

CONTRACTOR'S PREQUALIFICATION STATEMENT

BL HARBERT	Firm: _		Contact:	Contact:		
	Addres	ss:	Email:			
INTERNATIONAL	City, St	ate, Zip:	Phone/Fax:			
Scope of Work/	Trade:					
GENERAL TYPE OF FIRM: Corporation		Partnership Individua	Other (pro	ovide explanation)		
Provide informat	tion which	ector under present firm name: would indicate the size and capacinged in (do not count the same em	ty of your organization,	including the number of		
Estimating: Accounting: Management: _		Field Supervision: Clerical:				
ls your organizat	tion a regist	tered MBE/WBE contractor:		Yes No		
ls your organizat If yes, what is yo		tly registered with Dunn & Bradstr ?		Yes No		
Has your firm ev	er failed to	complete a contract?		Yes No		
Are there any ju	dgments, c	laims or suits pending or outstand	ing against your firm?	Yes No		
•		to any lawsuits or requested arbitrects in the last five years?	ration with	Yes No		
•		rform work with your own forces o f you subcontract work to others p	-	Yes No		
(If answer to any	y of the abo	ove questions is yes, please provide	e explanation)			
SAFETY List your compa	ny's EMR fo	or the current year and the two imr	mediately prior years (A	ttach Documentation)		
Year	Year	Year				
EMR	EMR	EMR				
List your compa	ny's OSHA	Total Recordable Incident Rate for	the current year and th	e two immediately prior year		
Year	Year	Year				
TRIR	TRIR	TRIR				

Has your firm had any OSHA enforced infractions within the past three years or currently under review? If so please specify year, project, infraction, violation classification, and penalty.

REFERENCES

City, State, Zip

Contact, Phone Number

Please list four different general contractors and owners for whom you have performed work for in the past 5 years.

GENERAL	CONTRACTOR	RFFFRFNCFS

0 1 0 1 11 0	Project:	
Owner's Representative & Phone Number	Owner's Representative & Phone Number	
General Contractor	General Contractor	
Contact, Phone Number	Contact, Phone Number	
Approx. Value	Approx. Value	
Project:	Project:	
Owner's Representative & Phone Number	Owner's Representative & Phone Number	
General Contractor	General Contractor	
Contact, Phone Number	Contact, Phone Number	
Approx. Value	Approx. Value	
Name of Institution	Name of Institution	
Street Address	Street Address	
	Street Address City, State, Zip	
City, State, Zip	City, State, Zip	
City, State, Zip Contact, Phone Number Account Number SUPPLIER/VENDOR REFERENCES	City, State, Zip Contact, Phone Number	
City, State, Zip Contact, Phone Number Account Number SUPPLIER/VENDOR REFERENCES Please list four supplier/vendor references.	City, State, Zip Contact, Phone Number	
City, State, Zip Contact, Phone Number Account Number SUPPLIER/VENDOR REFERENCES Please list four supplier/vendor references. Name of Institution	City, State, Zip Contact, Phone Number Account Number	
City, State, Zip Contact, Phone Number Account Number SUPPLIER/VENDOR REFERENCES Please list four supplier/vendor references. Name of Institution	City, State, Zip Contact, Phone Number Account Number Name of Institution	
City, State, Zip Contact, Phone Number Account Number SUPPLIER/VENDOR REFERENCES Please list four supplier/vendor references. Name of Institution Street Address	City, State, Zip Contact, Phone Number Account Number Name of Institution Street Address	
City, State, Zip Contact, Phone Number Account Number SUPPLIER/VENDOR REFERENCES Please list four supplier/vendor references. Name of Institution Street Address City, State, Zip	City, State, Zip Contact, Phone Number Account Number Name of Institution Street Address City, State, Zip	

City, State, Zip

Contact, Phone Number

EXPERIENCE & WORKLOAD

FIVE LARGEST PROJECTS COMPLETED IN THE LAST FIVE YEARS:

PROJECT	GENERAL CONTRACTOR'S REPRESENTATIVE &	PHONE NUMBER	C	ONTRACT AMOUNT \$
			\$	
			\$	
			•	
			\$\$	
			\$	
			\$	
	Average annu	ual billing for last five years: Last year's billing:	\$ _ \$ _	
MAJOR PROJ	ECTS UNDER CONTRACT:			
PROJECT	% COMPLETE/COMPLETION DATE	GENERAL CONTRACTOR		CONTRACT AMOUNT \$
			\$	
			\$	
			\$	
			\$	
			\$	
	Total projects under contract: (inc Percent negotia	luding those not listed above ted projects under contract:		
CURRENT PRO SCHEDULE):	OJECTS FOR WHICH YOUR FIRM IS A CANDIDA			

PROJECT MANAGERS, FIELD SUPERINTENDENT AND CONSTRUCTION EXPERIENCE

(Corporate seal)

Please attach resumes for key management personnel including: Name, Title and Experience complete with project name, size, location, general contract and phone number and owner's representative and phone number. Key personnel should include at a minimum senior management and other key safety and operations personnel.

	ct limit. This	e bond? If yes, please provide a letter from your letter must be from your <i>surety company</i> and not your <i>surety</i>
What is your current bond rate?%		
Please list the names of your bonding agent ar	nd surety.	
A	_ В	
(Bonding Agent)		(Surety)
(Street Address)		(Street Address)
(City, State, Zip)		(City, State, Zip)
(Contact, Phone Number)		(Contact, Phone Number)
FINANCIAL FINANCIAL STATEMENT:		
CPA Firm: (Attach a current copy of audited/reviewed fir Opinion Page".) Please send to securefinancia		ments for the most recent two years including the "Auditor's c.com
THE ANSWERS TO THE FOREGOING QUESTION	NS AND ALL S	STATEMENTS HEREIN CONTAINED ARE TRUE AND CORRECT.
Firm:	Signature:	
Ву:	Date:	
Title:	Attest:	

Explanations:	