

**Subcontractor
Prequalification Form**



Name: _____
Address: _____

Phone: _____
Fax: _____
E-Mail: _____
Website: _____
Year Business Started: _____

Contractor's License(s) States and Numbers
State: _____ No.: _____
State: _____ No.: _____
State: _____ No.: _____
State: _____ No.: _____
State: _____ No.: _____
Federal ID No.: _____
Estimating Contact: _____
Contact Title: _____
Referred By: _____

Union: Yes No **Subcontractor:** **Vendor/Supplier:**

1. Trade Categories – List the categories of work you are qualified to perform.

2. Geographic Areas of Work – Please check only Locations in which you want to bid:

MA CT RI NY VA DC MD PA
OTHER _____

3. Project Types – Please check the type and size projects your company has completed.

Commercial Residential Industrial Resorts
 Sports/Entertainment Retail Healthcare Government
 Correctional Facilities Office Building Parks Roads/Highway
 Other _____

Preferred Project Size: Up to \$100k Up to \$250k Up to \$500k
 Up to \$1 Million Over \$1 Million

4. Has your company had experience with LEED projects? Yes No

5. Has your company had experience with Design/Build projects? Yes No

6. Is your company a certified:

MBE WBE DBE VBE SBE 8(A) HUBZone Other

7. Bonding Capacity: \$ _____

**Subcontractor
Prequalification Form**



8. Performance Reference – Provide a list of recently completed jobs with contact information for each. Any additional information about previous experience is appreciated.

Project	General Contractor	Contact Name	Telephone Number	Contract Value
<i>Description of Project:</i>				
<i>Description of Project:</i>				
<i>Description of Project:</i>				
<i>Description of Project:</i>				
<i>Description of Project:</i>				

Thank you for your interest in Classic Site Solutions. Please return this form to the office below:

Classic Site Solutions	Phone: (413)596-0051
Attn: Ryan Moyer	Fax: (413)596-0072
95 Post Office Park	E-Mail:
Suite 9522	RyanM@ClassicSiteSolutions.com
Wilbraham, MA 01095	