



## SUBCONTRACTOR'S QUALIFICATION QUESTIONNAIRE

We recognize the time it takes to assemble this information and appreciate your effort to complete the form completely and accurately. If you have submitted a completed questionnaire to us within the past twelve months, please note the date and project name, fill in any information that may have changed and sign and return the form.

For Project: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Fax No. \_\_\_\_\_

Trade(s): \_\_\_\_\_

Date Organized: \_\_\_\_\_ Labor Policy: ( ) Union ( ) Non-Union

1. Describe recent similar project experience (within past 3 years):

(1)

(2)

(3)

Project Name: \_\_\_\_\_

Date Completed: \_\_\_\_\_

Owner/Arch Contact: \_\_\_\_\_

G.C. Contact: \_\_\_\_\_

Subcontract Amount: \_\_\_\_\_

2. Value of Largest subcontract completed: \$ \_\_\_\_\_ Date Completed \_\_\_\_\_

3. Total Value of work under subcontract now: \$ \_\_\_\_\_

4. Previous projects for Danto Builders: \_\_\_\_\_

5. Has work been done under other names? \_\_\_\_\_ If yes, list names on page 2.

6. Can you provide payment and performance bonds for this project? ( ) Yes ( ) No

Max Bonding Capacity: Single Project \$ \_\_\_\_\_ All Projects \$ \_\_\_\_\_

7. Name of Bonding Company: \_\_\_\_\_



Bonding Company Address: \_\_\_\_\_

Bonding Company Contact Person: \_\_\_\_\_ Tel No. \_\_\_\_\_

8. Does your liability and completed operations insurance coverage contain residential or habitational exclusions\*? ( ) Yes ( ) No

**\*Please note that this must be specifically noted on your insurance certificate, when issued.**

9. Do you carry Workers Compensation and Employers' Liability insurance? \_\_\_\_\_

10. Dun & Bradstreet Rating: \_\_\_\_\_

11. Name of Bank for Credit Reference: \_\_\_\_\_

Address of Bank: \_\_\_\_\_

Bank Contact Person: \_\_\_\_\_ Tel No.: \_\_\_\_\_

12. Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers? ( ) Yes – attach details ( ) No

13. Has your organization filed any lawsuits or requested arbitration with regard to construction contracts within the last five years? ( ) Yes – attach details ( ) No

14. Work force information planned for above proposed project:

Project Manager Name: \_\_\_\_\_ Yrs. Experience: \_\_\_\_\_

Superintendent Name: \_\_\_\_\_ Yrs. Experience: \_\_\_\_\_

Max. No. of Mechanics Planned: \_\_\_\_\_ Max. No. of Laborers Planned: \_\_\_\_\_

15. License #/Issuing Agent/Description:

\_\_\_\_\_  
\_\_\_\_\_

16. Is your firm currently certified as an SBE, CBE, DBE, WBE, MBE, etc.?

( ) Yes – attach certificates ( ) No

17. Please provide contact information for your firm's estimating department. Future invitations to bid will be sent to this person.

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_



Email 1: \_\_\_\_\_ Email 2: \_\_\_\_\_

Subcontractor's Comments:

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**Submitted by (Name):** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_