### FDS CONTRACTOR'S QUALIFICATION REQUIREMENTS AND CONTACTS

- 1. A305 Contractor's Qualification Statement with references (sample attached).
- 2. Family Dollar Supplemental Form of Contractor's Qualification Statement (sample attached).
- 3. Letter from Contractor's Bonding Company (A- or greater) indicating aggregate limits and single project limits (if bidding a project in excess of \$90,000).
- 4. Certificate of Insurance for Workmen's Compensation and General Liability (sample attached).
- 5. Cover letter giving brief introduction and daytime phone number and contacts.
- 6. Copy of State License.
- 7. D & B Report called Construction Credit Score Report (sample attached).
- 8. Background Inquiry Consent Form (sample attached).

## Western Territory

Carl Griffin (Director of Construction)

P. O. Box 1017 Charlotte, NC 28201 Email Address: <u>carlgriffin@familydollar.com</u>

**Covers the field construction activities for the following states:** California, Nevada, Arizona, Utah, Idaho, Montana, Wyoming, Colorado, New Mexico, North Dakota, South Dakota, Nebraska, Kansas, Oklahoma, Texas, Minnesota, Iowa, Missouri, Arkansas, Louisiana, Wisconsin, Illinois, Tennessee, Mississippi, Michigan, Indiana, and Kentucky.

# Eastern Territory

Paul Nault (Director of Construction)

P. O. Box 1017 Charlotte, NC 28201 Email Address: <u>pnault@familydollar.com</u>

**Covers the field construction activities for the following states:** Maine, New Hampshire, Vermont, Massachusetts, Rhone Island, Connecticut, New Jersey, Delaware, District of Columbia, Maryland, New York, Pennsylvania, Ohio, West Virginia, Virginia, North Carolina, South Carolina, Georgia, Alabama and Florida.

### Family Dollar Supplemental Form of Contractor's Qualification Statement

Family Dollar Supplemental 2003 revision – Electronic Format

#### 1. Organization:

1.1 Company History (Brief narrative of your companies history, can use separate attachment).

1.2 List the name of Principals of your Organization and attach Resumes as available.

1.3 List the name of your Office Manager along with their E-mail address (if available) and direct phone number.

1.4 How many superintendents do you have available to work on Family Dollar Projects?

1.5 How many projects can your company handle at one time?

1.6 Does your company have an E-mail address? If so, please indicate?

1.7 Do you currently have a web site? If so, what is the address?

1.8 Do your superintendents have capabilities of sending/receiving E-mail on Site?

1.9 Are Digital cameras on site? If yes, can photos be E-mailed?

#### 2. Licensing:

2.1 List all states in which you are legally licensed, <u>include</u> license and registration numbers (Hard copy must be included).

2.2 List all states in which you are legally licensed and have completed work in the last 5 years.

#### 3. Experience:

3.1 Indicate the last 5 projects (other than Family Dollar) that your organization has completed? Type of Construction? Costs? Time Frame? Who for?

#### 4. References:

4.1 List 3 Sub-Contractors that you have been doing business with for at least 1 year (Indicate their Trade, Contacts and Phone numbers).

4.2 If required, can you produce a Payment and Performance Bond? What is your bonding rate (percentage)?

4.3 What is the largest project you have ever Bonded? (Give brief description of project)

#### 5. Financing: 5.1

Do you have a D&B number? (Dun & Bradstreet) Yes No If yes, please indicate.

5.2 Do you have an extended line of credit with a financial institution or supplier? If yes, please indicate?

#### 6. Signature:

6.1 I acknowledge that the foregoing is true and accurate to the best of my knowledge. I further acknowledge that providing false or misleading information on this form constitutes a material breach by Vendor or any agreement, oral or written, between Vendor and Family Dollar.

6.2 Dated at

By:

Title:

6.3 Being duly sworn deposes and says that the information provided herein is true and sufficiently complete so as not to be misleading.

