



6353 Supply Way
Boise, Idaho 83716
208.338.5973
fax 208.343.4925

SUBCONTRACTOR PRE-QUALIFICATION FORM

By submitting this prequalification questionnaire, the contractor is providing authorization to CSDI Construction, Inc. to contract, investigate and use necessary means to confirm its contents. This may include, but is not necessarily limited to requesting and obtaining information from various Federal, State, and other private agencies.

CONTACT INFORMATION:

Company Name: _____ E-Mail: _____
Primary Business Contact: _____ Title: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ Cell: _____
Owner/Company Officer: _____ E-Mail: _____

PROFILE INFORMATION:

Trades Performed _____

Contractor's License Number _____ State: _____ Expiration: _____
(Attach List if Needed)

Corporation State of Incorporation: _____ Partnership Sole Proprietorship Joint Venture

Type of work Preferred: New Construction Remodel / Expansions

Year Company Started: _____ Years in Business: _____

Typical Project Size (in \$): _____ Labor Affiliation: Union Non-Union

Dollar Range of Contracts within the last year: From: \$ _____ To \$: _____

Annual Revenue each year for the past 3 years: _____

of Field Supervisors: _____ # of Office Employees _____ # of Tradespeople: _____

List (3) Trade References: Company, Address/City/State, Contact Person, Phone Number, and Fax Number

Trade Reference: _____

Trade Reference: _____

Trade Reference: _____

Has your organization ever failed to complete any work awarded to it? If Yes, Explain Yes No

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Are there any judgements, claims, arbitration proceedings or suits threatened, pending, or outstanding against your organization or officers? If Yes, explain: Yes No

Has your organization been a party to any lawsuits or arbitration proceedings related to construction projects within the last five years? If Yes, explain: Yes No

Has your organization or any officer or principal -past or present - ever filed for bankruptcy? If Yes, explain: Yes No

List (2) Projects Recently Completed:

Project Title: _____ Location: _____ Contract Amount: _____

Trades Performed: _____ Owner/GC/CM: _____ Date Completed: _____

Project Title: _____ Location: _____ Contract Amount: _____

Trades Performed: _____ Owner/GC/CM: _____ Date Completed: _____

How many projects does your organization currently have in progress? _____

Total Contract Value in Progress \$: _____

SAFETY INFORMATION:

Are you compliant with all OSHA and other regulatory safety laws? Yes No EMR: _____

(Experience Modification Rate)

Do you have a written company safety policy and program and will you provide copies if requested: Yes No

Has your company been cited for a "Serious and/or Willfull" OSHA violation in the past 3 years? If Yes, explain: Yes No

Insurance Agent (Name, Address, Phone & Fax): _____

Bonding Rate: _____ Name of Surety: _____ Key Contact/Phone: _____

The signatory of this questionnaire guarantees to the truth and accuracy of all statements and answers provided, and will provide updated information as significant changes occur, or as requested by CSDI Construction, Inc. The signatory understands that failure to fill out this prequalification questionnaire completely and provide all required attachments will prevent review and processing, and may disqualify contractor from consideration.

Print Name of Preparer: _____ Date: _____

Title of Preparer: _____

Signature of Preparer: _____

Fax completed form to (208) 343-4925 or e-mail to jtreinen@csdiconstruction.com

CSDI Construction, Inc. 6353 Supply Way, Boise, Idaho 83716 (208) 338-5973 (208) 343-4925 (Fax)