

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: _____