RSU 16 Poland High School/Middle School PreBid Qualifications Questionnaire - QUESTION II.A

Project Name	Owner	Location	Type of Project	Contract Dollar Value	Start Date	Original Contract Completion Date	Revised Completion Date *(by C.O.)*	Final/ Substantial Completion Date	Name of Contractor's Superintendent	Owner's Name/Contact and Phone	Owner's Rep Name and Phone	% of Cost of Work Performed by Own Forces	Any Assessed Liquidated Damages w/Explanation	Architect/ Engineer Contact Name and Phone	Attach Separate Pages for Narratives (12/13/14)