

# Subcontractor Technical Qualification Assessment

## 1. Company Information

Company Name

Address

Contact Person

Email

Phone

## 2. Business Profile

Scope of Services

Years in Business

Licenses & Certifications

## 3. Technical Experience

Project Name	Client	Year	Scope of Work	Contract Value

## 4. Resources & Equipment

Key Equipment

Number of Technical Staff

Special Expertise

5. Quality, Health & Safety

Quality Management System

Health & Safety Programs

Certifications (e.g. ISO, OHSAS)

6. Financial Capability

Annual Turnover (Last 3 Years)

Bank Reference / Support

7. References

Client Name	Project	Contact

8. Assessor's Evaluation

Comments

Assessment Result

Assessor Name

Date