



H.A. Contracting Corp.

providing quality construction services

CGC: 010703
AA: 26001486

SUBCONTRACTOR PRE-QUALIFICATION FORM

Company Name:

Contact Person:

Address:

—

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Federal ID# _____

Email Address: _____

Web Site: _____

Type of work qualified to perform: (masonry, steel,
etc.) _____

Specific Geographical Area You Work In: (Example: Dade County, State of Florida)

Year Business Started: _____ Number of Employees:

Has Company or any of its Owners Declared Bankruptcy in last 5 years? [] Yes []
No



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Is Company Bondable? [] YES [] NO – Single Project Limit \$ _____ Total
\$ _____

Have you ever failed to complete a project: [] YES (explain details below) [] NO
Details: _____

Have you ever failed to complete a project on time? [] YES (explain detail below) [] NO

Details: _____

Have you had a contract terminated due to performance? [] YES (explain detail below) [] NO

Details: _____

What is your current Worker's Compensation Experience Modification Rating (EMR) _____

Jobs Run @ Time: _____ Annual Volume
\$ _____

Largest Job \$ _____ Average Job \$ _____ Smallest
Job \$ _____



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Current Contract Backlog:

Do you have a Service Department? [] YES [] NO

Do you have 24 coverage? [] YES [] NO

SUBCONTRACTOR PRE-QUALIFICATION WORKSHEET

Contractor's License (s) States and Numbers

State: _____ No: _____

State: _____ No: _____

State: _____ No: _____

State: _____ No: _____

Estimating Contact: _____

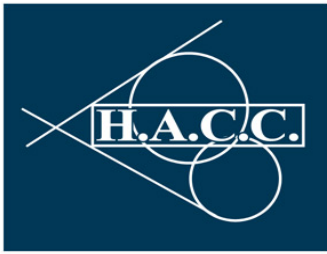
_____ Union / Signatory: Yes [] No [] Subcontractor: []

Vendor/Supplier: []

Business Type: [] Corporation [] Partnership [] Limited Liability Company []

Sole Proprietor [] Other (specify)

Name & Title	Years with Company



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Is your company owned or controlled by a parent or any other organization? YES NO

If yes, please describe on a separate sheet.

Is your company a certified: MBE WBE DBE VBE SBE Native American N/A

Office Personnel Field Supervisors Avg. Field Labor Avg. Shop Labor

I. Legal Information

Are there any judgments, claims, arbitration proceedings, or suits pending/out-standing against your firm or its officer or principals? YES NO

If yes, please provide a complete explanation on a separate sheet.

Has your company filed any lawsuits or requested arbitration or mediation with regard to construction contracts within the last three (3) years? YES NO

If yes, please provide a complete explanation on a separate sheet.

II. References

Banking

Name & Branch _____
Since? _____

City, State, Zip

Contact Person

Bonding

Bonding Company _____ Since? _____

Surety Broker/Agent _____ Since? _____



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Contact Person _____ Telephone _____

Bonding Capacity – Per Project \$ _____ Aggregate \$ _____

Last Bond Issued – Date _____ Amount \$ _____ Rate % _____

Please attach a formal letter from your bonding company.

Insurance

General Liability Carrier _____ Since? _____

Insurance Broker/Age _____ Since? _____

Contact Person _____ Telephone _____

What is your limit to Liability insurance? _____

Supplier

Supplier Name & Location _____

Contact Person _____ Telephone _____

Supplier Name & Location _____

Contact Person _____

Supplier Name & Location _____



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Contact
Person _____

5 References (Owner, Architects, and at least 2 General Contractors for work completed within the last 2 years):

Project: _____ Company: _____

Address: _____

Telephone: _____ Fax: _____ Your
Contract \$ _____

Project: _____ Company: _____

Address: _____

Telephone: _____ Fax: _____ Your
Contract \$ _____

Project: _____ Company: _____

Address: _____

Telephone: _____ Fax: _____ Your
Contract \$ _____

Project: _____ Company: _____



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Address:

Telephone: _____ Fax: _____ Your
Contract \$ _____

Project: _____ Company:

Address:

Telephone: _____ Fax: _____ Your
Contract \$ _____

III. Financial Information

Financial Reference: Please attach a copy of the following:

1. Your most recent full fiscal-year-ending Balance Sheet, Income Statement and Cash Flow
2. Your most recent quarterly year-to-date Balance Sheet, Income Statement and Cash Flow.

Has your company or any other organization with which your officers were involved during the past three (3)

years, ever been in bankruptcy or a voluntary reorganization? [] YES [] NO

If yes, please provide a complete explanation on a separate sheet.

IV. Revenue

Annual Volume: What was the annual volume of work completed in the last three years as well as

next year's forecast (Forecast Volume)

\$ _____ \$ _____ \$ _____
\$ _____



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(Forecast Volume)

V. Experience

Has your company had experience with LEED projects [] YES [] NO

VI. Safety

Does your firm have a written safety plan? [] YES [] NO

Has your firm had any OSHA citations, fines, or jobsite fatalities within the most recent three (3) years?

[] YES [] NO

If yes, please describe in detail on an attached sheet what occurred and what steps were taken

by the company to prevent from happening in the future.

OSHA Incident Rate: Please list your firms OSHA incident rate for the most recent three (3) years

YR. / Rate _____ YR. / Rate _____ YR. /
Rate _____

VII. Additional Information

Please list any additional information you feel will help us determine your company's qualifications and expertise _____

Please attach any other information that you feel will relevant to your companies Prequalification.



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I hereby certify that the above information is accurate, correct and true.

Completed By: _____
(Name)

(Title)

(Signature)

(Date)

ALL PREQUALIFICATIONS MUST BE SUBMITTED
VIA FAX TO: 305-591-9630 OR VIA USPS TO :
H. A. CONTRACTING CORP.
ATTENTION: VICTOR ANGELO
9500 NW 12 ST BAY 1
MIAMI, FL 33172

NO SUBCONTRACTOR WILL BE PRE-QUALIFIED
WITHOUT INSURANCE ON FILE.