## **Steel Erection Subcontractor Prequalification Questionnaire**

## **Company Information**

Company Name
Address
City
State
ZIP
Contact Name
Dhana
Phone
Email
Years in Business
Type of Work Performed
1 · · · · · · · · · · · · · · · · · · ·
Licensing & Certification
Contractor License Number
States Licensed In
States Licensed In

Relevant Certifications
Insurance
Insurance Carrier
General Liability Limit
Workers' Compensation Limit
Auto Liability Limit
, take = 1.1.1.1, = 1.1.1.1
Bonding Capacity
Safety
Current EMR (Experience Modification Rate)
OSHA Violations in Past 3 Years
List Safety Programs/Trainings
Project Experience
List 3 Recent Projects (Name, Location, Scope, Value, Duration)

Provide 2 General Contractor References (Name, Contact, Phone, Email, Project)						
Additional	Information					
Other Information o	or Comments					

References