

## SUBCONTRACTOR Pre-Qualification/Re-Qualification

In today's world, the success of a project heavily relies on the relationship between the subcontractor and the prime contractor. Sunseri Construction is committed to the highest extent in the relationship between our subcontractors and us. We feel it is beneficial for all involved to work with a subcontractor who is dedicated to quality workmanship, high standards of safety and timely completion of projects. To ensure these commitments, we prequalify all subcontractors prior to awarding any contract.

COMPANY INFORMATION	
Company Name (DBA):	Date:
Street Address, City, St & Zip:	Contractor's License # for this entity:
Contact Person:	Telephone:
Email Address:	Website:
Federal ID#	Dunn & Bradstreet Number:
Date Company Founded:	State of Formation:

Corp – S       Corp – C       LLC       Sole Proprietorship       Partnership

KEY PERSONNEL			
Title	Name	Phone	Email
President/Owner			
Vice President			
Chief Financial Officer/Controller			
Chief Estimator			
Prequalification Contact			
Other: _____			

## GENERAL QUESTIONS

- 1) How many years has your company been in business under its present business name?
- 2) Under what other former names has your organization operated? \_\_\_\_\_
- 3) Are you affiliated with any labor organizations?    Yes                      No
- 4) How many people does your firm presently employ?
- Corporate/Office     Field Supervisory:     Trades People:     Other:
- 5) How many personnel were employed at your peak of operations over the last three years?
- Corporate/Office     Field Supervisory:     Trades People:     Other:

## LITIGATION

- 1) Has your company ever petitioned for bankruptcy, failed in a business endeavor, defaulted, been terminated, assessed liquidated or other damages on a contract awarded to you?    Yes     No
- 2) Has your firm ever failed to complete an awarded contract?    Yes     No
- 3) Has your firm ever been disbarred from public works?    Yes     No
- 4) Has any entity ever made a claim against your company for defective, improper, or non-conforming work or for failing to comply with warranty obligations?    Yes     No
- 5) Has your company ever been involved with any litigation, mediation, and/or arbitration with an owner, design professional and/or general contractor?    Yes     No
- 6) Has your surety ever finished one or more of your construction projects?    Yes     No

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7) Has a complaint ever been filed with a Contractor's State License Board against your firm?

Yes  No

8) Has your firm had any citations or fines from the EPA, any other state or federal environmental or air quality regulatory authorities?

Yes  No

\*\*\*\*\*If for any reason you have answered "Yes" to any one of the questions in this section, "Litigation", please explain in detail below.

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**FINANCIAL**

PLEASE ATTACH THE FOLLOWING INFORMATION:

*Copies of your most recent and interim financial statement(s), include parent company's if applicable.*

Submit financial statements to: Sunseri Construction, Inc.  
Attn: Kim Resso  
48 Comanche Ct.  
Chico, CA 95928  
Direct Fax Line: (888) 689-1254  
Email: [kr@sunsericonstruction.com](mailto:kr@sunsericonstruction.com)

Sunseri Construction understands how sensitive your financial information is to you. We do not distribute, in any way, your company's information outside of our Financial Review Team. Upon conclusion of our review your financial information will be shredded.

Please list the following:

	Name	Contact Person	Telephone
Banking			
Bonding			
Insurance Carrier			

Please answer questions for the applying company (e.g. not parent company.)

What was the company's revenue for the past three years?

What was the company's net income for the past three years?

Number of contracts in the past three years?

Average contract size in the past three years?

	2010	2011	2012
What was the company's revenue for the past three years?			
What was the company's net income for the past three years?			
Number of contracts in the past three years?			
Average contract size in the past three years?			

List the project name and value of the three largest contracts over the last three years?

Year	Project Name	Value

## EXPERIENCE

Backlog: Defined as unearned revenue on work in progress plus committed work not yet started.

0-12 Months	12-24 Months	Total Backlog

Please list references:

Contractor or Owner	Contact Person	Project Name	Telephone	Email

## DIVERSITY

Check applicable certification(s):

- |   |   |
|---|---|
| <input type="checkbox"/> Large business (no special classification)             | <input type="checkbox"/> Small Disadvantaged Business (SDE)         |
| <input type="checkbox"/> Minority Business Enterprise (MBE)                     | <input type="checkbox"/> Veteran Owned Small Business (VOSB)        |
| <input type="checkbox"/> Historically Under-Utilized Business Zone (HUBZone)    | <input type="checkbox"/> Small Business Service Disabled Veteran    |
| <input type="checkbox"/> Certifies 8(a) Small Business administration (SBA)     | <input type="checkbox"/> Micro Business (MB)                        |
| <input type="checkbox"/> Women Owned small Business (WOSB)/ (WBE)               | <input type="checkbox"/> Other:                                     |
| <input type="checkbox"/> Service Disabled Veteran Owned Small Business (SDVOSB) | <input type="checkbox"/> Disabled Veteran Business enterprise(DVBE) |

Attach a copy of the certificate.

## SAFETY

List your Worker's Compensation Experience Modification Rate (EMR) over the last four years.

Current Year	Prior Year	Two Years Prior	Three Years Prior	Four Years Prior

PLEASE ATTACH THE FOLLOWING INFORMATION:

Company's OSHA 300A log for each of the last three (3) years.

Has your firm had any OSHA citations, fines, or jobsite fatalities within the most recent five (5) years?

Yes  No

If yes, please describe in detail amount of penalties initially assessed and/or paid:

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Individual in charge of safety program for your company:

Name	Title	FT or PT	Emergency Contact #	Email

### INSURANCE/BONDING

Please attach your latest sample insurance certificate showing limits for the following:

Workers compensation

Commercial General Liability

Commercial Auto Liability

Excess Liability

It is assumed that your general liability and worker's compensation policies include a Waiver of Subrogation. If there is an additional cost to include waivers, please include the amount of the cost:

\$ \_\_\_\_\_ .

Surety:

Maximum single project bonding capacity \$

Aggregate bonding capacity \$

Date of last bond  Amount \$  Bond Rate  %

Please attach a reference letter stating aggregate and single project bonding capacity from your surety company.

**LOCATION PREFERENCE**

Please select the geographical region (s) where you are willing to work.



- |   |   |                                     |
|---|---|-------------------------------------|
| <input type="checkbox"/> 1. Northwest Coast | <input type="checkbox"/> 7. Los Angeles/Ventura     | <input type="checkbox"/> 13. Nevada |
| <input type="checkbox"/> 2. Northern        | <input type="checkbox"/> 8. San Bernadino/Riverside |                                     |
| <input type="checkbox"/> 3. North Central   | <input type="checkbox"/> 9. Eastern Sierra          |                                     |
| <input type="checkbox"/> 4. Bay Area        | <input type="checkbox"/> 10. Central                |                                     |
| <input type="checkbox"/> 5. Central Coast   | <input type="checkbox"/> 11. San Diego/Imperial     |                                     |
| <input type="checkbox"/> 6. South Central   | <input type="checkbox"/> 12. Orange                 |                                     |