

# Subcontractor Pre-Qualification Checklist

## Company Information

Company Name

Contact Person

Phone

Email

Address

## Licenses & Certifications

☐ State Contractor's License ☐ Certificate of Insurance ☐ Bonding Capability ☐ OSHA Certification

## Experience

Years in Business

Type of Work Performed

Similar Projects Completed

## Safety Record

EMR (Experience Modification Rate)

OSHA Recordable Incidents (past 3 years)

Safety Program in Place

☐ Yes ☐ No

## References

Reference 1 (Name & Contact)

Reference 2 (Name & Contact)