



Subcontractor Pre-Qualification Information

6150 West Chandler Blvd., Suite 39 Chandler, AZ 85226 Phone: 480-785-9911 Fax: 480- 785-9858

General Information

Date Submitted:

| | | |
|--------------------|----------------------|----------------------------|
| Name of Business: | Street Address: | City, State, Zip: |
| Emergency Contact: | Mailing Address: | City, State, Zip: |
| Primary Contact: | Mobile: | Phone: |
| | Pager: | Fax: |
| Email Address: | Company Web Address: | Arizona Contractors Lic. # |

Business Organization Information

| | | |
|--|---|--|
| Annual Gross Sales for last (3) years 2007: 2006: 2005: | Company's largest single contract: | Who was the General Contractor? |
| Number of projects completed last year? | Are you DBE, MBE, WBE, or SBE? | List all Trades that you want to bid: |
| Has your organization ever failed to complete any work awarded to it? | Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers? | Safety EMOD Rating for the past (3) yrs.: _____ |

Bonding/Insurance/Banking Information

| | | |
|---|--------------------|---------------|
| Type of Business Organization: <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Other <input type="checkbox"/> Partnership <input type="checkbox"/> Individual | Years in Business: | Arizona TPT # |
| Names and Titles of Officers: | Home Address: | Home Phone: |
| | | |
| | | |

Construction / Bidding Information

| | | |
|-----------------------------|--------------------|---------------|
| Surety: | Insurance Company: | Banking Info: |
| Contact Person: | Contact Person: | Name: |
| Contact Phone: | Contact Phone: | Address: |
| Aggregate Bonding Capacity: | | |