

## **Bidder / Subcontractor Pre-qualification Form**

Company Name:	se No:			
Street Address:				
	n:			
City:				
Mailing Address: City:			-	
Phone: Fax:	We	b/Email:		
Type of Work Performed:		% Wo	rk Self-perform	ed
Years in Business Under Present Nam	le:Ye	ars Perforr	ning Trade:	
Value of Work Presently Under Contra	act: A	vg. Volum	e Past 3 Years: S	<u> </u>
Is Firm MBE/WBE and/or SBE?	Yes <u>No</u> If Yes, what	Classifica	tion?	
<u> </u>		Com	pany: Agent Compa	any:
Agent Phone:		Addr		
Agent Contact:	Value Prese	ently Bond	led: \$	
Your Bonding Capacity: \$	Single \$		_Aggregate \$	
Bank Name:	Contact & Title:			
Address:				Phone:
In What Counties Do You Perform	Work?			
SAFETY:	Year	· 20	20	20
Worker's Compensation Experiencer Modifie	cation Rate for last three (3) years	s:		
Have you had any OSHA fines within the	e last three (3) years?	_YesN	o If Yes, attac	ch explanation.
Have you had any jobsite fatalities within	the last three (3) years?	Yes No	D 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: Preconstruction, Hennessy Construction Services *(All information will remain confidential)* 

2300 22<sup>nd</sup> Street North, St. Petersburg, FL 33713 | www.HCSFL.com Phone (727) 821-3223 | Fax (727) 822-5726 | Email <u>chendrickson@hcsfl.com</u>