Contractor Application



Name and Contact Details		
Contact Person:	Date:	Lead Source:
Address:		Phone:
Company Name:		
Specialized Field (GC, Plumber, Electric, Roofer, etc):	Work Phone:	
Email:		
Insurance and Experience		
Are you licensed and insured: Yes No What type o	of insurance:	
How much coverage:	License updated:	
How long have you been doing business in the area:	How lo	ng 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:	How long	g of a warrantee:
Sub-Contractors and More Prescreening		
Do you use subcontractors: Are they licensed and insured:		
Who is your electrician: Who is your plumber:		
Do you belong to the Better Business Bureau or local Cham	nber of Commerce:	
Do you have any certificates/licenses regarding the skills you	ou 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 n	umbers you have done w	ork for in the past:
1		
2		
3		