Subscribed and sworn before me this day of

Notary Public:

# **Background Inquiry Consent**

I,	, a duly authorized represe	entative, principal, shareholder, officer, proprietor, me	mber, or partner
of	(hereinafter "Vendor"), in	connection with, as a prerequisite to, and for the dura between Vendor and Family Dollar Stores, Inc., its s	tion of any
		ve background inquires are to be made (including con	
		, proprietor(s), principals, officers, and/or controlling	
Family Dollar. This information ma	y be obtained, in whole or in part, from	Acxiom Information Security Services (AISS), 6111	1 Oak Tree
Blvd., 4 <sup>th</sup> Floor, Independence, OH	14131, telephone 800-853-3228. These	reports may include information as to personal and/o	or business
		. Further, I understand that Family Dollar may reque	
		cerning the past activities relating to the credit, civil and	
	ims involving myself and/or Vendor, if	ts partners, members, proprietors, officers, principals,	and/or
controlling shareholders.	individual person and not a business.	I understand I may have the right to ask in writing for	a complete
		h a summary of rights under federal law.	a complete
I authorize, without reservation, any	party or agency contacted by Family I	Dollar, AISS or others to furnish the above mentioned	l information.
Print Full Name Have you beer	h known by other names in the pas	st five years? Yes No (Circle One) If yes, pleas	se list those
5	5 1		
names here:			
Social Security Number	//Data of Dirth //	Month Day Year	
•			
Current Address			
City/State/Zip			
Name		Business A	ddress
(Street/City/State/Zip)		State Bus	iness License
#	Are you now, o	r have you been a principal, partner, member,	owner,
officer, controlling shareholder			
engaged in any other business i	n the last ten (10) years? Yes No	(Circle one). If yes, please provide the busines	S

name(s), location(s), date(s) of operation, and primary line(s) of business:

I acknowledge that the foregoing is true and accurate to the best of my knowledge. I further acknowledge that providing false or misleading information on this form constitutes a material breach by Vendor of any agreement, oral or written, between Vendor and Family Dollar.

Signature/Title\_\_\_\_\_ Date \_\_\_\_\_



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Company Reports

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# **Construction Credit Score Report: DE Iulis Brothers Castr Co**

For help understanding this report, refer to: Glossary of Terms | Interpreting D&B Ratings & Scores | Protect Yourself from Fraud

> COPYRIGHT 2002 DUN & BRADSTREET INC. - PROVIDED UNDER CONTRACT FOR THE EXCLUSIVE USE OF SUBSCRIBER 040-001386.

> > ATTN: Alice Barrier

CONSTRUCTION SUPPLIER INDUSTRY CREDIT SCORING REPORT

D-U-N-S: DATE PRINTED:

BUSINESS RECORD DATE:

BUSINESS SUMMARY

TEL: '

CONTROL: EMPLOYS: NET WORTH:

SIC:

LOB:

PAYMENTS REPORTED FROM MEMBERS OF THE CONSTRUCTION SUPPLIER INDUSTRY (amounts may be rounded to nearest figure in prescribed ranges)

Antic	-	Anticipated	(Payments	received	prior t	to date	e of invoice)	
Disc	-	Discounted	(Payments	received	within	trade	discount perio	d)
Ppt	-	Prompt	(Payments	received	within	terms	granted)	~/

REPORTED PAYING	HIGH	NOW	PAST	SELLING	LAST SALE
RECORD	CREDIT	OWES	DUE	TERMS	WITHIN

Payment experiences reflect how bills are met in relation to the terms granted. In some instances payment beyond terms can be the result of disputes over merchandize, skipped invoices etc.

Each experience shown represents a separate account reported by a supplier. Updated trade experiences replace those previously reported.

CONSTRUCTION SUPPLIER INDUSTRY CREDIT SCORING SECTION

The CONSTRUCTION SUPPLIER TINDUSTRY CREDIT RISK SCORE predicts the likelihood of a firm paying bills for construction supplies in a severely delinquent manner (90+ Days Past Terms) during the next 12 months, based on the information in Dun & Bradstreet's files. The score was calculated using statistically valid models derived from D&B's extensive information files.

The PERCENTILE ranks the firm relative to all businesses who purchase construction materials on trade credit. For example, a firm in the 80th percentile is a better risk than 79% of all construction supply customers.

The INCIDENCE OF DELINQUENT PAYMENT is the proportion of construction supply customers with scores in this range that were reported severely delinquent by members of the construction supply industry. The incidence of delinquent payment for the entire population of construction supply customers was 12.4% over the past year.

CONSTRUCTION SUPPLIER INDUSTRY CREDIT RISK SCORE: (1 HIGHEST RISK - 100 LOWEST RISK)

PERCENTILE:

INCIDENCE OF DELINQUENT PAYMENT FOR CONSTRUCTION SUPPLIER CUSTOMERS WITH SCORES 71 - 75:

#### CREDIT ANALYSIS SECTION

THE CONSTRUCTION SUPPLIER INDUSTRY CREDIT RISK SCORE IS BASED ON THE FOLLOWING FACTORS IN ADDITION TO OTHER INFORMATION AVAILABLE IN DUN & BRADSTREET'S FILES: - General payment information indicates slow or negative payment(s) present.

