



TRADE CONTRACTOR PREQUALIFICATION FORM

DATE: \_\_\_\_\_

TYPE OF WORK: \_\_\_\_\_

**GENERAL INFORMATION:**

Name of Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Florida Contractors License Number(s): \_\_\_\_\_

**HISTORY**

Type of Work: \_\_\_\_\_

Years Performing this Work: \_\_\_\_\_ No. Permanent Employees: \_\_\_\_\_

**HAS FIRM EVER:**

- 1. Failed to Complete a Project  Yes  No
- 2. Been Involved in Bankruptcy or Reorganization  Yes  No
- 3. Pending Judgments, Suits  Yes  No

*\* If answer **yes**, please submit details on a separate sheet.*

**Prequalification Form**

Page 2

**FINANCIAL INFORMATION**

Volume of Work Completed in the Last Three (3) Years:

2006: \_\_\_\_\_

2007: \_\_\_\_\_

2008: \_\_\_\_\_

Work Currently Under Contract: \$ \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Contact: \_\_\_\_\_

**BONDING**

Does Firm Have Bonding Capabilities? [  ] Yes [  ] No

*\* If yes, please Answer the Following:*

Bonding Limit per Project: \$ \_\_\_\_\_

Total Aggregate Bonding Limit: \$ \_\_\_\_\_

Value of Work Presently Bonded: \$ \_\_\_\_\_

Bonding Agent:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

**SAFETY**

Does Firm Have a Written Safety Program? [  ] Yes [  ] No

Does Firm Have a Written Hazardous Communication Program? [  ] Yes [  ] No

Has Firm Ever Been Cited by OSHA within the Last 3 Years? [  ] Yes [  ] No

*\* If answered yes, please submit details on a separate sheet.*

3472 Weems Road, Unit 1  
Tallahassee, Florida 32317  
(850) 222-2281 / Fax (850) 222-7749

**Prequalification Form**

Page 3

**M.B.E. CLASSIFICATION**

Is Firm a Minority Business Enterprise (**MBE**), Certified with the State of Florida, Department of Labor and Employment Security? [ ] Yes [ ] No

*\* If yes, please attach copy of certification.*

**REFERENCES**

Material Suppliers:

Name : \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

Name : \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

General Contractor:

Name : \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Contact: \_\_\_\_\_

List Two Largest Projects Currently Under Construction:

Project Name: \_\_\_\_\_  
Location: \_\_\_\_\_  
General Contractor: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Contact: \_\_\_\_\_  
Contract Amount: \$ \_\_\_\_\_

**Prequalification Form**

Page 4

Project Name: \_\_\_\_\_  
Location: \_\_\_\_\_  
General Contractor: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Contact: \_\_\_\_\_  
Contract Amount: \$ \_\_\_\_\_

I, HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE, THE  
INFORMATION PROVIDED ON THIS FORM IS TRUE AND COMPLETE.

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2009

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name & Title