

SUBCONTRACTOR QUALIFICATION FORM

Date: _____ Project Reference: _____

Requested By (TMG Contact:) _____

If you are a new subcontractor, check box

COMPANY INFORMATION

Name of Firm: _____

Street Address: _____

Mailing Address: _____

Phone Number: _____

Principals of Firm:

Name	Title	Email
1. _____		
2. _____		
3. _____		

Years in Business: _____ Website: _____

Federal ID#: _____

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

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

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

Primary Markets Served (circle all that apply): Multi-Family / Office / Healthcare / Industrial /
Educational / Hospitality / Religious / Retail / _____

Type/Scopes of Work: _____

State License Numbers: State: _____ License No.: _____

State: _____ License No.: _____

State: _____ License No.: _____

Primary Work Area: New Orleans / Outside New Orleans

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

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

Company Status (circle one that applies): MBE / WBE / DBE / SDV / HUBZONE / 8A

Number of Employees: _____

Is your company bondable? (circle one): Yes / No

If Yes, Single Project Limit: _____ Bonding Company: _____

Worker's Compensation Modifier (EMR): _____

OSHA Recordables: _____

DISA Approved? (circle one): Yes / No

ISNET and/or Avetta ID: _____

CURRENT WORK- LOAD

Number of Jobs in Progress: _____

Project Name / Amt. Left to Complete / Projected Completion Date / Contract Amount

BIDDING INFORMATION

Contact Name for Bid Solicitation: _____

Email: _____ Phone: _____

Specific Sections Normally Bid (List all that apply):

Related Work Which is Typically Excluded from Your Bid:

REFERENCES

You must provide a **minimum of three references**, preferably general contractors.

General Contractor References:

Firm	Representative	Position	Phone	Email

Other References:

Firm	Representative	Position	Phone	Email

LEGAL JUDGMENTS

Have there been any claims of judgment against your company in the past five (5) years? Yes / No
If Yes, please list. (Use separate sheet if necessary.)

Provide a list of all pending legal matters. (Use separate sheet if necessary.)

FINANCIAL INFORMATION

Financial Contact / Title: _____ / _____

Phone: _____ Email: _____

SIGNATURE

The information on all pages of this application is true to the best of my knowledge.

Signed: _____ Title: _____

Date: _____

**THE FOLLOWING INFORMATION IS REQUIRED
ONLY IF THIS APPLICATION IS FOR CONSIDERATION OF AN
IMMEDIATE PROJECT**

Provide a resume' for each person who will fill the following roles on this project:

1. Project Executive
2. Principal in Charge
3. Superintendent
4. Project Manager
5. Labor Personnel
6. Foreman

The resume' should include the person's project experience and tenure with the company.

**THE FOLLOWING INFORMATION IS REQUIRED
ONLY IF THE CONTRACT AMOUNT IS GREATER THAN \$100,000.**

This following information should be sent separately to our Controller via the secure email confidential@mcdonnel.com. This information remains strictly confidential.

1. A copy of your most recent Internal Income Statement, Balance Sheet, and WIP.
2. A copy of your most recent audited / reviewed year-end Financial Statement.
3. A reference letter from your bank, which includes the following:
 - a. Date the account was opened
 - b. Average checking account balance for the last 12 months
 - c. Number and dollar amount of any NSF or returned items in the last 12 month
 - d. Statement that accounts are in good standing

****Attach your W-9 when returning the completed application****