



SUBCONTRACTOR QUALIFICATION QUESTIONNAIRE

All prospective subcontractors/suppliers interested in working on our projects are required to complete this questionnaire. The contents of this questionnaire will be considered confidential and used solely to determine your firm's qualifications and will not be disclosed to others. Please direct any questions and return the completed form to:

The Pike Company, Inc.
One Circle Street
Rochester, New York 14607

ATTN: Ms. Ruth Smothers
e-mail: smotr@pikeco.com
Telephone: 585-241-0489
Fax: 585-241-0589

I. General information

- A. Name of your business: _____
- B. Address: _____
- C. Telephone number: _____
Fax number: _____ Email: _____
- D. Contact name and title: _____
- E. Applicable SIC code(s): _____
- F. Are you listed in Dun & Bradstreet? no yes if yes, what is your DUNS Number? _____
- G. Is your operation union or non-union or both please indicate here: _____
- H. Trade: _____
- I. Referencing Pike Job: _____

II. Organization

- A. Business type: corporation partnership limited liability company sole proprietor
 other (specify) _____
- B. Date founded: _____ State of formation: _____
- C. Please indicate the following information about all officers, managers and principals on a separate sheet:
Full name, title, age and length of time in this position
- D. List all other names your firm has conducted operations _____
- E. Is your firm owned or controlled by a parent or any other organization? no yes
If yes, please describe on a separate sheet.

SUBCONTRACTOR QUALIFICATION QUESTIONNAIRE

F. Small Business Concern: no yes

If yes:

Disadvantaged Owned: _____

Women Owned: _____

Veteran Owned: _____

Service Disabled Veteran Owned: _____

HUB Zone: _____

M/WBE Status: _____

III. Licensing information

A. Please provide all trade and professional licenses, if any, required for you to perform your services.

Type of license/name of licensee

State

License number

B. Has any license ever been denied or revoked? no yes if yes, please describe on a separate sheet.

C. Has a complaint ever been filed with a Contractor's State License Board against your firm? no yes if yes, please explain briefly the circumstances on a separate sheet.

IV. Work experience

A. Please attach a list of the major projects your firm **has completed in the last three years** showing the project name, location, owner, architect/engineer, general contractor, contract amount and the completion date and contact person with telephone number.

B. What is your average job size in dollars? _____

C. What was your largest job ever completed in dollars? In what year? _____

D. What is your backlog in dollars?

As of today? _____

As of last financial statement? _____

As of 12 months ago? _____

E. Has your firm or any other organization with which your officers or owners were involved **during the past three years**, ever failed to complete any work awarded or been terminated for cause? no yes if yes, please provide a complete explanation.

SUBCONTRACTOR QUALIFICATION QUESTIONNAIRE

- F. Are there any judgments, claims, arbitration proceedings, or suits pending/out-standing against your firm or its officers or principals? no yes If yes, please provide a complete explanation.
- G. Has your firm filed any lawsuits or requested arbitration or mediation with regard to construction contracts within the last three years? no yes if yes, please provide a complete explanation.
- H. Has your firm or any other organization with which your officers or owners were involved during the past three years, ever been in bankruptcy or a voluntary or involuntary reorganization? no yes If yes, please provide a complete explanation.
- I. Has your surety ever finished one of your construction projects? no yes if yes, please provide a complete explanation.

V. Financial information

- A. Please attach you firm's most recent financial statement (audited, if available) for the entity that will be signing the subcontract.
- B. Please indicate this year's **estimated** annual sales volume? \$ _____
- C. Please indicate below the annual sales volume for the last three (3) years?
- Year _____ \$ _____
- Year _____ \$ _____
- Year _____ \$ _____
- D. Please provide the following financial information from the above financial statement:
- Working Capital \$ _____
- Net Worth \$ _____
- Your Current ratio = current assets divided by current liabilities _____
- Your Leverage ratio = total liabilities divided by net worth (defined as assets minus liabilities) _____
- E. Please attach a list of major projects your firm **currently has in progress** indicating the project name, location, owner, architect/engineer, general contractor, contract amount, percent complete and scheduled completion date and contact person with telephone number.

VI. References

- A. Banking reference: _____
- B. Bonding reference:
- Bonding agent Name: _____
- Bonding agent Contact and Telephone: _____
- Bonding agent address: _____
- Bonding company: _____
- Surety's AM Best Rating: _____
- Bonding capacity: single limit \$ _____ total program bonding limit \$ _____

(Sample letter for your bonding agent to issue on last page)

SUBCONTRACTOR QUALIFICATION QUESTIONNAIRE

VII. Safety and health

- A. Please list your firm's Workers compensation interstate experience modification rate for the **most recent three years** (If available, please attach a copy of your insurance agent's verification letter).
- Year _____ Experience Modification Rating _____
- Year _____ Experience Modification Rating _____
- Year _____ Experience Modification Rating _____
- B. Do you have a full-time safety representative? no yes
- C. Has your firm had any OSHA fines or jobsite fatalities **within the last three years**? no yes if yes, please describe in detail on a separate sheet.
- D. Please attach copies of your OSHA No. 300 Log(s) for the most recent three years along with your most current log to date of this submission.
- E. Please attach copies of your OSHA Recordable Incident Rate and Lost Workday Incident Rate for the most recent three years including current year to date.

VIII. Additional information

Please attach any additional information you feel will help us determine your firm's qualifications and expertise, including owner or general contractor references, etc.

I hereby certify that the above information is accurate, correct and true.

Completed by: _____

(Name)

(Title)

(Signature)

(Date)

SUBCONTRACTOR QUALIFICATION QUESTIONNAIRE

Template for Letter for Bonding Capabilities; please have your bonding agent do a letter on their letterhead for you to send with questionnaire. Sample below.

Date

Your Company Name
Your Company Street Address
Your Company City and State

To Whom It May Concern:

Please let this letter serve as confirmation that _____
Your Company Name

Has an aggregate surety bond program of \$_____ with a Single project limit
In excess of \$_____ with _____.
Name of Surety

Please note that these limits are not set as maximums, in that if a larger project were to come up that would cause either limit to be exceeded, _____ would be willing to discuss it.
Name of Surety

_____ has continually demonstrated the ability to deliver projects on time and
Your Company Name
within budget. We have the utmost confidence in their management and project delivery; thereby, highly
recommend _____ for any project they wish to pursue.
Your Company Name

If you should have any questions, please feel free to call me.

Best regards,

Bonding Agents signature and title