



Subcontractor Pre-Qualification

Company Information

Company legal name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: _____ Fax number: _____

Federal ID number: _____ Duns & Bradstreet number: _____

Business type: Corporation Partnership LLC Sole Proprietor Joint Venture

Parent company, if applicable _____

Subsidiaries and divisions: _____

Year founded: _____ Website: _____

Number of employees: Office _____ Field _____

Non-union Union Union affiliations _____

Description of trade/products provided: _____

States where firm does business: _____

Contractor's license number(s):

State/City _____ Classification _____

State/City _____ Classification _____

Does your company subscribe to any vetting services (i.e. ISNetworld, PICS, PEC Premier, etc.)?

No Yes If yes, please list which ones _____

Officers/Owners:

Name	Title	% of Ownership
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Has your firm gone through an ownership change in the past 12 months? No Yes

If yes, please explain _____

Primary points of contact within your organization:

Department	Name	Email	Phone #	Fax #
Estimating	_____	_____	_____	_____
Project Mgt.	_____	_____	_____	_____
Safety	_____	_____	_____	_____
Warranty	_____	_____	_____	_____
Accounting	_____	_____	_____	_____

Financial Information

Historical financial information (past three years):

Year Ending	Revenue	Ending Backlog
_____	_____	_____
_____	_____	_____
_____	_____	_____

Current year projections:

- Revenue (\$) _____
- Current backlog (\$) _____
- Current Number of Projects in Progress _____
- Average Contract Size _____
- Largest Contract in past 36 months _____
- Number of LEED projects completed _____

Provide a recent balance sheet. *(All subcontractor pre-qualification questionnaires and balance sheets are held in strict confidence.)*

Name of primary bank: _____

Bank contact: _____ Phone number: _____

Bank line of credit: _____ Unused portion: _____

Are any assets pledged or collateralized? No Yes If yes, how much? _____

Describe all lawsuits and judgments against your company in the last 2 years: _____

Have any of your principals or officers ever filed bankruptcy either personally or for a business they were associated? No Yes If yes, please explain _____

Surety and Bonding

Surety company: _____

Surety broker/agent: _____

Surety broker/agent phone number: _____

Bonding capacity: Per job _____ Aggregate _____

Bond rate (per thousand): _____

Please provide a letter from your surety confirming your capacity and good standing.

Insurance *(See attached insurance requirements)*

Does your company meet the insurance requirements? Yes No If no, please explain: _____

Please provide a sample of your certificate of insurance with this form.

Safety Information

Provide your worker's compensation Experience Modification Rates (EMR) for the last year years:

Current _____ Last year _____ Two years ago _____

Have you had any OSHA citations in the last 3 years? No Yes If yes, how many? _____

Provide copies of your OSHA 300 and OSHA 300A logs and EMR letters for the prior three years.

Do you employ OSHA certified competent person(s)? No Yes

If yes, please indicate which areas _____

Work Experience

Has an owner or general contractor terminated your contract for cause in the last 5 years? No Yes
If yes, please explain: _____

Has your company failed to complete any construction contracts in the past 5 years? No Yes
If yes, please explain _____

Provide a list of major construction projects your organization has completed during the past two years or currently in progress. Include name of project, owner, architect, general contractor, contract amount, city/state, and completion date.

Provide a list of 5 supplier or financial trade references, including company name, contact name and phone number.

Minority Information

Please check all that apply:

- | | |
|----------------------------------|---|
| MBE (minority business) | WBE (Women’s Business) |
| AABE (African American Business) | DBE (Disadvantage Business) |
| ABE (Asian American Business) | SBE (Small Business) |
| HBE (Hispanic Business) | HUB (Historically Underutilized Business) |
| NABE (Native American Business) | None of the above |

Certification status:

Not applicable
 Public
 Self
 Private

City _____ County _____ State _____

NMSDC (National Minority Supplier Development Council) Affiliates _____

Provide a copy of your Minority Certification as an attachment, if applicable.

Signatures of Subcontractor

Name: _____

Signature: _____

Title: _____

Email: _____

Date: _____

Attachments included:

- Balance Sheet (reviewed or audited, or most recent internal month-end)
- Surety Reference Letter
- Sample Insurance Certificate
- Current OSHA 300 and 300A Logs
- List of Completed and Active Construction Projects
- Minority Certification
- Form W-9