



SUBCONTRACTOR INFORMATION SHEET

PLEASE COMPLETE FORM IN ITS ENTIRETY SO WE CAN ADD YOU TO THE CORRECT DIVISION ON BIDDERS LIST.

1. SUBCONTRACTOR IDENTITY

Area(s) of Expertise: _____

Company Name: _____

Address: _____

Phone Number: _____ E-mail: _____

Contact Person(s): _____

Type of Company: _____ Sole Proprietorship _____ Corporation _____ Partnership

Date Company Formed: _____ Number of Employees: Office _____ Field _____

States in which the company is legally qualified to do business: _____

Names and titles of key people in company: _____

Has the company operated under any other name in the past five years? _____ Yes _____ No

If yes, give name(s): _____

2. MBE/WBE/SBE CERTIFICATION

Is the company a certified Minority Business Enterprise (MBE), Women Business Enterprise (WBE), Small Business Enterprise (SBE), or any other type of certified business enterprise? _____ Yes _____ No

If yes, which type? _____ Certifying Agency: _____

3. SERVICES OFFERED

Type of work provided by your company: _____

Does your company self-perform all work or subcontract work out? _____