



TRADE CONTRACTOR PREQUALIFICATION FORM

Date _____

Trade(s) of Work _____

COMPANY INFORMATION

Company Name _____

Address _____

Phone # _____ Fax # _____

Contact Name _____ Email _____

Estimating Contact Name _____ Email _____

Type of Company: Corporation Partnership Sole Proprietorship

Date Formed _____ Federal Tax ID # _____

State Sales Tax Registration # _____ DUNS # _____

Largest Job in the Past 3 Years \$ _____ Desired Project Size \$ _____

of Employees: Office _____ Field _____ Shop _____

Where are you license to do business? _____

LABOR INFORMATION

Does the company have any union agreement? Yes No

If yes, please list _____

When will your existing agreement expire? _____

SAFETY INFORMATION

Experience Modification Rate (EMR) for the past three years:

Current _____ First Prior Year _____ Second Prior Year _____

Does the company have a written safety program and/ or policies? Yes No

Does the company have a written drug policy? Yes No

Does your company employ a full-time safety professional? Yes No

In the past three years has the firm been cited for any serious (as defined by OSHA) Violation?

Yes No

If yes, please explain _____

INSURANCE INFORMATION

General Liability Limits: \$ _____ per occurrence \$ _____ aggregate

List Exclusions _____

Insurance Company _____

Address _____

Agent Name _____ Phone # _____

Last Renewal _____

Program Coverage	Limits	Coverage Type
Workmen's Compensation		
Bodily Injury & Property Damage		
Excess/Umbrella Liability		
Automobile Liability		
Professional Errors & Omissions (if applicable)		

COMPLETED PROJECTS: Representative projects completed in the last five (5) years.

Name of Project _____

Contracting Company _____

Contact Name _____ Phone # _____

Contract Amount \$ _____ Completion Date _____

Name of Project _____

Contracting Company _____

Contact Name _____ Phone # _____

Contract Amount \$ _____ Completion Date _____

CURRENT PROJECTS: Representative projects currently under construction.

Name of Project _____

Contracting Company _____

Contact Name _____ Phone # _____

Contract Amount \$ _____ % Completed _____

Name of Project _____

Contracting Company _____

Contact Name _____ Phone # _____

Contract Amount \$ _____ % Completed _____