



## Subcontractor Pre-Qualification Form

### Contact Information:

Company Name: \_\_\_\_\_  
Primary Business Contact: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Web Address: \_\_\_\_\_

### Profile Information:

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

### Geographic Region(s) Serviced:

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

### Structure Type(s) Preferred:

|                                      |                                     |   |                                     |
|--------------------------------------|-------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Commercial  | <input type="checkbox"/> Education  | <input type="checkbox"/> Government     | <input type="checkbox"/> Healthcare |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Industrial | <input type="checkbox"/> Military       | <input type="checkbox"/> Religious  |
| <input type="checkbox"/> Residential | <input type="checkbox"/> Retail     | <input type="checkbox"/> Transportation | <input type="checkbox"/> Utilities  |

Other(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Work Type(s) Preferred:  New  Alterations/Rehabilitations  Interior Fit-Ups

Typical Project Dollar Size: \_\_\_\_\_

Annual Dollar Volume of Work: \_\_\_\_\_

Years in Business: \_\_\_\_\_ Number of Employees: \_\_\_\_\_

Labor Affiliation:  Union  Non-Union  Prevailing Wage

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**Business Certifications:**

*(Attach documentation from any local, state or federal agency that has certified your company.)*

- |   |  |
|---|--|
| <input type="checkbox"/> Minority Business Enterprise (MBE) | <input type="checkbox"/> Disadvantaged Business Enterprise (DBE) |
| <input type="checkbox"/> Women Business Enterprise (WBE)    | <input type="checkbox"/> Local Business Enterprise (LBE)         |
| <input type="checkbox"/> Small Business Enterprises (SBE)   | <input type="checkbox"/> Veterans Business Enterprise (VBE)      |

Business Certificates/Other(s): \_\_\_\_\_

\_\_\_\_\_

Manufacturer Certifications: \_\_\_\_\_

\_\_\_\_\_

Trade Associations and/or Organizations: \_\_\_\_\_

\_\_\_\_\_

**Projects Recently Completed (List 3):**

Project Title: \_\_\_\_\_

Location: \_\_\_\_\_

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

Contract Amount: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Owner/CM/GC: \_\_\_\_\_

Project Title: \_\_\_\_\_

Location: \_\_\_\_\_

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

Contract Amount: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Owner/CM/GC: \_\_\_\_\_

Project Title: \_\_\_\_\_

Location: \_\_\_\_\_

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

Contract Amount: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Owner/CM/GC: \_\_\_\_\_

Form completed by: \_\_\_\_\_ Title: \_\_\_\_\_

(Please Print)

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