

SUBCONTRACTOR PREQUALIFICATION FORM

Company Name _____

Complete Address _____

Phone Number _____ Fax number _____

Contact Name _____ E-mail address _____

Federal Tax ID # _____ Contractor's License No. _____

Years in Business: _____ Size of projects preferred \$ _____

Currently Licensed in (States) _____

Preferred Project location(s) _____

Trade(s) of Work _____

INSURANCE INFORMATION

General Liability Limits: \$ _____ per occurrence \$ _____ aggregate

Insurance Company/Address _____

Agent Name/ Phone # _____

OTHER INFORMATION In the past five years has the company...

- operated under any other name? Yes No
- had any liens filed against it by any of its subcontractors or suppliers? Yes No
- ever failed to complete a contract, been defaulted, or had a contract terminated? Yes No
- or any of its key people been a party to a bankruptcy or reorganization proceeding? Yes No
- or any of its key people been involved in any lawsuit arising from a project? Yes No
- or any of its key people been investigated for or found to have committed a violation of any labor laws?
 Yes No

Give details for any yes answer on a separate sheet.

Attach a sheet that includes the following:

- **COMPLETED PROJECTS** - List four (4) representative projects completed in the last five (5) years.
 - Include: Name of Project, Location, Contracting Company, Contact Name/Phone No., Contract Amount, and Completion Date
- **CURRENT PROJECTS** - List four (4) representative projects currently under construction.
 - Include: Name of Project, Location, Contracting Company, Contact Name/Phone No., Contract Amount, and Completion Date
- **TRADE REFERENCES** - List three (3) of your subcontractors or suppliers.
 - Include: Company Name, Address, Phone Number, and Contact Name
- **CLIENT REFERENCES** - List three (3) clients.
 - Include: Company Name, Address, Phone Number, and Contact Name

Signature _____ Date _____

Print Name _____ Title _____