

Contractor Qualification Form

It is our policy, before we use quotes or sign contracts, to ask contractors to submit this qualification form. This enables us to categorize contractors within their trade by types and sizes of contracts they can handle.

Please complete the form and submit the following attachments with it:

- Financial statements (copies of your three most recent annual financial statements);
- Licenses (copies of your current license or certification, if you are an electrician, plumber, asbestos handler, or in any other trade that requires a license or certification to perform work);
- Certificate of Insurance (general liability, vehicle, & worker's compensation).

1. Contractor Identity

Area of expertise _____

Company name _____

Address _____

Phone # _____ Fax # _____ E-mail address _____

Tax ID or SS # _____ Contact person _____

Type of company: Sole proprietorship Corporation Partnership Date formed _____

States in which the company is legally qualified to do business _____

Total number of employees _____

Names and titles of key people in company _____

Has the company operated under any other name in the past five years? yes no

If yes, list addresses _____

2. MBE/WBE/SBE Certification

Is the company a certified Minority Business Enterprise (MBE), Women Business Enterprise (WBE), Small Business Enterprise (SBE), or any other type of certified business enterprise? yes no

If yes, list. _____

3. Bank Reference

Does the company have a line of credit from any lending institution? yes no If yes, give details:

AMT. OF CREDIT OUTSTANDING BALANCE LENDER'S NAME/ADDRESS LENDING OFFICER'S NAME/PHONE #

4. Bonding Capacity

Do you have bonding? yes no If yes, give details:

Single project limit _____ Aggregate limit _____

Bonding company name/address _____

Bonding agent name/address/phone # _____

5. Completed Projects (Summarize representative projects completed in past five years)

NAME OF PROJECT SCOPE OF WORK CONTRACT AMOUNT COMPLETION DATE

6. Current Projects (Summarize current projects)

NAME OF PROJECT SCOPE OF WORK CONTRACT AMOUNT COMPLETION DATE

7. Trade References (List three of your subcontractors or suppliers)

NAME OF PROJECT SCOPE OF WORK CONTRACT AMOUNT COMPLETION DATE

8. Client References (List three clients)

NAME OF PROJECT SCOPE OF WORK CONTRACT AMOUNT COMPLETION DATE

9. Other Information

Has your company or any of its key people been a party to a bankruptcy or reorganization proceeding?

yes no If yes, give date. _____

During the past five years, have any liens been filed against you by any of your subcontractors or suppliers?

yes no If yes, give details for any liens over \$5,000. _____

Have you ever failed to complete a contract, been defaulted, or had a contract terminated? yes no

If yes, give details. _____

In the past five years, have you had liquidated damages assessed against you upon completion of a project?

yes no If yes, give details. _____

In the past five years, has your company or any of its key people been involved in any lawsuits arising from construction projects? yes no If yes, give details. _____

In the past five years, has your company or any of its key people been investigated for or found to have committed a violation of any labor laws? yes no If yes, give details. _____

In the past five years, has your company or any of its key people been investigated for or found to have committed any OSHA violations? yes no If yes, give details. _____

In the past five years, has your company or any of its key people been investigated for or found to have committed a violation of state, federal, or local environmental protection laws? yes no

If yes, give details. _____

Is there any other information you would like to give us? _____
