



SUBCRONTRACTOR PRE-QUALIFICATION FORM

Application Date: _____

GENERAL COMPANY INFORMATION				
Company Legal Name			Trade/Specialty	
Street Address			City	State
Primary Contact Name			Primary Contact E-mail	
Year Established			Primary Contact Phone	
Type of Company (Corp, LLC, etc.)	Number of Employees	Union Affiliations or Open Shop		
Federal Tax ID		Relevant Licenses, Accreditations, Training, Certificates, etc.		
Estimating Contact Name		Estimating Contact Phone & Email		Total number of OSHA Recordable Incidents

Please provide answers to the following questions and attach explanations when necessary	YES	NO
Are there any judgements, claims, arbitrations, proceedings or suite pending/outstanding against your company or it's employees?		
Has your company ever filed for bankruptcy?		
Has your company filed any lawsuits or requested arbitration or mediation with regard to construction contracts within the last 3 years?		
Has your company or any other organization, with which of the officers or partners were involved during the past 3 years, ever failed to complete any work awarded?		
Does your company currently maintain insurance that meets Kenco Development LLC's requirements?		
Does your company have a written Safety Program?		
Does your company have an implemented Drug Screening Policy for all employees?		
Does your company perform Safety Orientation & Training for all employees?		
Is your company DCAMM certified?		

INSURANCE INFORMATION		
Insurance Company		Insurance Company Address
Insurance Agent Name	Insurance Agent Phone	Insurance Agent E-mail
<i>Please provide a Certificate of Insurance</i>		

ADDITIONAL INFORMATION

Some US government jobs require disclosure of the following information. If required by the job being bid for, please select any applicable category below. If not required, or if the collection of such data is prohibited by law in your jurisdiction, please disregard and proceed to next section.

- Authorized Bidder
- Small Business (SBE)
- African American Business (AABE)
- Hispanic Business (HBE)
- Women's Business (WBE)
- Historically Underutilized Business (HUB)
- Service-Disabled Veteran-Owned Small Business (SDVOSB)
- Affirmative Action
- Union Member
- Prevailing Wage
- Asian American Business (ABE)
- Native American Business (NABE)
- Disadvantaged Business (DBE)
- Minority Business Enterprise (MBE)
- 8a Business Enterprise (8a)
- Certified Business Enterprise (CBE)

REFERENCES

General Contractor References

Contact Name	Company Name	Phone Number	E-mail
Contact Name	Company Name	Phone Number	E-mail

I hereby certify that the information submitted, including any attachments is true and sufficiently complete so as not to be misleading.

Completed by: _____ (Print or Type) _____ (Signature)

Title: _____ Date: _____

This document should not be construed to constitute a commitment, or a request to perform any work.