

# VENDOR/SUBCONTRACTOR PRE-QUALIFICATION FORM



## Contact Information:

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

## Profile Information:

Trade(s) Performed: \_\_\_\_\_  
States/Regions Serviced: \_\_\_\_\_  
Typical Project Size (\$): \_\_\_\_\_ Annual Volume of Work (\$): \_\_\_\_\_  
Number of Employees: \_\_\_\_\_ Labor Affiliation: \_\_\_\_\_

Business Certifications: *(Please attach documentation from any local, state, or federal agency that has certified your company)*

- |   |  |
|---|--|
| <input type="checkbox"/> Small Business Enterprise (SBE)    | <input type="checkbox"/> Disadvantaged Business Enterprise (DBE) |
| <input type="checkbox"/> Local Business Enterprise (LBE)    | <input type="checkbox"/> Woman Business Enterprise (WBE)         |
| <input type="checkbox"/> Minority Business Enterprise (MBE) | <input type="checkbox"/> Veteran Business Enterprise (VBE)       |
| <input type="checkbox"/> Other: _____                       |  |

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

Trade Association or Organizations: \_\_\_\_\_

## Project Information: *(Please include information about two recently completed projects)*

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