



SUBCONTRACTOR PRE-QUALIFICATION

COMPANY INFORMATION

LEGAL NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____ EMAIL _____

FEDERAIL ID NUMBER _____

BUSINESS TYPE CORP LLC Sole Proprietor Joint Venture

YEAR FOUNDED _____ NUMBER OF EMPLOYEES _____

SERVICE PROVIDED

| | |
|----------------------------------|-----------------------------|
| CONCRETE _____ | MASONRY - BRICK/STONE _____ |
| COUNTERTOPS _____ | MASONRY - EFS/STUCCO _____ |
| DOORS - EXTERIOR _____ | MASONRY - WALLS _____ |
| DOORS - INTERIOR _____ | MILLWORK - CABINETS _____ |
| DRYWALL - CUT & HANG _____ | MILLWORK - TRIM _____ |
| DRYWALL - FINISH & TEXTURE _____ | PAINT - EXTERIOR _____ |
| ELECTRICAL _____ | PAINT - INTERIOR _____ |
| FLOORING - CARPET _____ | PAVING _____ |
| FLOORING - STONE _____ | PLUMBING _____ |
| FLOORING - TILE _____ | POOL _____ |
| FRAMING - METAL _____ | ROOFING - ASPHALT _____ |
| FRAMING - WOOD _____ | ROOFING - TILE _____ |
| HVAC _____ | ROOFING - METAL _____ |
| LANDSCAPE _____ | SITE WORK _____ |

SAFETY INFORMATION

Provide your worker's compensation Experience Modification Rates:

| | | | | |
|--|-----------|-------------|----|-----|
| Current | Last Year | 2 Years Ago | | |
| Have you had any OSHA citations in the last 3 years? | | | No | Yes |
| Do you employ OSHA certified competent person(s)? | | | No | Yes |
| If yes, please indicate which areas _____ | | | | |

WORK EXPERIENCE

| | | |
|---|----|-----|
| Has an owner of general contractor terminated your contract for cause in the last 5 years? If yes, please explain _____ | No | Yes |
| Has your company failed to complete any construction contracts in the past 5 years? If yes, please explain _____ | No | Yes |

MINORITY INFORMATION

Please check all that apply:

| | |
|--|---|
| _____ MBE (minority business) | _____ WBE (Women's Business) |
| _____ AABE (African American Business) | _____ DBE (Disadvantaged Business) |
| _____ ABE (Asian American Business) | _____ SBE (Small Business) |
| _____ HBE (Hispanic Business) | _____ HUB (Historically Underutilized Business) |
| _____ NABE (Native American Business) | _____ None of the above |

Certification status:

| | |
|----------------------|--------------|
| _____ Not applicable | _____ City |
| _____ Public | _____ County |
| _____ Self | _____ State |
| _____ Private | |

NMSDC (National Minority Supplier Development Council) Affiliates Provide a copy of your Minority Certification as an attachment, if applicable.

Signature of Subcontractor

Name _____
Signature _____
Title _____
Email _____
Date _____

Attachments

_____ Sample Insurance Certification
_____ Labor Only Price Sheet
_____ Minority Certification
_____ Form W-9

Submit completed Pre-Qualification to:

GCE Estimating
estimating@WeBuildQuality.com
Green Construction & Engineering, LLC
107 N 11th Street, #455
Tampa, FL 33602