

Subcontractor Prequalification Form

Please complete this form and return it with all required documentation to:
compliance@[yourcompany].com

1. Company Information

Legal Company Name:

DBA (if applicable):

Office Address:

Contact Person / Title:

Phone / Email:

Type of Work Performed:

Years in Business:

Geographic Areas Served:

2. Licensing & Certifications

Contractor License Number(s) & State(s):

Expiration Date:

Trade Certifications:

OSHA Training Certifications:

3. Insurance

Attach current certificates for: General Liability, Workers Compensation, Auto Liability, Umbrella.

Insurance Carrier:

Agent Name / Contact:

4. Bonding & Financial

Are you bondable? Yes / No

Bonding Company:

Single Project Limit:

Aggregate Limit:

Last Year's Annual Revenue:

Average Project Size:

5. Safety

EMR (Experience Modification Rate) for past 3 years:

OSHA Recordable Incidents (last 3 years):

Do you have a written safety program? Yes / No (Attach copy).

6. References

Provide 3 recent project references (preferably over \$100K each).

Project Name | Owner/GC | Contact | Phone/Email | Contract Value | Year Completed

7. Key Personnel

List key staff assigned to our projects: Name | Title | Years of Experience | Certifications

8. Certification & Signature

I certify that all information provided is accurate and complete to the best of my knowledge.

Signature: _____ Date: _____

Name: _____ Title: _____