

GVY BLACKROCK INC.

Subcontractor Application Form

Thank you for your interest in working with GVY BLACKROCK INC. Please complete the following form in detail.

This information will be used to evaluate your company's qualifications, experience, and resources to ensure compliance with our requirements and industry standards.

Company Information				
Company Name:				
Address:				
City/Province:				
Postal Code:				
Contact Person:				
Phone:				
Email:				
Website:				
Licenses and Insurances				
Do you hold all necessary licenses to operate in your field? Yes / No				
Please provide license details (attach copies):				
Do you have general liability insurance? Yes / No				
Policy Number and Coverage Amount:				
Do you have workers' compensation insurance? Yes / No				

Experience and Capabilitie	es		
Years in Business:			
Number of Employees:			
Do you own the necessary e	equipment to complete	your work? Yes / No	
List major assets/equipment		·	
Can you provide bonding for	r projects? Yes / No		
Bonding Limit:			
References and Past Proje	ects		
Please list at least three refe	erences (attach addition	nal pages if needed):	
1. Name:	Phone:	Project:	
2. Name:	Phone:	Project:	
3. Name:	Phone:	Project:	
Declaration			
I declare that the information	n provided in this applic	ation is accurate and complet	e to the best of my knowledge.
I understand that GVY BLAG	CKROCK INC. reserves	the right to verify all informat	ion and reject any application that
does not meet the necessar	y qualifications.		
Authorized Signature:			
Date:		. <u></u>	