



PURE CONSTRUCTION - CONTRACTOR QUALIFICATION FORM

1. CONTRACTOR INFORMATION

Name:

Address:

City: _____ State: _____ Zip Code: _____

Telephone: () _____ - _____

Fax: () _____ - _____

Contacts: No.1 _____ () _____ - _____

No.2 _____ () _____ - _____

Are you a Certified Disadvantaged Business Enterprise? YES/NO

If Yes, check one of the following:

MBE WBE Disadvantaged Veteran Small Business

2. TRADE AND WORK HISTORY INFORMATION

A. Please identify up to five (5) trade categories that best describe the type of work that you normally contract for and list them below:

1. _____

2. _____

3. _____

4. _____

5. _____



B. List the trades normally performed by your **own** forces:

C. Have you ever defaulted on a contract awarded to you? YES/NO

If yes: (Explain Why & When) _____

Have you ever been barred from bidding public works projects? YES/NO

If yes: (Explain Why & When) _____

3. ORGANIZATION INFORMATION

A. Structure of Company (please answer questions applicable to your company's structure)

CORPORATION

- Date of Incorporation _____
- State of Incorporation _____
- President's Name _____
- Vice President's Name _____
- Secretary's Name _____
- Treasurer's Name _____

INDIVIDUALLY OWNED

- Date of Organization _____
- Name of Owner _____



PARTNERSHIP

- Date of Organization _____
 - Partnership Type (if applicable) _____
 - Name(s) of general partner(s) _____
- _____
- _____

IF OTHER than a Corporation or Partnership, describe organization and name of principals:

B. How many years has your Organization been in business as a Contractor/Supplier?

C. How many years has your Organization been in business under its present business name?

D. Under what other or former names has your Organization operated?

Name _____ Years _____

E. Please check the size of Project you are most competitive in performing:

- Under \$100,000 _____
- \$100,000- \$200,000 _____
- \$200,000-\$500,000 _____
- \$500,000-\$1,000,000 _____
- \$1,000,000-\$3,000,000 _____
- \$3,000,000-\$6,000,000 _____
- \$6,000,000-\$9,000,000 _____



\$10,000,000-\$15,000,000 _____

\$15,000,000 and over (specify) _____

4. FINANCIAL INFORMATION

A. State the average annual amount of construction work performed during the last five years:

B. Bonding Information:

Bond Limit: Per Job: _____ Total: _____

5. SIGNATURE

Dated at _____ this _____ day of _____

Two Thousand _____ ()

Name of Organization: _____

By: _____

Title: _____

CONTRACTOR SAFETY QUESTIONNAIRE

Please provide the following information to qualify as an approved Contractor:

Contractor/Subcontractor Name: _____

Telephone #: _____

Fax #: _____

Type of Construction Work: _____

1. Please provide EMR (Comp. Mod.) for the last three years
2016 _____ 2017 _____ 2018 _____



2. Using your OSHA 200 Log (for employers with 10 or more employees), please provide the following accident information for the last three years.

	2016	2017	2018
* No. of Accidents	_____	_____	_____
* No. of Lost Time Accidents	_____	_____	_____
* No. of Lost time Days	_____	_____	_____
* No. of Medical Only Accidents	_____	_____	_____
* Any fatalities? If yes, how many?	_____	_____	_____
* Total Employee Hours Worked?	_____	_____	_____

3. Do you have a safety program to provide to our office immediately upon execution of written contract? Yes | No

4. Proof of training will be required prior to starting activities on site. All employees are to provide OSHA 10 proof prior to starting. Do you conduct toolbox talks weekly? Yes | No

5. Do you have an in house or 3rd party safety consultant? Yes | No

If so, what is their name? _____

6. Have you been inspected by OSHA within the last three years? YES/NO
IF YES, please give detailed explanation of inspection, violations, and fines Incurred.

7. Do you have a formal written Hazard Communication Program? YES/NO

8. Please provide any additional information concerning your Safety & Health Program which you feel would be beneficial during our pre-qualification process:
