

# SUBCONTRACTOR PRE-QUALIFICATION APPLICATION



**SUBCONTRACTOR IDENTITIY**

**Date Submitted:** \_\_\_\_\_

Company Name \_\_\_\_\_  
 Complete Address \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Email Address \_\_\_\_\_  
 Federal Tax ID# \_\_\_\_\_ NAICS Code \_\_\_\_\_  
 DUNS # \_\_\_\_\_ States Registered to do Business \_\_\_\_\_

*Include a copy of a completed W-9 form if company has not worked with Jorgenson Construction in past 12 months.*

**Type of Company:**

Corporation  Partnership  Sole Proprietorship  Joint Venture  LLC  DBA  Individual

**List Company Officers:**

Chairman \_\_\_\_\_ President(s) \_\_\_\_\_  
 Vice President(s) \_\_\_\_\_ Secretary \_\_\_\_\_  
 Treasurer \_\_\_\_\_

Date Company formed \_\_\_\_\_ Number of Employees: Salaried \_\_\_\_\_ Hourly \_\_\_\_\_

**Contract Value Summary:**

Applicable Year	Backlog (at year end for prior years)	Value of Contracts in Progress (at year end for prior years)	Total Revenue
Current Year	\$ _____	\$ _____	\$ _____
Prior Year #1	\$ _____	\$ _____	\$ _____
Prior Year #3	\$ _____	\$ _____	\$ _____
Prior Year #4	\$ _____	\$ _____	\$ _____

Average contract value last three (3) years \$ \_\_\_\_\_

Largest single contract completed in last three (3) years \$ \_\_\_\_\_

Size of projects preferred \$ \_\_\_\_\_ Project location preferred \_\_\_\_\_

Does company have offices, plants or warehouses at other locations?  Yes  No

If yes, list addresses \_\_\_\_\_

List trade(s) of work performed by company \_\_\_\_\_

**UNION AFFILIATION**

Is company directly or indirectly signatory to any union labor agreements?  Yes  No

If yes, list union affiliations \_\_\_\_\_

If yes, does company have a bond in place securing your payment of wages and fund contributions as required by your labor union agreement  Yes  No



**BONDING CAPABILITY**

Is company able to bond projects?  Yes  No      Bonding Rate \_\_\_\_\_ %  
 Single project limit \$ \_\_\_\_\_      Aggregate Limit \$ \_\_\_\_\_  
 Value of current bonded contracts \$ \_\_\_\_\_  
 Bonding Company/Address \_\_\_\_\_  
 Agent Name/Phone# \_\_\_\_\_  
 A.M. Best Financial Strength Rating of Surety \_\_\_\_\_

If company is able to bond, provide letter from company's surety affirming surety's commitment to the single project and aggregate limits inserted above.

**BANKING**

Bank Name \_\_\_\_\_ Number of Years with this Bank \_\_\_\_\_  
 Bank Address \_\_\_\_\_  
 Contact Name \_\_\_\_\_ Contact Phone Number \_\_\_\_\_  
 Does company have a line of credit from any lending institution?  Yes  No  
 If yes, what is amount of line of credit? \$ \_\_\_\_\_  
 Amount of available line of credit as of this date? \$ \_\_\_\_\_  
 Contact information of lending institution if different from bank listed above \_\_\_\_\_

**CERTIFICATION**

Check applicable certification(s): Attach copies of certifications for each qualifying SBA Classification.

- |  |  |
|--|--|
| <input type="checkbox"/> Large Business (no special classification)  | <input type="checkbox"/> Small Business enterprise (SBE)                       |
| <input type="checkbox"/> Minority Business Enterprise (MBE)          | <input type="checkbox"/> Veteran Owned Small Business (VOSB)                   |
| <input type="checkbox"/> HUBZone Small Business                      | <input type="checkbox"/> Service Disable Veteran Owned Small Business (SDVOSB) |
| <input type="checkbox"/> Small Disadvantages Business (SDB)          | <input type="checkbox"/> Women Owned Small Business (WOSB)/(WBE)               |
| <input type="checkbox"/> 8(a) Certified Small Disadvantaged Business | <input type="checkbox"/> Alaskan Native Corporation (ANC)                      |
| <input type="checkbox"/> Native American/Indian Tribe                | <input type="checkbox"/> Other _____   |

**COMPLETED PROJECTS**

List four (4) representative projects completed in the last five (5) years.

