



**PHELPS**  
CONSTRUCTION GROUP

**SUBCONTRACTOR PREQUALIFICATION FORM**

*INFORMATION*

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

Work / Trade Classification: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Fax: \_\_\_\_\_

\_\_\_\_\_

Website: \_\_\_\_\_

Contact #1 Name: \_\_\_\_\_

Email: \_\_\_\_\_

Contact #2 Name: \_\_\_\_\_

Email: \_\_\_\_\_

Contact #3 Name: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Company: Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Individual \_\_\_\_\_

If your Company is a Corporation, list all Stockholders and Officers

If your Company is a Partnership, list all General Partners

Name	Title	Percent Ownership
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Work Provided: Union \_\_\_\_\_ Non-Union \_\_\_\_\_ Both \_\_\_\_\_

Federal ID#: \_\_\_\_\_

Other Company Names your Business Operated/ Operates Under: \_\_\_\_\_

Date Company Began Under Present Name: \_\_\_\_\_

Certifications: Minority \_\_\_\_\_ Woman Owned \_\_\_\_\_ Other \_\_\_\_\_

Certified by: \_\_\_\_\_



*BANK REFERENCE*

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Bonding  
Bonding Company: \_\_\_\_\_ Bond Rating: \_\_\_\_\_  
Bonding Agent: \_\_\_\_\_ Single Limit: \_\_\_\_\_  
Address: \_\_\_\_\_ Aggregate Limit: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Phone#: \_\_\_\_\_

*INSURANCE*

We require your Company to have Comprehensive General Public Liability Insurance. State your limits.

General Liability Each Occurrence: \$ \_\_\_\_\_  
General Liability Aggregate: \$ \_\_\_\_\_  
Excess / Umbrella Liability: \$ \_\_\_\_\_

*SAFETY*

Does your firm have a written Safety Program? Y / N \_\_\_\_\_  
Are your Foremen OSHA trained? Y / N \_\_\_\_\_

*TRADE REFERENCES*

Name	Address	Contact	Phone#
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



*EXPERIENCE*

Please attach a list of all MAJOR PROJECTS that your company has completed in the last five years including

- Name of Project, Location, Contract Amount
- Date Awarded, Date Completed
- Owner / General Contractors Name and Address, Contact, Phone Number

Please attach a list of the CURRENT PROJECTS that your company is doing including all of the information listed above.

*CLAIMS & SUITS*

Has your Company ever failed to complete any work awarded to it? Y / N \_\_\_\_\_

Are there any judgments, claims, arbitration proceedings, or suits pending or outstanding against you r Company or its officers? Y / N \_\_\_\_\_

Has your Company filed any law suits or requested arbitration with regards to construction contracts within the last five years? Y / N \_\_\_\_\_

Within the last five years has any officer or principal of your Company ever been an officer or principal of another Company when it failed to complete a construction project? Y / N \_\_\_\_\_

If the answer is YES to any of the above questions please ATTACH details.

*CERTIFICATION*

The information provided herein is true and sufficiently complete so as not to be misleading.

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

Name: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

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