

2. What is your Oregon Secretary of State Corporation Division's Registration Number? \_\_\_\_\_  
 (Secretary of State's web site is [www.filinginoregon.com/index.htm](http://www.filinginoregon.com/index.htm) and phone is (503) 986-2200)
3. What is your Oregon Construction Contractors Board License Number? \_\_\_\_\_
4. What is your Oregon Building Codes Division (BCD) Electrical License No., If applicable? \_\_\_\_\_
5. What is your Oregon Building Codes Division (BCD) Plumbing License No., If applicable? \_\_\_\_\_
6. What is your Oregon Landscape Contractors Board License No., if applicable? \_\_\_\_\_
7. How many years has the company been in business under this or any other name? \_\_\_\_\_
8. How many years of experience has the company had with ODOT as a:  
 Prime Contractor? \_\_\_\_\_ Sub Contractor? \_\_\_\_\_
9. Is the company currently certified by the State of Oregon as a:

	YES	NO	IF YES, CERTIFICATION NUMBER:
Disadvantaged Business Enterprise (DBE)	<input type="checkbox"/>	<input type="checkbox"/>	
Emerging Small Business (ESB)	<input type="checkbox"/>	<input type="checkbox"/>	_____
Minority Owned Business Enterprise (MBE)	<input type="checkbox"/>	<input type="checkbox"/>	
Woman Owned Business Enterprise (WBE)	<input type="checkbox"/>	<input type="checkbox"/>	

10. Are you a Disabled Veteran Owned Business?  Yes  No

Definition: "Disabled Veteran" as defined in ORS 408.225(c) means a person entitled to disability compensation under laws administered by the United States Department of Veterans Affairs, a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty or a person who was awarded the Purple Heart for wounds received in combat.

A Disabled Veteran Owned Business is any business enterprise where one or more such individuals own or control, if the cumulative ownership or control by such individuals is 51% or greater. Please provide proof of service-connected disability from the United States Department of Veterans Affairs. The proof of service-connected disability may be in the form of an:

- a. Award letter;
- b. Award card; or
- c. Other evidence acceptable to the Authorized Agency from the United States Department of Veterans Affairs

**Part 3**

Identify the Work Type(s) for which the company is requesting registration and the number of years the company has provided the specified Work Type(s). Any necessary licenses and/or certifications will be verified upon invitation to bid.

Work Types	No. of Years
------------	--------------

- |   |       |
|---|-------|
| <input type="checkbox"/> Aggregates       | _____ |
| <b>Asphalt Concrete Paving and Oiling</b> |       |
| <input type="checkbox"/> Paving           | _____ |
| <input type="checkbox"/> Chip Sealing     | _____ |
| <input type="checkbox"/> Crack Sealing    | _____ |
| <input type="checkbox"/> Slurry Sealing   | _____ |
| <input type="checkbox"/> Fog Sealing      | _____ |

Work Types	No. of Years
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- |  |       |
|--|-------|
| <b>Landscaping</b>   |       |
| <input type="checkbox"/> Roadside Seeding                        | _____ |
| <input type="checkbox"/> Lawns                                   | _____ |
| <input type="checkbox"/> Shrubs                                  | _____ |
| <input type="checkbox"/> Tree Services                           | _____ |
| <input type="checkbox"/> Irrigation Systems                      | _____ |
| <input type="checkbox"/> Topsoil                                 | _____ |
| <input type="checkbox"/> Temporary and Permanent Erosion Control | _____ |

**Part 3 (continued)**

**Bridges and Structures**

- Concrete Bridges \_\_\_\_\_
- Steel Bridges \_\_\_\_\_
- Timber Bridges \_\_\_\_\_
- Retaining Walls and Soundwalls \_\_\_\_\_
- Seismic Retrofit \_\_\_\_\_
- Box Culverts \_\_\_\_\_
- Structural Plate Pipe \_\_\_\_\_
- Pipe Arches \_\_\_\_\_

