Contractor Application



Name and Contact Details	
Contact Person:	Date: Lead Source:
Address:	
Company Name:	
Specialized Field (GC, Plumber, Electric, Roofer, etc):	
	F11.
Contractor License Number:	
Insurance and Experience	
Are you licensed and insured:	
How much coverage: License up	odated:
How long have you been doing business in the area:	How long running own crew:
How many guys on crew full time:	
Current Projects and Bidding	
How many projects do you have going on right now: In the past year:	
How many jobs do you typically handle at once:	
What were the scopes of work:	
What are the addresses:	
Can I see the work on one or two recent jobs:	
How do you usually bid out your work:	
Materials and Labor charged together or separate in your bids:	
Do you give written warrantees for your work:	
Sub-Contractors and More Prescreening	
Do you use subcontractors: Are they licensed and insured:	
Who is your electrician: Who is you	
Do you belong to the Better Business Bureau or local Chamber of Commerce:	
Do you have any certificates/licenses regarding the skills you have:	
Have you ever declared bankruptcy:	
How often do you communicate with your clients during a job:	
Do you clean the job site daily:	
Do you have a problem with signing a lien waiver:	
References Can you provide a list of references: with the names and numbers you ha	

- 1.
- 2.
- 3.