



Subcontractor Pre-Qualification

Company Name:	Street Address:
Mailing Address:	City, State, Zip:
Telephone No.:	Contact Name:
Fax No.:	Title:
E-Mail Address:	

Scope Of Work You Provide:	
Construction Division /CSI Code	
Does your firm qualify as a minority contractor? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> HUB Other:

Structure of Company: <input type="checkbox"/> Corporation <input type="checkbox"/> Individual <input type="checkbox"/> L.L.C. <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture	
Date of Incorporation or Establishment:	State of Incorporation or Establishment:
What other Names has Your Company Operated Under:	

Officers of Firm:	
President:	Number of Office Employees:
Vice President:	Number of Field Employees:
CFO:	Number of Seasonal Employees:

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?

%	Building Type	Average \$ Value	Number of Projects Completed in the Past 5 Years
	Schools		
	Churches		
	Jails		
	Renovations		
	Hospitals		
	Hotel		
	Retail		
	Residential		

Total Value of work Under Contract Currently:
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How Many Major Construction Projects are Currently Under Contract:



List up to five (5) of the Major Construction Projects that are Currently Under Contract:

Project Name	Owners Contact	Architects Contact	Contract Amount	Estimated Completion
1.				
2.				
3.				
4.				
5.				

Are you listed with Dun & Bradstreet: Yes No If Yes, What's Your Rating:

I have attached a current company financial statement. Yes No
 If yes, Audited? Yes No

If preceding answer is no you MUST complete the following to be considered:

	Current Year	Previous Year
Current Assets		
Trade Receivables		
Retainage Receivables		
Cost in Excess of Billings		
Current Assets Total:		
Current Liabilities:		
Trade Payables:		
Billings in Excess of Cost		
Long Tern Liabilities		
Current Liabilities Total:		
Total Revenue		
Net Profit Before Income Tax		

Are there currently any claims or suits filed against your company? Yes No

Has your organization used a 3rd party financial institution to factor any incoming receivable transactions in the past 18 months? Yes No

Has your organization ever failed to complete a project awarded to it? Yes No

If Yes Explain:

Does your company currently have a Bonding Agent/ Surety Company? Yes No

Bonding Information:		
Name of Bonding Agency:		
Bonding Contact Name:		
Phone No.:	Fax No.	Email:



Name of Surety Company:
Bonding Capacity for Single Project:
Amount of Work Currently Bonded:

List four (4) vendors/suppliers currently extending credit to your firm:

Vendor/Supplier	Telephone Number	Contact Person	Account #
1.			
2.			
3.			
4.			

List four (4) General Contractors who you have worked for in the past:

General Contractor	Telephone Number	Contact Person	Project Name
1.			
2.			
3.			
4.			

What is the Largest Single Contract Your Company had been awarded?

Please list your firms Workers Compensation Experience Modification Rate for the past 3 years:

Current Year:	Last Year:	2 years Ago:
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Does your firm have a written safety program: Yes No

Has your firm had any OSHA fines or Jobsite fatalities within the past 3 years: Yes N

Attach a copy of your companies W9 form

Attach a copy of your complains current insurance certificate

Additional Information or Comments:
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All information given herein will be considered privileged and confidential and the use of the information shall be limited for the purpose of qualifying your company as a subcontractor or supplier of Reeder General Contractors Inc. only; any other use is prohibited. This information will used and viewed by Reeder General Contractors Inc. only and will not be transmitted to or discussed with any third parties.

I hereby certify that I have prepared and/or reviewed this completed document in its entirety. Based on my knowledge, this document does not contain any misstatements, omissions, and all information provided is accurate, correct and true and fairly presents the condition and operations of the company:

Signed: _____ Title: _____ Date: _____.