

CONTRACTORS QUESTIONNAIRE

Complete all questions, answer N/A to all questions that do not apply

GENERAL INFORMATION

1. Company Name: _____
2. Physical Address: _____
Mailing Address _____
3. Business Phone Number: _____ Fax Number _____
Cell Phone Number _____ E-Mail Address _____
4. Business Form (Check One):
 Corporation (State _____) Joint Venture LLC
 General Partnership Ltd. Partnership
 Proprietorship Other _____
5. Year Started: _____ Fiscal Year-End: _____
6. Date Incorporated: _____ Subchapter "S": _____
7. List all owners, stockholders, or partners of the business:

Legal Name & Position	Date of Birth	%Ownership	Spouse

DESCRIPTION OF YOUR BUSINESS

8. Type of Business:
 Public Buildings Excavation Plumbing
 Commercial Buildings Water Systems HVAC
 Highways Sewers Other
 Bridges Electrical
 If other, explain _____
9. Percentage of work done as: Prime Contractor _____% Subcontractor _____
 Average job amount: Sublet _____% Materials _____% Labor _____

11. Explain your subcontractor bonding policy: _____
12. The Company is: Union Non Union Both
13. Major trades used by Company: _____
14. Maximum number of jobs carried at any one time: _____

EQUIPMENT

15. Do you own adequate equipment to handle these jobs: _____
If no, explain _____
16. Are there any equipment purchases expected within 12 months: _____
If yes, describe and estimate total expenditures: _____
17. Do you maintain your own equipment: _____

PROJECT HISTORY

18. Largest project anticipated in next 12 months: _____
19. Maximum uncompleted work on hand expected in next 12 months:
Maximum number of jobs in progress at any one time: _____
Total estimated cost to complete of these jobs: _____
20. Complete the attached outlining your four largest jobs.

LARGEST JOBS

- A. Contract Amount \$ _____ Gross Profit \$ _____
Year: _____ Project Name: _____
Owner or General Contractor: _____
Project Managers Name: _____
Address: _____
Phone: _____

LARGEST JOB (CONTINUED)

- B. Contract Amount \$ _____ Gross Profit \$ _____
Year: _____ Project Name: _____
Owner or General Contractor: _____
Project Managers Name: _____
Address: _____
Phone: _____
- C. Contract Amount \$ _____ Gross Profit \$ _____
Year: _____ Project Name: _____
Owner or General Contractor: _____
Project Managers Name: _____
Address: _____
Phone: _____
- D. Contract Amount \$ _____ Gross Profit \$ _____
Year: _____ Project Name: _____
Owner or General Contractor: _____
Project Managers Name: _____
Address: _____
Phone: _____

BANKING, PRIOR SURETIES

21. List prior sureties: _____
22. Bank: _____ Branch: _____
Loan Officer: _____ Phone number: _____
Average balance (all accounts) \$ _____
Line of Credit \$ _____ Renewal date: _____
Security (check all that apply)
 All Assets Accounts Receivable Equipment
 Real Estate Owners Personal Assets

ATTACH A LETTER FROM YOUR BANKER CONFIRMING THE ABOVE OR A RECENT BANK STATEMENT

ACCOUNTING/LEGAL

23. Accounting firm and address: _____

24. What method is used to prepare:

- | FINANCIAL STATEMENTS | TAX RETURNS |
|---|---|
| <input type="checkbox"/> % Completion | <input type="checkbox"/> % Completion |
| <input type="checkbox"/> Completed Contract | <input type="checkbox"/> Completed Contract |
| <input type="checkbox"/> Other | <input type="checkbox"/> Other |

If other, describe: _____

25. How often are internal financial statements prepared: _____

26. Date of last IRS audit: _____ Result: _____

27. How often are job costs updated: _____

28. Attorney firm and address: _____

Attorney's Name _____

Firm Phone no. _____

29. Are any receivables or payables over 60 days past due: _____

If yes, explain: _____

30. Are you currently involved in any lawsuits or other litigation: _____

If yes, explain _____

OWNERSHIP

31. Explain any changes in ownership or financial condition since last year-end, or expected in the next 12 months: _____

32. Do any owners have ownership or managerial interest in another business:

Yes No If Yes, please explain _____

IF THE ENTITY IS INVOLVED IN CONSTRUCTION OR RELATED AREAS, ATTACH A COMPLETED QUESTIONNAIRE ON THE ENTITY. ATTACH LAST FISCAL YEAR END STATEMENT ON THAT ENTITY

33. LIFE INSURANCE

Insured	Beneficiary	Company	Face Amount	Type

34. Does a Buy-Sell Agreement exist: Yes No

35. If yes, attach a copy. If no, what happens to Company upon the death of owners: _____

36. Has the company ever declared bankruptcy or failed to complete a contract :
 Yes No If yes, explain _____

SUPPLIERS/SUBCONTRACTORS

37. List suppliers most commonly used:

NAME	ADDRESS	PHONE

38. List major subcontractors commonly used:

NAME	ADDRESS	PHONE

REMEMBER TO ATTACH THE FOLLOWING:

	Yes	N/A
Key employee resumes	<input type="checkbox"/>	<input type="checkbox"/>
Last three year-end financial statements	<input type="checkbox"/>	<input type="checkbox"/>
Buy-Sell Agreement	<input type="checkbox"/>	<input type="checkbox"/>
Bank verification letter	<input type="checkbox"/>	<input type="checkbox"/>
Related entity questionnaire(s)	<input type="checkbox"/>	<input type="checkbox"/>
Related entity financial statement(s)	<input type="checkbox"/>	<input type="checkbox"/>
Copies of Life Insurance Policies	<input type="checkbox"/>	<input type="checkbox"/>