Company Information

Company Name: _____

Address: _____

City, State, Zip: _____

Bidding Contact: _____

Contact Title: _____

Phone: _____

Email Address: _____

Website Address: _____

Type of Company: _____

Years in Business under Company Name: _____

Under what former names has your company operated?

Name:	Years:
Name:	Years:

Company Officers

Name:	Title:
Name:	Title:

Project Information

Please describe the types of products and services you are able to provide. _____

What are the types and percentages of work you contract to others? _____

Has your company ever defaulted on or failed to complete a project? If so, please explain.

Legal Information

In the last five years, has your current company or any predecessor organization been involved in any litigation or a legal dispute with an Owner, Architect, or General Contractor? If so, please explain. _____

_____

Have any principals of your company, either past or present, been affiliated with any type of bankruptcy? If so, please explain and provide dates. _____

_____

Safety

Does your firm have a company-wide safety program? _____

What is your current Experience Modification Rate for Worker's Compensation Insurance?

_____

Attach a list of any OSHA Citations against your firm in the last five years and the outcome of each citation. Does your firm have a pre-hire drug testing program? _____

Financial Ability, Bonding and Insurance

Please provide your annual average dollar volume for the past three years. $ _____

Please attach a list of current projects including contract amount, expected completion date, and general contractor.

In the last five years, has your current firm or any predecessor organization, or any principal of the firm, filed for bankruptcy? If so, please explain. _____

_____

Please provide the following references:

Banking

Bank Name:
Contact Person:
Phone Number:
Fax:
Address:
City, State, ZIP:

Bonding

Bonding Agent:		
Contact Person:		
Phone Number:		
Fax:		
Address:		
City, State, ZIP:		
Bonding Limits:	Single:	Aggregate:

Please review B.C. Builder's standard subcontract agreement requirements for insurance below:

Workers Compensation.....Statutory Limits

General Liability

- Each Occurrence.....$1,000,000
- General Aggregate.....$2,000,000
- Personal/Adv Injury.....$1,000,000
- Products/Comp Ops Aggregate.....$1,000,000
- Umbrella/Excess Liability.....$1,000,000

Automotive

Combined single limit each accident.....$1,000,000

Please provide three client references:

Company Name:	Phone:
Contact Person:	Fax:
Project Name:	

Company Name:	Phone:
Contact Person:	Fax:
Project Name:	

Company Name:	Phone:
Contact Person:	Fax:
Project Name:	