



Ogden Replacement Elementary School  
24 West Walton Street  
Chicago, Illinois 60610  
Project No. 1632400

## Invitation to Pre-Qualify

**ATTN: BIDDING SUBCONTRACTORS**  
**PAGE 1 OF 3**

Re: **Bid Packages: 02900- Landscaping, 07500 Roofing**  
**07800 – Spray-On-Waterproofing, 09100 – Gypsum Board Partitions, Plaster &**  
**Ceilings**

**SUBCONTRACTORS PRE-QUALIFICATIONS DUE:**

<p><b>Pre-Qualification Checklist Due Date:</b> <b>Monday January 25<sup>th</sup>, 2010, 3:00 PM</b> <b>CST</b></p>
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January 11, 2010

Ladies and Gentlemen:

We, as the Construction Manager for the Ogden Replacement Elementary School, invite you to submit your firm's Pre-Qualification Checklist for consideration to bid your portion of work on the above referenced project.

### **PROJECT DESCRIPTION & CONSTRUCTION SCHEDULE**

The Project site is located between N. State Street and N. Dearborn Street and W. Walton Street and W. Oak Street in Chicago. The building is approximately 156,000 gross square feet. One sub grade level of approximately 45,000 SF will be used for parking, storage and building maintenance. The first level at grade will be the main entry with Principal's office, 6 Pre-K class rooms, dock and service areas including the Kitchen. The second level will include 12 classrooms, a computer and science lab, art room and a 2 story Gymnasium with raised platform stage along with mechanical rooms. The 3<sup>rd</sup> floor has another 12 classrooms, the library, music room, staff lounge and mechanical rooms. The Roof plan has a 3 access points including an elevator override along with an outdoor playground and vegetative roofs. The building cladding is masonry, aluminum and glass panels. Construction started in November 2009 with substantial completion scheduled for June 30<sup>th</sup>, 2011, with academic classes starting September 6<sup>th</sup>, 2011.

### **TEAM MEMBERS**

The owner for this project is the Public Building Commission of Chicago which is representing the Chicago Public Schools. The Design Architect is SMNG-A, the Architect of Record is Nager Hartway Danker Kagan McKay Penney, the Structural Engineer is Matrix Engineering Corporation, and the Mechanical, Electrical, Plumbing and Fire Protection Engineer is dbHMS.

### **PRE-QUALIFICATION CHECKLIST DUE DATE**

Subcontractor pre-qualification checklist is due on **Monday 1-25-10, 3:00 PM CST**. The pre-qualification checklist is to be either sent, faxed, or emailed to Turner Construction Company, attention Dave Puls ([dpuls@tcco.com](mailto:dpuls@tcco.com)) or Pete Woeste ([pgwoeste@tcco.com](mailto:pgwoeste@tcco.com)). If your firm will submit a pre-qualification checklist for this project, please notify us by completing the attached "Request to Pre-Qualification Form and faxing it back to

me at fax number 312-327-2800. We also ask that you return this form if you do not intend on submitting a pre-qualification checklist.

The Project Team thanks you for your interest in this project. We look forward to receiving your pre-qualification checklist.

Thank you.

Sincerely,

A handwritten signature in blue ink, appearing to read "Peter G. Woeste".

Peter G. Woeste  
Project Manager  
Turner Construction Company  
312-327-2770

Attached: Request to Pre-Qualify Confirmation Sheet

**REQUEST TO PRE-QUALIFY CONFIRMATION**

**Confirmation for:**

Trade (check box):

Landscaping

Roofing

Spray-On-Fireproofing

Gypsum Partitions,  
Plaster & Ceilings

**PRE-QUALIFICATION DUE DATE:**

The completed Pre-Qualification Checklist must be received no later than **Monday 1-11-10, 3:00 PM CST.**

Turner Construction Company  
55 E. Monroe St – Suite 3100  
Chicago, IL 60603  
Attention: Dave Puls or Peter Woeste  
Fax: 312-327-2800

Please sign below and fax back to Dave Puls or Peter Woeste of Turner Construction Company confirming your continued interest in this project to Fax: 312-327-2800.

**YES**  **WE WILL SUBMIT THE PRE-QUALIFICATION CHECKLIST**

(Please fill in above)

Signature of Authorized Representative: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Contact Name for all correspondence: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**NO**  **WE WILL NOT SUBMIT THE PRE-QUALIFICATION CHECKLIST**

(Please fill in above)

Signature of Authorized Representative: \_\_\_\_\_

Print Name and Title: \_\_\_\_\_

Company Name: \_\_\_\_\_