

SUBCONTRACT BIDDER QUALIFICATIONS STATEMENT



221 Industrial Park Drive
Perry, GA 31069
Ph: 478-987-5544 F: 478-987-5536

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

CONTACT INFORMATION

Name of Organization \_\_\_\_\_
Physical Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Telephone:(\_\_\_\_\_) \_\_\_\_\_ Fax:(\_\_\_\_\_) \_\_\_\_\_
Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_
E-Mail Address of Contact: \_\_\_\_\_

GENERAL INFORMATION

Form of Organization: \_\_\_\_\_
(Corporation, Partnership, LLC, LLP, Sole Proprietor)
Work Specialty: \_\_\_\_\_
Year Founded: \_\_\_\_\_ State: \_\_\_\_\_ FEIN or SSN: \_\_\_\_\_
How many years has your organization been in business as a Subcontractor? \_\_\_\_\_
How many years has your organization been in business under its present name? \_\_\_\_\_
Former name(s) of organization? (if applicable) \_\_\_\_\_
Is your organization authorized to conduct business in Georgia by the Secretary of State? \_\_\_\_\_
Is the organization a certified circle type: DBE/MBE/WBE? If yes, Certificate #: \_\_\_\_\_
Is your primary trade required to be licensed in Georgia? \_\_\_\_\_ If yes, License #: \_\_\_\_\_
Is the organization in compliance with EEO Requirements? \_\_YES \_\_NO
Is the organization in compliance with State and Federal Immigration Requirements? \_\_YES \_\_NO
Total permanent employees: \_\_\_\_\_; which includes \_\_\_\_\_ office staff and \_\_\_\_\_ field personnel.
Does the organization have in-house fabrication capability? \_\_YES \_\_NO
Fabrication Floor Area \_\_\_\_\_ S.F.
Approximate Value of Equipment Owned by Company: \$ \_\_\_\_\_

FINANCIAL INFORMATION

Value of Work currently under contract: \$ \_\_\_\_\_
Total Work in place last year: \$ \_\_\_\_\_
Value of Work currently bonded: \$ \_\_\_\_\_
Bonding Capacity: (Total) \$ \_\_\_\_\_
Bonding Capacity: (per project) \$ \_\_\_\_\_
Bonding Company/Surety Underwriter: \_\_\_\_\_
Bonding Agent & Telephone Number: \_\_\_\_\_ ( ) \_\_\_\_\_

PERFORMANCE INFORMATION

Provide evidence of Experience Modification Rate (EMR) average over the last (3) years \_\_\_\_\_.
(This information may be obtained from your insurance provider).

- Has the organization or any of its owners, officers, or stockholders ever:
Failed to complete a contract or subcontract? \_\_YES \_\_NO
Been involved in a Bankruptcy or Reorganization? \_\_YES \_\_NO
Been assessed Liquidated Damages on any project? \_\_YES \_\_NO
Been involved in litigation with a Contractor, Owner or Architect? \_\_YES \_\_NO
Been the subject of a criminal investigation? \_\_YES \_\_NO

Please attach a detailed explanation for any of the above for which "YES" was the answer.

# SUBCONTRACT BIDDER QUALIFICATIONS STATEMENT



221 Industrial Park Drive  
 Perry, GA 31069  
 Ph: 478-987-5544 F: 478-987-5536

## CURRENT PROJECTS

Provide the following information for all projects which you currently have under contract:

(1)	Project Name/Location	General Contractor	Contract Amount	% Complete
(2)	Project Name/Location	General Contractor	Contract Amount	% Complete
(3)	Project Name/Location	General Contractor	Contract Amount	% Complete
(4)	Project Name/Location	General Contractor	Contract Amount	% Complete

## SIMILAR PROJECTS

Provide information for 3 recent projects most similar in subcontract scope to our project:

(1)	Project Name/Location	Contract Amount	Date Completed
	General Contractor	Contact Name	Contact Title
(2)	Project Name/Location	Contract Amount	Date Completed
	General Contractor	Contact Name	Contact Title
(3)	Project Name/Location	Contract Amount	Date Completed
	General Contractor	Contact Name	Contact Title

## REFERENCES

Provide contact information for the following minimum references:

INSURANCE AGENT	Company	Phone No.
BANK REFERENCE	Company	Phone No.
CREDIT REFERENCE #1	Company	Phone No.
CREDIT REFERENCE #2	Company	Phone No.

**I hereby certify that the information provided above is true and complete to the best of my knowledge.**

\_\_\_\_\_  
 SIGNATURE OF OWNER, OFFICER, OR STOCKHOLDER

\_\_\_\_\_  
 PRINTED NAME & TITLE