



## Subcontractor PreQualification Questionnaire

<b>Legal Bus. Name/dba</b>	
<b>Street Address</b>	
<b>Mailing Address</b>	
<b>Telephone / Fax</b>	
<b>Contact / Email</b>	

### Craftsmanship

Caulking/Sealing	Drywall	Flooring	Paint/Wall Covering
Ceilings	Electrical	Framing/Rough Carpentry	Plumbing
Concrete/Asphalt/Paving	Fencing	Glass/Glazers	Roofing
Consultants/Engineers	Finish Carpentry	HVAC / Mechanical	Steel/Metal
Demolition	Fire Protection/Alarm	Landscape	Waterproofing
Doors/Hardware	Fire Sprinklers	Masonry	Other

### Corporate Information

1. Provide FEIN and a completed and signed W-9 for your company.
2. Provide a copy of your company's Contractor/Design License(s). Business in other states?
3. State number of years in business.
4. State number of company employees.
5. Does your company hold any special licensing? (SBE/DBE/DVBE/WBE). If Yes, Provide Certification
6. Is your company Union/Non Union/Both?
7. Is your company willing to work on Public Works projects, requiring certified Payroll?
8. If yes, to Public Works projects, do you have a current DIR /PWC Registration Number? Please provide.
9. Briefly describe the services you provide.
10. Name of person authorized to commit your company to contract.

### Financial Information

1. Provide a current company Financial Statement.
2. Provide banking information including address, phone number and contact name.
3. Provide D & B number and report.

## Insurance Requirements

1. Provide a copy of your Certificate of Insurance according to Cannon Building MSA Requirements.
2. State your company's bonding capacity. Provide bonding letter.

## Safety

1. Indicate the name of person(s) responsible for field safety and your IIPP program.
2. Are you a member of ISNetworld? If yes, Provide Member # and list of Facility Approvals
3. Provide a complete copy of your California Illness and Injury Prevention Plan (IIPP).
4. Describe your company's employee Safety Training Program (application, frequency, types of training classes and means used to verify employee understanding of presented training) Attach separate sheet if needed.
5. Please provide an example, from a previous project, of your Toolbox/Tailgate Safety Meeting.
6. Provide verification of employee First Aid training.
7. Provide your Experience Modification Rate for the last three years and independent verification letter.
8. Provide a copy of your company's CAL OSHA 300a form for the last three years.

## Industry Experience

1. Provide a list of industry references with contacts and phone numbers. Attach separate sheet if needed.
2. Provide a list of recently completed projects. (Include a short scope of work and city where project was completed) Attach a separate sheet if needed.
3. State your average job volume in dollars.
4. State the markets in which your company has completed work. (i.e. hospitals, pharmaceutical, manufacturing, food, commercial buildings) Attach a separate sheet if needed.