SUMMARY OF PAYMENT INFORMATION FROM ALL INDUSTRIES

AVG. HIGH CREDIT: HIGHEST CREDIT:

TOTAL # TRADE EXPERIENCES: PAYDEX SCORE - FIRM: PAYDEX SCORE - INDUSTRY:

Financial information from a Fiscal Statement dated

is available.

UCC filing(s) are reported for this business.

Indications of slowness can be the result of disputes over merchandise, skipped invoices, etc.

#### CUSTOMER SERVICE

If you need any additional information, would like a credit consultation, or have any questions, please call our Customer Service Center at (800) 234-3867 from anywhere within the U.S. From outside the U.S., please call your local D&B office.

To obtain additional information on this company, please order other D&B products and services.

https://www.dnb.com/scripts/ProductRetriever...:805&SESSIONID=11833213379995704&CMPOPUP= 10/29/20

END OF DUN & BRADSTREET CONSTRUCTION SUPPLIER CREDIT SCORING REPORT

				•		
		New Search	Order a	an Investigation		
Company Reports	Company Lookup		Country Risk Services	U.S. Marketing Lists	Global Family Linkage	Global Marketing Lists

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ACORD	CERTIFICATE OF LIABILITY INS	URANCE	OP ID	лв	DATE (MM/DD/YY)
DUCER	ONLY AND C HOLDER. TH	CATE IS ISSUED AS A M ONFERS NO RIGHTS UP IS CERTIFICATE DOES N COVERAGE AFFORDED	ON THE CER OT AMEND,	TIFICA	TE ND OR
		INSURERS AFFORD	ING COVERA	GE	
JRED					
	INSUREP 6				
	NSUPER C				
	INSUPER D				
	INSUPER E				

#### VERAGES

HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING NY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH OLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DO/YY)	POLICY EXPIRATION DATE (MM/DDIYY)	LIMIT	s
GENERAL LIABILITY		1		EACH OCCUPPENCE	\$1,000,000
X COMMERCIAL GENERAL LABILITY		08/12/02	08/12/03	FIPE DAMAGE (Any one fire)	\$ 500,000
CLAIMS VADE X OCCUP				MED EXP (Any one person)	\$ 5,000
				PERSONAL & ADV INJURY	\$ 1,000,000
				GENERAL AGGREGATE	\$ 2,000,000
SEN AGGPEGATE UMIT APPLES PER				PRODUCTS - COMP/OP AGG	\$ 2,000,000
POUCY PPO-					
		08/12/02	08/12/03	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
ALL OWNED AUTOS				BODILY 'NJURY (Per person)	5
HPED AUTOS				BODILY 'NJURY (Per accident)	s
				PROPERTY DAMAGE (Per accident)	5
GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	S
ANY AUTO				OTHEP THAN EA ACC	s
				AUTO ONLY AGE	3
EXCESS LIABILITY				EACH OCCUPPENCE	\$ 5,000,000
X OCCUP CLAHS MADE		08/12/02	08/12/03	AGGREGATE	\$5,000,000
					5
		1			5
X PETENTION \$ 10,000		1			S
WORKERS COMPENSATION AND				X TORY LIMITS	
EMPLOYERS' LIABILITY		08/12/02	08/12/03	E L EACH ACCIDENT	s 100000
				EL DISEASE - EA EMPLOYEE	s 100000
		1		EL DISEASE - POLICY LIMIT	\$ 500000
OTHER					
Equipment Floater		08/12/02	08/12/03		
Install/Builders R		08/12/02	08/12/03		

RIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

TIFICATE HOLDER	N	ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION
FAMILY1 Family Dollar Stores Inc P.O. Box 1017 Charlotte NC 28201-1017		Stores Inc	Y1 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION   DATE THEREOF. THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30   DATE THEREOF. THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30   DATE THEREOF. THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30   DATE THEREOF. THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30   DATE THE CERTIFICATE HOLDER NAMED TO THE LEFT. BUT FAILURE TO DO SO SHALL   IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR   REPRESENTATIVES.
			AUTHORIZED REPRESENTATIVE