Project Name	Contracting Company	Contact Name/Phone	Contract Amount	Completion Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



**CURRENT PROJECTS**

List four (4) representative projects currently under construction.

Project Name	Contracting Company	Contact Name/Phone	Contract Amount	Completion Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**TRADE REFERENCES**

List three (3) of your subcontractors or suppliers.

Company Name	Address	Contact Name/Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

**CLIENT REFERENCES**

List three (3) clients

Company Name	Address	Contact Name/Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

If necessary, include attachments listing completed project, current projects, trade and client references.

**COMPANY’S COMMITMENT TO MITIGATING THE ENVIRONMENTAL IMPACTS OF CONSTRUCTION**

Does the company,

- have an environmental mission statement and/or policy?      \_\_\_ Yes      \_\_\_ No
- have a waste reduction and recycling program?              \_\_\_ Yes      \_\_\_ No
- educate Employees and vendors about this program?        \_\_\_ Yes      \_\_\_ No
- participate in the salvage and/or reuse of wasted materials?   \_\_\_ Yes      \_\_\_ No
- utilize recycled content construction materials?                \_\_\_ Yes      \_\_\_ No



**SAFETY INFORMATION**

**OSHA RECORDS**

Has your firm has any OSHA citations, fines or jobsite fatalities within the most recent three(3) years?

Yes       No      If yes, please attach a detailed description of the incident (include – location, date, type or inspection, standard(s) cited, violation type (other, serious, repeat, willful), current status and steps taken to prevent a recurrence.)

**Workers' Compensation**

Please list your firm's workers' compensation experience modification rate (EMR) for the last three (3) years and attach written documentation from your insurance broker confirming these rates.

Year _____	Year _____	Year _____
Rate _____	Rate _____	Rate _____

Employee hours worked the last three (3) years \_\_\_\_\_

**OTHER INFORMATION**

In the past five (5) years, has company,

- operated under any other name?  Yes       No
- had any liens filed against it by any of its subcontractors, suppliers or taxing authority?  Yes       No
- had any judgments, claims, arbitration proceedings or suits against it or its officers?  Yes       No
- filed any lawsuits or request arbitration with regard to a construction contract?  Yes       No
- ever failed to complete a contract, been defaulted, or had a contract terminated?  Yes       No
- had liquidated damages assessed against it upon completion of a project?  Yes       No
- or any of its key people been a party to a bankruptcy or reorganization proceeding?  Yes       No
- or any of its key people been investigated for or found to have committed a violation of any labor laws?  Yes       No
- or any of its key people been investigated for or found to have committed a violation of state, federal or local laws?  Yes       No
- had active or inactive exclusions associated with it or any key personnel as determined by the Federal Government Systems for Award Management (S.A.M.)  Yes       No

Give details for any yes answer. (Use separate sheet if needed.)



**ADDITIONAL INFORMATION**

Please attach any additional information to help us determine your company's qualifications and expertise.

I hereby certify that the information herein is true and sufficiently complete so as not to be misleading.

**Signature** \_\_\_\_\_  
Printed Name \_\_\_\_\_  
Title \_\_\_\_\_  
Date \_\_\_\_\_  
Contractor's License No. \_\_\_\_\_

**Please Include:** \_\_\_ Audited financial statements  
\_\_\_ Key personal resumes  
\_\_\_ Insurance Certificate  
\_\_\_ Copy of all contractor's licenses  
\_\_\_ W-9 form if new to Jorgenson  
\_\_\_ Surety Letter

**Submit to:** Submit completed prequalification application, financial statements, certificates of insurance, resumes of key personnel, surety letter, W-9 and licenses *by mail to:* **Jorgenson Construction, Inc., Attn: Amanda Bass, 9255 East River Road Northwest, Coon Rapids, MN 55433** // *or fax to:* **763-784-3877** // *or email to:* [amanda@jorgensonconstruction.com](mailto:amanda@jorgensonconstruction.com)

**SUBMISSION OF REQUESTED FINANCIAL INFORMATION IS A REQUISITE TO BECOMING A PREQUALIFIED SUBCONTRACTOR.**