

Subcontractor and Supplier Prequalification Form

General Information: Subcontractor Supplier

Company Name: _____ Website: _____

Street Address: _____ E-Mail: _____

City, State, Zip: _____ Phone: _____

Mailing Address: _____ Fax: _____

City, State, Zip: _____ Date Founded: _____

 Corporation Partnership Sole Proprietor LLC LLP Other**Key Personnel:**

Senior Managers: _____ Administrative: _____

Field Personnel: _____ Other: _____

_____ Total Number of Employees: _____

Financial History:

Bank Name: _____ Contact: _____

Address: _____ Phone: _____

Bonding Company: _____ Contact: _____

Address: _____ Phone: _____

Bond Limits: \$ _____ (per project) \$ _____ (aggregate)

Total Dollar Value of Work Completed During the Past Two Years: 200__ \$ _____, 200__ \$ _____

Bidding Interest:

Type of Work: _____ Preferred Project Cost Range: \$ _____

Type of Projects: Single Family Tenant Build-Out Light Commercial Metal Bldg. Other

List Work/Trades Normally Performed/Furnished In-House: _____

List Work/Trades Normally Subcontracted to Others: _____

Other Information:

Written Safety Program (Y / N) Written Drug Policy (Y / N) Pending Suits/Judgments (Y / N)

PLEASE ATTACH COPIES OF YOUR REFERENCES, INSURANCE AND LICENSES - VERY IMPORTANT**References:** Include a minimum of three general contractor references that you have worked with in the past two years.**Insurance:** Include a current certificate of insurance sent directly from your insurance agent's office. Please refer to the Media Center on our website for Subcontractor Insurance Requirements. www.dunbar-construction.com**Licenses:** Include copies of your Occupational License and any Certified or Registered licenses that apply.

Please complete this form and return to (407) 834-1895 or P.O. Box 161924, Altamonte Springs, Florida 32716.