

Bidder / Subcontractor Pre-qualification Form

Company Name:			License No:			
Street Address:						
Contac	et Person:					
City:		State:		Zip:	Zip:	
Mailing Address: City:		State:_		Zip:		
Phone:	Fax:	Web/E	Email:			
Type of Work Performed:		% Work Self-performed				
Years in Business Under Prese	nt Name:	Years Performing Trade:				
Value of Work Presently Under	r Contract:	Avg.	Volume Pas	t 3 Years:	\$	
Is Firm MBE/WBE and/or SB	E?YesNo	Yes, what Cl	assification?			
Surety			Company Ag	: gent Comp	any:	
Agent Pho	one:		Address:			
Agent Contact:	V	alue Present	ly Bonded: \$	S		
Your Bonding Capacity: \$	Single \$_	Aggregate \$				
Bank Name:	Contact &	& Title:				
Address:			_		Phone:	
In What Counties Do You Pe	rform Work?		 -		_	
SAFETY:		Year	20	20	_ 20	
Worker's Compensation Experience	er Modification Rate for last th	ree (3) years:				
Have you had any OSHA fines w	ithin the last three (3) year	s?Y	esNo	If Yes, atta	ch explanation	
Have you had any jobsite fatalitie	es within the last three (3) y	/ears?Ye	sNo If	Yes, attach	explanation.	

ENCLOSE THE FOLLOWING:

- List of 3 Trade References with full contact information, including phone and fax numbers.
- List of 3 General Contractor references with full contact info, including phone and fax numbers.
- Recent Financial Statement
- Sample Certificate of Insurance

I HEREBY CERTIFY THAT THIS INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE:	
PRINT NAME & TITLE:	

Mail or fax your pre-qualification package to: Deb McWilliams, Hennessy Construction Services. All information will remain confidential.

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