



**SUBCONTRACTOR PRE-QUALIFICATION FORM**

<b>Company Name:</b>
<b>Primary Trade:</b>
<b>Additional Trades:</b>

Please complete the form below (including attachments) and email to Dawn Goudreault at [dgoudreault@mcdonaldbc.com](mailto:dgoudreault@mcdonaldbc.com). **If all information is not provided and all attachments are not submitted- this will significantly delay approval or your prequalification could be rejected.** Please note that this is a preliminary prequalification form and includes only our minimum requirements. Additional information may be requested by the job owner or due to the type of work to be performed.

**Pre-Qual date completed:** \_\_\_\_\_

**Has your company submitted a bid to MBC within the last 60 days?**     Yes     No

<b>General Company Information</b>	
Company's Legal Name	
List all DBA's/Subsidiaries	
Mailing Address	
Phone	
Website	
Primary Contact for bid invites	
Primary Contact Email Address	
Year Company Founded:	
Type of Company	<input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC <input type="checkbox"/> Other _____
Total Number of Current Employees:	
Minority Business Enterprise Status:	<input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE <input type="checkbox"/> SBE <b>Certifying Agency:</b> _____ <input type="checkbox"/> None <i>*Please attach copies of all certifications regarding your MBE status</i>
Are you a Section 3 Business?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have any current employees that may qualify for Section 3 Certification?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Will you submit Certified Payroll if applicable?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Is your company:	<input type="checkbox"/> Union <input type="checkbox"/> Non-Union <input type="checkbox"/> Both
List the trades you normally perform with your own forces:	
List the States in which you work:	
What percentage of the Company's work is normally subcontracted?	



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<b>Contractor's License (s) States and Numbers</b>	
<b>State:</b>	<b>License No:</b>
<b>State:</b>	<b>License No:</b>
<b>State:</b>	<b>License No:</b>
<b>State:</b>	<b>License No:</b>
<b>Company's Principals</b>	
<b>Name:</b>	<b>Title:</b>
<b>Name:</b>	<b>Title:</b>
<b>Name:</b>	<b>Title:</b>
<b>Safety Information</b>	
In the past five years, has your company or any of its key personnel been investigated for or found to have committed any OSHA violations?	<input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No
Have you ever failed to complete a contract or had a contract terminated?	<input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No
Any active litigation with Owners/General Contractors?	<input type="checkbox"/> Yes (attach explanation) <input type="checkbox"/> No
Do you have the ability to bond projects?	<input type="checkbox"/> Yes (Single Amount _____) <input type="checkbox"/> No

**List 3 General Contractor References (attach extra sheet if necessary)**  
**(Include Company Name, Contact Name, and Recent Project Name)**

1.
2.
3.

**List 3 Credit References (Include Company Name & Contact Name)**

1.
2.
3.



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**List major construction projects your organization has in progress (Attach extra sheet if necessary)**

<u>Name of Project</u>	<u>Owner</u>	<u>Architect</u>	<u>Contract Amount</u>	<u>Percent Complete</u>	<u>Scheduled Completion Date</u>

State Total worth of work in progress and under contract: \_\_\_\_\_

**List the major projects your organization has completed in the past five years.**

<u>Name of Project</u>	<u>Owner</u>	<u>Architect</u>	<u>Contract Amount</u>	<u>Date of Completion</u>	<u>% of the cost of work performed with your own forces</u>

State average annual amount of construction work performed during the past five years \_\_\_\_\_

The undersigned, on behalf of the Subcontractor, certifies that the information provided herein, including any attachment, is true and sufficiently complete so as not to be misleading.

Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Title: \_\_\_\_\_