



SUBCONTRACTOR QUALIFICATION FORM

Date: _____

Project Reference: _____

Requested By (TMG Contact): _____

**If you are a NEW Sub please place an "X" in the box.*

COMPANY INFORMATION

Name of Firm: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Fax Number: _____

Principals of Firm:

Name	Title	Email
_____	_____	_____
_____	_____	_____
_____	_____	_____

Years in Business: _____ Website: _____

Federal ID: _____

Type of Organization (circle one that applies): Corporation / Partnership / Proprietorship / Joint Venture

Type of Company (circle one that applies): Subcontractor / Supplier / Consultant / Engineer / Other

Type of Subcontractor (circle one that applies): Union Shop / Merit Shop

COMPANY QUALIFICATIONS

Type of Work: _____

State License Numbers: State: _____ License Number: _____

State: _____ License Number: _____

State: _____ License Number: _____

Primary Work Area (circle one that applies): Only in New Orleans / Outside New Orleans

Preferred Contract Amount: Minimum: \$ _____ Maximum: \$ _____

Are the Majority of Your Projects (circle one that applies): Hard Bid / Negotiated

Company Status (circle one that applies): MBE / WBE / DBE

Number of Employees: _____

Is your Company Bondable? _____ Capacity: _____

Worker's Compensation Modifier: _____

COMPANY FINANCIAL INFORMATION

**This information remains strictly confidential and is received directly by the Administrative Manager via the secure email address provided below.*

In House Financial Contact: _____

Title: _____

Phone: _____

Email: _____

Company's D & B Number: _____

Please send the following information to : confidential@mcdonnel.com

- a) A copy of your most recent internal financial statements
- b) A copy of your most recent audited/ reviewed year end financial statement
- c) A reference letter from your bank to include the following:
 - Date the account was opened
 - Average checking balance for the last 12 months
 - Number and dollar amounts of any NSF or returned items in last 12 months
 - Statement as to character and/ or that the accounts are in good standing

CURRENT WORK LOAD

Number of Jobs in Progress: _____

Project Name	Completion Date
_____	_____
_____	_____
_____	_____
_____	_____

Total Dollar Amount of Work Under Contract: _____

Total Dollar Amount of Incomplete Work: _____

BIDDING INFORMATION

Contact for Bid Solicitation: _____ Email: _____

Phone: _____ Fax: _____

Specification Sections Normally Bid (please list all that apply):

Related Work Which is Typically Excluded From Your Bid:

REFERENCES

**Please provide a minimum of three (3) references.*

General Contractor References:

Firm	Representative	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other References:

Firm	Representative	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

SIGNATURE

The above information is true to the best of my knowledge.

By: _____ Title: _____

Date: _____