



SUBCONTRACTOR INFORMATION					
Company*				Date*	
Contact*					
Phone*		Extension		Cell	
Email Address*					
Address*					
City*		State*		ZIP*	
Labor Status (Check all that apply)*	Union <input type="checkbox"/>	Open-Shop <input type="checkbox"/>	Prevailing Wage <input type="checkbox"/>		
Minority/Small Business? (Check any that apply)	SBE <input type="checkbox"/>	MBE <input type="checkbox"/>	WBE <input type="checkbox"/>	DBE <input type="checkbox"/>	
TRADES AND REGIONS OF WORK					
Trades (list all)*					
States of Operation					
INSURANCE					
General Liability Insurance Limit*					
Workers Comp Insurance Limit*					
REFERENCES					
<i>List 5 jobs completed in the last year.</i>					
<i>List 3 Trade/General Contractor References</i>					
<i>List 3 architect/engineer References</i>					