**Buildings**

- Remodel \_\_\_\_\_
- Plumbing \_\_\_\_\_
- Roofing \_\_\_\_\_
- Maintenance \_\_\_\_\_
- Flooring \_\_\_\_\_
- New Construction \_\_\_\_\_
- HAZMAT Abatement \_\_\_\_\_

**Earthwork and Drainage**

- Clearing & Grubbing \_\_\_\_\_
- Earthwork \_\_\_\_\_
- Riprap \_\_\_\_\_
- Culverts \_\_\_\_\_
- Manholes \_\_\_\_\_
- Inlets \_\_\_\_\_
- Storm Sewers \_\_\_\_\_
- Sanitary Systems \_\_\_\_\_
- Excavation \_\_\_\_\_
- Demolition \_\_\_\_\_
- Drainage \_\_\_\_\_

**Electrical**

- Traffic Signals \_\_\_\_\_
- Ramp Meters \_\_\_\_\_
- Roadway Weather Information Systems (RWIS) \_\_\_\_\_
- Traffic Cameras \_\_\_\_\_
- Variable Message Signs (VMS) \_\_\_\_\_
- ITS \_\_\_\_\_
- Loop Detection \_\_\_\_\_
- Structures & Buildings \_\_\_\_\_
- Illumination \_\_\_\_\_

**Miscellaneous Highway Appurtenances**

- Guardrail \_\_\_\_\_
- Barrier \_\_\_\_\_
- Curbs \_\_\_\_\_
- Walks \_\_\_\_\_
- Fences \_\_\_\_\_
- Protective Screening \_\_\_\_\_
- Impact Attenuators \_\_\_\_\_
- Cold Plane Pavement Removal \_\_\_\_\_
- Rumble Strips \_\_\_\_\_

**Painting**

- Bridges \_\_\_\_\_
- Buildings \_\_\_\_\_

**Pavement Markings**

- Permanent - Painted \_\_\_\_\_
- Durable \_\_\_\_\_
- Markers \_\_\_\_\_
- Delineators \_\_\_\_\_

- Permanent Signing** \_\_\_\_\_

- Portland Cement Concrete Paving** \_\_\_\_\_

**Subsurface Explorations**

- Soil Borings \_\_\_\_\_
- Rock Coring \_\_\_\_\_
- Test Pit Excavation \_\_\_\_\_
- In Situ Testing (including, but not limited to: cone Penetrometer, flat plate dilatometer, pressure meter, etc.) \_\_\_\_\_

**Temporary Traffic Control**

- Flaggers \_\_\_\_\_
- Pilot Cars \_\_\_\_\_
- Temporary Signs \_\_\_\_\_

- Trucking & Hauling** \_\_\_\_\_

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**PART 4. Contractor Company Experience Information**

For each Work Type(s) checked in Part 3, list one (1) to three (3) projects the company has completed during the past five (5) years or is currently working on, either as a Prime Contractor or Subcontractor, that pertains to the Work Type(s) your company has checked. These contracts may be used as references. Please include the completion date of the project, your company's project contract amount, the Work Type(s) your company performed, the name of the owner and/or contract officer, and the contract officer's address, city, state, zip code, and telephone number and/or e-mail.

A) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

B) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

C) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

D) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

E) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

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F) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

G) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

H) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

I) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

J) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

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K) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

L) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

M) Project: Name \_\_\_\_\_ Completion Date \_\_\_\_\_  
Prime Contractor  Subcontractor  Your Company's Project Contract Amount: \$ \_\_\_\_\_  
Work Type(s) from Part 3 \_\_\_\_\_  
Owner/Contract Officer \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

**PART 5. Registration Form Certification Statement**

I hereby certify that I am a duly authorized representative of the Company and the information contained within this registration form is true and accurate to the best of my knowledge. I hereby authorize and request any person, agency, or firm to furnish any pertinent information requested by the Oregon Department of Transportation deemed necessary to verify the statements made in this registration form.

Printed name of person signing below \_\_\_\_\_

\_\_\_\_\_  
Signature of Authorized Representative      Date      Title