



## SUBCONTRACTOR PRE-QUALIFICATION FORM

All subcontractors are required to complete this questionnaire. The contents of this questionnaire will be considered and used solely to determine your firm's qualification to perform work for Colarelli Construction, Inc. Return completed form to: info@colarelliconstruction.com

**PLEASE NOTE: This form must be filled out completely. Missing information may result in disqualification of consideration.**

### COMPANY INFORMATION

|  |  |   |   |
|--|--|---|---|
| Company Name (as if appears on your W9)  |  | Type of Company: Subcontractor (Furnish & Install) <input type="checkbox"/><br>Subcontract (Install Only) <input type="checkbox"/> Supplier (Materials Only) <input type="checkbox"/> |   |
| Types of Projects your firm has experience with (check all that apply):<br>Healthcare <input type="checkbox"/> Hospitality <input type="checkbox"/> Industrial <input type="checkbox"/> Office <input type="checkbox"/> Retail <input type="checkbox"/> Historic <input type="checkbox"/> SCIF <input type="checkbox"/> Multifamily <input type="checkbox"/><br>Prevailing Wage <input type="checkbox"/> Davis Bacon <input type="checkbox"/> HUD Labor Reporting <input type="checkbox"/> |  |   |   |
| Subsidiary or Affiliate of another Company?<br>Yes <input type="checkbox"/> No <input type="checkbox"/>  | Holding Company or Affiliated Company's Name (if applicable) |   |   |
| Street Address   |  | Phone Number  |   |
| City/State/Zip   |  | Principal Contact   |   |
| Principal Contact Email Address  |  | States We Do Work In  |   |
| Year Business was Established  | Former Names Operated Under                                  |   |   |
| Years Under Present Ownership?   | Qualified Minority Business? <input type="checkbox"/>        | MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE <input type="checkbox"/> SBE <input type="checkbox"/>   | Union <input type="checkbox"/> Non-Union <input type="checkbox"/> |
| <b>Owner Names &amp; Ownership %</b>   |  |   |   |
| Name: _____  |  | % Owned _____   |   |
| Name: _____  |  | % Owned _____   |   |
| Name: _____  |  | % Owned _____   |   |
| Name: _____  |  | % Owned _____   |   |
| Primary Estimating Contact   |  | Primary Estimating Contact Email Address  |   |
| Please attach a copy of your firm's W9.  |  |   |   |

### SAFETY

|   |                          |                          |                    |
|---|--------------------------|--------------------------|--------------------|
| Experience Modification Rate (EMR or eMod factor)                             | Last Yr _____            | 1st Prior Yr _____       | 2nd Prior Yr _____ |
| <b>Please check if your Company implements the following safety controls:</b> |                          |                          |                    |
| Has a written safety program  | <input type="checkbox"/> | <input type="checkbox"/> |                    |
| Has an implemented drug screening policy for all employees                    | <input type="checkbox"/> | <input type="checkbox"/> |                    |
| Performs safety orientation & training for all on-site employees              | <input type="checkbox"/> | <input type="checkbox"/> |                    |
| Performs continuing safety education for all on-site employees                | <input type="checkbox"/> | <input type="checkbox"/> |                    |

### LICENSING

|   |                          |                          |            |           |
|---|--------------------------|--------------------------|------------|-----------|
| <b>Please provide answers to the following questions and attach explanations where necessary:</b>   |                          |                          | <b>Yes</b> | <b>No</b> |
| Has a complaint ever been filed with a Licensing Board against your firm?   | <input type="checkbox"/> | <input type="checkbox"/> |            |           |
| Does your firm carry a trade license in any of the following jurisdictions? (Check all that apply) PPRBD <input type="checkbox"/> Denver <input type="checkbox"/> Pueblo <input type="checkbox"/> |                          |                          |            |           |

