

Contractor Pre-Qualification Questionnaire

Company Information

Company Name

Year Established

Business Address

Contact Name

Contact Phone

Contact Email

Website

Company Details

Type of Organization

License(s) Held

Trade(s) Performed

Geographic Areas Served

Financial Information

Annual Sales/Revenue

Number of Employees

Bank Reference

Surety/Bonding Company

Insurance

Insurance Provider

General Liability Limit

Workersâ€™ Compensation

Experience & References

Major Projects Completed (last 3 years)

Client References (name & contact)

Health & Safety

Do you have a written Safety Program?

OSHA Recordable Incidents (last 3 years)

EMR Rate (last 3 years)

Additional Information

Other Relevant Information