

## **Contractor Application**

Name and Contact Details	
Contact Person:	Date: Lead Source:
Address:	Home Phone:
Company Name:	Cell Phone:
Specialized Field (GC, Plumber, Electric, Roofer, etc):	Work Phone:
Email:	Contractor License #:
Insurance and Experience	
Are you licensed and insured: Yes No What type of i	insurance:
	License updated:
	How long running own crew:
Current Projects and Bidding	
	In the past year:
What were the scopes of work:	
Can I see the work on one or two recent jobs:	
How do you usually bid out your work:	
	ds:
Do you give written warrantees for your work:	How long of a warrantee:
Sub-Contractors and More Prescreening	
Do you use subcontractors: Are they licensed	and insured:
Who is your electrician: Who is your plumber:	
Do you belong to the Better Business Bureau or local Chamb	er of Commerce:
Do you have any certificates/licenses regarding the skills you	ı have:
Have you ever declared bankruptcy:	
How often do you communicate with your clients during a jo	b:
Do you clean the job site daily:	
References	
Can you provide a list of references; with the names and nur	nbers you have done work for in the past:
1	
2	
3.	