### FINANCIAL HISTORY

|  |                                  |
|--|----------------------------------|
| <b>Bank Reference</b>  |                                  |
| Bank Name  | Contact Name                     |
| Address (City, State)  | Contact Email                    |
| Does your firm have a line of credit available? Yes <input type="checkbox"/> No <input type="checkbox"/> | Total line of credit amount (\$) |
| Line of credit expiration date? _____  |                                  |

| Please provide the following information for the past three fiscal years: |                    |                        |                             |
|---|--------------------|------------------------|-----------------------------|
|   | Gross Revenue (\$) | Projects Completed (#) | Largest Single Project (\$) |
| Last Year   |                    |                        |                             |
| 1st Prior Year  |                    |                        |                             |
| 2nd Prior Year  |                    |                        |                             |

Please attach your firm's current financial statements. Your financial statement is strictly for Colarelli Construction and will be held in strict confidence. In lieu of providing financial statements, Colarelli Construction will accept a Letter of Bondability from your Surety Company on its letterhead. The letter should include your single job and aggregate parameters.

| Please provide answers to the following questions and attach explanations where necessary:   | Yes                      | No                       |
|--|--------------------------|--------------------------|
| Are there any judgments, claims, arbitrations, proceedings, or lawsuits pending/outstanding against your firm or its officers or principals?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Has your firm ever filed bankruptcy?   | <input type="checkbox"/> | <input type="checkbox"/> |
| Has your firm filed any lawsuits or requested arbitration or mediation with regard to construction contracts with the last three (3) years?  | <input type="checkbox"/> | <input type="checkbox"/> |
| Has your firm or any other origination, with which of the officers or partners were involved during the past five (5) years, ever failed to complete any work awarded? If yes, please provide further details. | <input type="checkbox"/> | <input type="checkbox"/> |

Submit a list of all litigation or formal arbitration to which your organization has been a party involving amounts in excess of \$10,000 for the past five year including any unsettled litigation or arbitration.

### INSURANCE & BONDING

| Please read Exhibit D in its entirety.  |                              |                             |
|---|------------------------------|-----------------------------|
| Does your company currently maintain insurance that meets or exceeds Colarelli Construction's requirements? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Insurance Company   | Agent Name                   | Agent Email Address         |

Please attach a "For Information Only," or a sample certificate of insurance for review. Project-specific copies are not necessary for prequalification.

| Please provide the following bonding information:   |                  |                |           |                          |
|---|------------------|----------------|-----------|--------------------------|
| Can you provide a Performance Bond?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> | Bonding Capacity | Single Project | Aggregate | Bond Cost (% or \$/1000) |
| Name of Bonding Company   | Contact          | Phone Number   |           |                          |

### PORTFOLIO

| Provide summary of your firm's three largest projects: | Location | Start | Completion | Contract Amount |
|--|----------|-------|------------|-----------------|
|  |          |       |            |                 |
|  |          |       |            |                 |
|  |          |       |            |                 |

### REFERENCES (The below references may be contacted by Colarelli Construction for verification purposes.)

| Provide three General Contractor references. |               |
|--|---------------|
| (1) Company Name                             | Contact       |
| Phone Number                                 | Email Address |
| (2) Company Name                             | Contact       |
| Phone Number                                 | Email Address |
| (3) Company Name                             | Contact       |
| Phone Number                                 | Email Address |

| Provide three Supplier references. |               |         |
|------------------------------------|---------------|---------|
| (1) Company Name                   |               | Contact |
| Phone Number                       | Email Address |         |
| (2) Company Name                   |               | Contact |
| Phone Number                       | Email Address |         |
| (3) Company Name                   |               | Contact |
| Phone Number                       | Email Address |         |

*Please ensure an officer or agent authorized to release your firm's credit reference information has reviewed the application for accuracy and is the party signing this form below.*

**I hereby certify that the information submitted herein, including any attachments, is true and sufficiently complete so as not to be misleading, either by ambiguous presentation or omission of information.**

**By my signature below, we authorize any third parties, including listed trade and bank references, to provide Colarelli Construction, Inc. with information regarding our company.**

Completed by: \_\_\_\_\_ (Print or Type) \_\_\_\_\_ (Signature)

Title: \_\_\_\_\_ As agent for  
(Company Name): \_\_\_\_\_

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

**Colarelli Construction will use this documentation to pre-qualify contractors. Therefore, if you wish to be on our bid list, it is essential that you return the documentation as requested. This document should not be construed to constitute a commitment, or a request to perform any work.**