



## SUBCONTRACTOR PRE-QUALIFICATION

Company Name: \_\_\_\_\_ Contractor License #: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
 Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Fax: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### SCOPE OF WORK/MATERIAL PROVIDED

Labor Only?      Yes      No      Material/Labor?      Yes      No  
 CSI Divisions/Trades: \_\_\_\_\_  
 HUB Certified?      Yes      No      Certified as (i.e. WBE, MBA, etc.): \_\_\_\_\_  
 Certified by which agency? \_\_\_\_\_  
 In what geographical area does your firm prefer to operate? \_\_\_\_\_

### COMPANY STRUCTURE

Type of Organization:      Corporation      LLC      Partnership      Sole Proprietor      Joint Venture  
 Date Founded: \_\_\_\_\_ State Established: \_\_\_\_\_ Federal ID #: \_\_\_\_\_  
 Under what other names has/does this company operate(d): \_\_\_\_\_  
 \_\_\_\_\_  
 Is company owned or controlled by any other organization?      Yes      No  
 If yes, what organization? \_\_\_\_\_

### OFFICERS (List all officers of the company with titles)

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Name: \_\_\_\_\_ Title: \_\_\_\_\_

Current Number of Employees:      Office \_\_\_\_\_      Field \_\_\_\_\_      Shop \_\_\_\_\_  
 Any employees leased from a staffing firm(s)?      Yes      No  
 If yes, what firm(s)? \_\_\_\_\_

**EXPERIENCE**

Please list projects your company has been involved in during the last 5 years:

<i>Date</i>	<i>Project Name</i>	<i>Contract Amount</i>	<i>Contractor</i>	<i>Contact Name</i>	<i>Phone Number</i>

Historically, what percentage of your firm's work has been associated with the following building types and what is the average value of those contracts?

<i>%</i>	<i>Building Type</i>	<i>Average Value</i>	<i>%</i>	<i>Building Type</i>	<i>Average Value</i>
	Retail			Schools	
	Government			Churches	
	Correctional Facilities			Renovations	
	Light Industrial			Hotel	
	Hospitals/Medical Clinics			Other (specify)	
	Office Warehouse				

Has your company failed to complete any work awarded? Yes      No

Has your company been removed from a project? Yes      No

Are there any suits, judgments, claims or arbitrations with regard to construction against your company? Yes      No

Has your company filed any law suits or requested arbitration with regard to construction? Yes      No

Has your company been assessed any liquidated damages? Yes      No

If yes to any of the above, please list which project(s) and why (attach additional pages if needed):

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Is your company affiliated with any other contracting firm? Yes No

If yes, please provide the following information:

Firm Name: \_\_\_\_\_

Address (Street, City, State, Zip): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Is your company party to any labor agreements? Yes No

If yes, which agreement(s): \_\_\_\_\_  
\_\_\_\_\_

**REFERENCES**

Have you worked with Emerson Construction Company, Inc. before? Yes No

If yes, which project(s)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List five General Contractors with whom your company does business:

<i>Contractor Name</i>	<i>Address</i>	<i>Contact</i>	<i>Phone/Fax Number</i>	<i>Email</i>

List five Suppliers/Vendors with whom your company does business:

<i>Supplier/Vendor Name</i>	<i>Address</i>	<i>Contact</i>	<i>Phone/Fax Number</i>	<i>Email</i>

**FINANCIAL**

What is your current value of work under contract and in progress? \_\_\_\_\_

What is your backlog as of today? \_\_\_\_\_ As of 12 months ago? \_\_\_\_\_

List current vendors/suppliers currently extending credit to your company:

<i>Vendor/Supplier Name</i>	<i>Address</i>	<i>Phone Number</i>	<i>Contact</i>	<i>Account #</i>

*Please provide a copy of your latest financial statement prepared by an outside accounting firm and a copy of your most recent internal financial statement.*

**BANK INFORMATION (financial information will be kept confidential)**

Bank Name: \_\_\_\_\_

Address (*Street, City, State, Zip*): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Banking Officer: \_\_\_\_\_ Officer Phone Number: \_\_\_\_\_

**BONDING INFORMATION (please attach reference letter from bonding company that includes the information below)**

Name of Surety Company: \_\_\_\_\_

Agent Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address (*Street, City, State, Zip*): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Local Agent Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address (*Street, City, State, Zip*): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Bonding Capacity for Single Project? \_\_\_\_\_ Aggregate? \_\_\_\_\_

**SAFETY**

List your Workers Compensation Experience Modifier?

Current Year: \_\_\_\_\_ Prior Year: \_\_\_\_\_ Two Years Ago: \_\_\_\_\_

Provide your reportable incident rate for each of the last three years:

Year: _____	Rate: _____
Year: _____	Rate: _____
Year: _____	Rate: _____

Has your company had a job site fatality? Yes No

If yes, how many and when? \_\_\_\_\_  
\_\_\_\_\_

Has your company had an OSHA Citation? Yes No

If yes, how many and when? \_\_\_\_\_  
\_\_\_\_\_

Does your company have a written Field Safety Program? Yes No

If yes, is a copy available upon request? Yes No

Does your company conduct Field Safety Meetings? Yes No

If yes, who conducts the meetings? \_\_\_\_\_ Frequency? \_\_\_\_\_

If no, why not? \_\_\_\_\_  
\_\_\_\_\_

Does your company have a Drug Testing Program? Yes No

Pre-employment Testing? Yes No

Post Incident Test? Yes No

Random Drug Test? Yes No If yes, frequency? \_\_\_\_\_

*All information given herein will be considered privileged and confidential and use of the information shall be limited to the purpose of qualifying your company as a subcontractor or supplier of Emerson Construction Company, Inc. All other use is prohibited. Additionally, this information will only be used and/or viewed by Emerson Construction Company, Inc. associates and by no others. The information will not be transmitted to, or discussed with any third parties. Emerson Construction Company, Inc. is committed to protecting the privacy of the provider of the information contained in this document.*

*If any information provided herein is found to be materially erroneous, fraudulent or misleading, Emerson Construction Company, Inc. reserves the right to terminate any and all agreements entered into with the provider without claim or liability against Emerson Construction Company, Inc.*

I have prepared and/or reviewed this completed document in its entirety. Based upon my knowledge, this document is complete and does not contain any material misstatements or omissions and fairly presents the conditions and operations of the company.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_