

SUBCONTRACTOR PRE-QUALIFICATION FORM

1. Company Information

Company Legal Name:	Business Type:	Corporation
Address:		LLC
Phone Number:		Partnership
Fax Number:		Sole Proprietorship
Website:	Subsidiaries and/or divisions:	No
Main Company Email Contact:	Year Founded:	Yes, namely:
Number of Employees:	Management	Office
		Hourly/construction staff
Other/former company names (DBA):	Non-Union:	Yes No
Geographical region(s) of operation:	Union:	Yes No
Additional comments:		

Products and/or services provided:	CSI Division Codes:	CSI Division Name:

2. Key Contact Information

Company Principals

Name	Title	Phone	Email	Years Experience	Signature Authority
					Contracts Change Orders
					Contracts Change Orders

Department Contacts

Name	Title	Phone	Email	Years Experience	Signature Authority
	Project Manager				Contracts Change Orders
	Estimator				Contracts Change Orders
	Office/Accounting				Contracts Change Orders

3. General Financial, Bonding and Insurance Information

All submitted financial information will be treated as **confidential and proprietary** between Fenton Construction and your company.

Current/Projected and Historical Performance for past 2 years:

	Revenue (\$)	Ending Backlog (\$)
Current Year Ending		
Prior Year		

Banking Information:

Primary Bank	Bank Contact Person(s)	Phone Number

Has the company, its principals, or officers filed for bankruptcy within the past 10 years? No Yes,

Have there been any Lawsuits and/or judgements against your company within the past 3 years. No Yes,

Is your company able/willing to obtain surety bonding if required? No Yes

Insurance: Describe Insurance Carrier and type of coverage for all that apply. You may attach .pdf file of your certificate in lieu of filling in the information below. .pdf file attached

4. Safety Information

Does your company have a Safety Program available for review upon request? Yes No

Does your company have a Substance Abuse Program available for review upon request? Yes No

Do you review and require similar management systems of your subcontractors? Yes No N/A

Do you conduct planned, routine and documented safety briefings on your construction sites? Yes No

Do you have a Accident Investigation Program? Yes No

Has your company suffered any serious accidents or enforcements in the past three years? Yes No

Experience Modification Rate - Last 3 Years

Year	Rate

5. Work Experience & References

For the current and past 3 years, please list the 5 most significant construction projects:

Project Name	Owner	General Contractor	Contract Value	Percentage Complete	Estimated/Actual Completion Date

Supplier/Trade References

Supplier/Trader Name	Contact person	Email	Phone

Has your firm ever failed to complete any contracted work? Yes No

If yes, please explain:

6. Bidding Information

What is the largest contract/scope you would be willing to bid on, providing your backlog/resources permitted?

What is the smallest contract/scope you would be willing to bid on, providing your backlog/resources permitted?

Do you carry out all work with your own crews?

Yes No

Do you retain subcontractors for any portion of your work?

Yes No

If yes, please describe:

How much lead-time do you require to submit bids from receipt of approved drawings and specifications?

weeks

What is the preferred email address for transmittal of information and bid requests?

7. Form Completion Details

Name:	Title:	Signature (Electronic or hand):	Date:
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