

Request for Additional Class of Work
Submit three completed projects for each selected class of work



Date: _____

Name of Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Vendor Code: _____

Phone Number: _____ E-mail Address: _____

Original Signature and Title Date

Print Name and Title

Select Class of Work

<input type="checkbox"/> Bridge – Construction	<input type="checkbox"/> Highway – Bike Paths	<input type="checkbox"/> Salt Marsh and Wetland Restoration
<input type="checkbox"/> Bridge – Culverts	<input type="checkbox"/> Highway-Construction	<input type="checkbox"/> Sewer and Water
<input type="checkbox"/> Bridge – Deck Repairs	<input type="checkbox"/> Highway-Lighting	<input type="checkbox"/> Signing – Non Structural
<input type="checkbox"/> Bridge – Joints	<input type="checkbox"/> Highway – Sidewalk and Curbing	<input type="checkbox"/> Signing – Structural
<input type="checkbox"/> Catch Basin Cleaning	<input type="checkbox"/> Impact Attenuators	<input type="checkbox"/> Street Sweeping
<input type="checkbox"/> Chemical Storage Sheds	<input type="checkbox"/> Intelligent Transportation Systems	<input type="checkbox"/> Traffic Signals
<input type="checkbox"/> Crack Sealing	<input type="checkbox"/> Landscaping Including Tree Planting	<input type="checkbox"/> Tree Trimming - Maintenance and Removal
<input type="checkbox"/> Dam Construction	<input type="checkbox"/> Marine Construction	<input type="checkbox"/> Waterways
<input type="checkbox"/> Demolition	<input type="checkbox"/> Mowing and Spraying	
<input type="checkbox"/> Drainage	<input type="checkbox"/> Painting–Structural	
<input type="checkbox"/> Drawbridge Maintenance	<input type="checkbox"/> Pavement Markings	
<input type="checkbox"/> Dredging	<input type="checkbox"/> Pavement–Milling and Cold Planing	
<input type="checkbox"/> Drilling & Boring	<input type="checkbox"/> Pavement - Reclamation	
<input type="checkbox"/> Electrical –All Types– Including Electrical Maintenance	<input type="checkbox"/> Pavement - Surfacing	
<input type="checkbox"/> Guard Rail & Fencing	<input type="checkbox"/> Pump Stations	
<input type="checkbox"/> Hazardous Waste Remediation &Transportation	<input type="checkbox"/> Recreational Facilities	

FOR OFFICIAL USE ONLY

Approved _____ Denied _____

Comments: _____

Email to: prequal.r109@dot.state.ma.us

Phone: 857-368-8660

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You may duplicate this template as needed

Please provide a detailed scope of work for each project. Projects listed should be \$50K and over.
Do not list contracts completed more than 10 years ago.

1. Class of work: Dollar Value:

1a. Other Classes of work performed: Dollar Value:

Project Title:

Location:

Owner:

Owner's rep:

Telephone#:	Email:
-------------	--------

Architect / Engineer:

A/ E contact person:

Telephone#:	Email:
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Original contract amount: \$	Original completion date:
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Final contract amount: \$	Final completion date:
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Were you the **Prime Contractor** or **Subcontractor** for this project?

Percentage of work completed with own forces:

Value of work completed with own forces: \$

Detailed Scope of Work:

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MASSDOT, Highway Division
 Prequalification Department
 10 Park Plaza, Room 6260, Boston, MA 02116

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Project Title:	
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Owner:	
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Telephone#:	Email:
Architect / Engineer:	
A/ E contact person:	
Telephone#:	Email:
Original contract amount: \$	Original completion date:
Final contract amount: \$	Final completion date:
Were you the Prime Contractor or Subcontractor for this project?	
Percentage of work completed with own forces:	
Value of work completed with own forces: \$	
Detailed Scope of Work:	

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