



Subcontractor / Vendor Pre-Qualification Form

Date: _____

Legal Company Name: _____

Trade License # (as applicable): _____

Physical Address: _____

Billing Address: _____

Years in business under this name: _____

Phone Number: () _____ Fax Number: () _____

Estimating Contact: _____ Phone No: _____

E-mail Address: _____

Project Mgr Contact: _____ Phone No: _____

E-mail Address: _____

Web Site Address: _____

Company Type: Corporation Partnership LLC Joint Venture Sole Proprietor

Types of Projects: Commercial Industrial Institutional Retail Healthcare Residential (Circle all that apply)

Insurance and Worker's Compensation Carrier

Carrier Name: _____

Address: _____

Agent Name: _____ Phone No: _____

Limits: _____

Can your Company Provide Payment and Performance Bonds? Yes No

If Yes:

Bonding Company Name: _____

Bonding Capacity: _____ Current Bond Rate: _____

Largest Job Bonded to Date: _____

Subcontractor Name: _____

List / Circle the CSI Codes that your Company Specializes in:

.01-6520 Engineering & Testing	.05-8100 Expansion Joint Covers	.09-2310 Synthetic Stucco - EIFS	.12-0200 Window Treatment
.01-7020 Surveying	.05-9000 Architectural Metals and Trim	.09-3100 Hard Tile	.12-9999 Furnishings - Misc
.01-7030 Clean-Up - Final Clean-up	.06-0100 Rough Carpentry - Mat'ls	.09-4100 Terrazzo	.13-0010 Special Const Subcontracts
.01-7030 Clean-up Daily	.06-0100 Rough Carpentry - Labor	.09-5050 Acoustical Treatments	.13-0070 X-Ray Equipment
.02-0010 Termite Pretreatment	.06-0500 Fasteners/Nails/Anchors	.09-5100 Acoustical Ceiling Tile	.13-0120 Pre-Engineered Metal Bldgs
.02-0720 Demolition	.06-1930 Trusses	.09-5600 Wood Flooring	.13-0120 Pre-Engl Metal Bldgs Erection
.02-0760 ACM Abatement	.06-4100 Millwork & Cabinets	.09-6600 Resilient Flooring	.13-1500 Swimming Pools
.02-0800 Clearing & Grubbing	.06-4500 Interior Trim -Materials	.09-6830 Carpet	.13-1600 Aquariums
.02-1010 Sitework Excavating & Grading	.06-4500 Interior Trim - Labor	.09-7000 Athletic Flooring	.14-0100 Elevators
.02-1100 Erosion Control	.06-4500 Exterior Trim - Materials	.09-9300 Paint / Wallcovering	.14-0600 Hoist & Cranes
.02-5110 Utilities Water/Sanitary Sewer	.06-4560 Exterior Trim - Labor	.09-9850 Corner Guards	.14-1000 Conveying Sys Sub
.02-5500 Utilities Sanitary Sewer	.06-4565 Vinyl Siding & Trim	.10-0100 Specialties Subcontracts	.15-0300 Sprinkler System
.02-6100 Asphalt Paving	.07-0100 Roofing & Sheetmetal	.10-0160 Toilet Partitions	.15-0400 Plumbing
.02-6100 Paint Stripe/Signage	.07-1400 Waterproofing	.10-0290 Pest Control	.15-0500 HVAC
.02-6200 Curb and Gutter	.07-2160 Insulation	.10-0350 Flagpoles	.16-0010 Electrical
.02-6500 Conc Sidewalks	.07-2500 Fireproofing	.10-0410 Marker/Tack/Display	.16-3000 High Voltage & Sv Distribution
.02-8310 Fence	.07-3100 Shingles	.10-0430 Signage	.16-7000 Communications
.02-8610 Playground Equipment	.07-6200 Sheetmetal Flashing	.10-0500 Lockers	.16-8000 Sound & Video
.02-9000 Landscape	.07-6240 Sheetmetal Gutters & Downspouts	.10-0520 Fire Extinguishers	.16-8100 Fire Alarm System
.02-9100 Irrigation	.07-9100 Caulking & Sealants	.10-0560 Mail Boxes	.16-9000 Security
.03-0100 Concrete Subcontractors	.08-1000 Alum Windows & Storefronts	.10-0800 Toilet Access.	Other: (List)
.03-2190 Concrete Reinforcement/Rebar	.08-1100 Doors, Frames, and Hdw	.10-1000 Louvers & Vents	_____
.03-3400 Concrete Precast	.08-3300 Coiling Doors	.11-0100 Equipment Subcontracts	_____
.03-9530 Concrete Floor Leveling	.08-3610 Overhead Doors	.11-0160 Dock Equipment	_____
.04-0020 Masonry Subcontractor	.08-6000 Skylights	.11-0400 Commerical Food Equip	_____
.04-4180 Special Masonry	.08-6100 Clad Windows	.11-0430 Appliances	_____
.05-1000 Structural Steel Mat'l	.08-9200 Alum Curtianwall	.11-0490 Gym Equipment	_____
.05-1000 Structural Steel Erection	.09-0020 Mt Studs, Insul, Drywall Subcontractor	.11-0700 Medical Equipment	_____
.05-1000 Unload Structural Steel	.09-1000 Gypsum Wall Board	.12-0100 Furnishing Subcontracts	_____
.05-7000 Ornamental Fencing & Railing	.09-2000 Plaster	.12-0100 Shelving	_____

Does your company offer Turnkey pricing? **Yes** **No**

If no, explain:

List (3) three projects of typical size and complexity that your Firm has completed over the past two years.

- 1) _____
- 2) _____
- 3) _____

Dunn & Bradstreet Number: _____

What is your largest project completed to date?

Name: _____ **Dollar Amt:** _____

What is your largest project currently underway?

Name: _____ **Dollar Amt:** _____

What is the smallest project currently underway?

Name: _____ **Dollar Amt:** _____

Subcontractor Name _____

What was your contract volume for the past three years? _____

Has your company filed for bankruptcy during the past five years? Yes No

Is there any claim, judgment, litigation or arbitration pending against your company? Yes No
(If Yes, explain)

Does your company have a written Quality Control Manual or Quality Control Plan? Yes No

Does your company have a written policy against drugs and alcohol? Yes No

Does your company drug test? Yes No

Does your company have a written safety program? Yes No

What is your company's current experience modification rate (EMR) for worker's compensation? _____

What is your company's OSHA incident rate for the past 3 years?
(Number of Recordable Accidents/Number of Hours worked *200,000) _____

Provide a list of any OSHA citation or fines for the past three years: _____

Indicate if your firm is MBE, WBE, or HUBZone Certified. _____

References: (Company, Contact Name and Phone #)

General Contractor: _____

Bank: _____

Supplier: _____

Other: _____

This form must be filled out completely and mailed, faxed or emailed to:



FAX: (954) 318-4417

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