



**CONTRACTOR PRE-QUALIFICATION STATEMENT**

It is the policy of Case Western Reserve University (CWRU) to pre-qualify our contractors. Your pre-qualification status must be updated annually. Please direct any questions to Construction Services.

***Company Information & Contacts***

Full Legal Name of Firm: \_\_\_\_\_

Doing business as (DBA): \_\_\_\_\_

Other affiliated companies: \_\_\_\_\_

\_\_\_\_\_

Please list the number of years your company has been in business as a Contractor. \_\_\_\_\_ years

Please list the number of years your company has been in business under its present business name.

\_\_\_\_\_ years

If your company has done business under other names, please list them below:

\_\_\_\_\_  
 \_\_\_\_\_

*Company Type*

Sole Proprietorship

*Partnership*

General Partnership

Limited Partnership

*Corporation*

C-Corporation

S-Corporation

Limited Liability Corporation (LLC)

Date of Incorporation: \_\_\_\_\_ State of Incorporation: \_\_\_\_\_

Dunn & Bradstreet Number: \_\_\_\_\_

*Contact Information*

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Website: \_\_\_\_\_

Primary Contact(s): Name/e-mail

\_\_\_\_\_  
 \_\_\_\_\_

Officers (list all % of ownership)

NAME Title % of Ownership

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

List the jurisdiction(s) where your organization's partnership/trade name is filed.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Authorized Signers

Signatory Amount

_____	\$ _____
_____	\$ _____

**Contract Information**

*Total Contract Volume (Past 4 years)*

20\_\_ \$ \_\_\_\_\_ 20\_\_ \$ \_\_\_\_\_

20\_\_ \$ \_\_\_\_\_ 20\_\_ \$ \_\_\_\_\_

*Largest Single Contract Amount (Past 4 years)*

20\_\_ \$ \_\_\_\_\_ 20\_\_ \$ \_\_\_\_\_

20\_\_ \$ \_\_\_\_\_ 20\_\_ \$ \_\_\_\_\_

*Current Total Backlog*

20\_\_ \$ \_\_\_\_\_

*Work in Progress*

Total worth of work in progress/under contract: \$ \_\_\_\_\_

Below, list current major works in progress. If more than 4 projects, please list on a separate sheet.

Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Architect: \_\_\_\_\_

Contract Amount: \_\_\_\_\_

Percent Complete: \_\_\_\_\_ %

Scheduled Completion Date: \_\_\_\_\_

Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Architect: \_\_\_\_\_

Contract Amount: \_\_\_\_\_

Percent Complete: \_\_\_\_\_ %

Scheduled Completion Date: \_\_\_\_\_

Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Architect: \_\_\_\_\_

Contract Amount: \_\_\_\_\_

Percent Complete: \_\_\_\_\_ %

Scheduled Completion Date: \_\_\_\_\_

Project Name: \_\_\_\_\_

Owner: \_\_\_\_\_

Architect: \_\_\_\_\_

Contract Amount: \_\_\_\_\_

Percent Complete: \_\_\_\_\_ %

Scheduled Completion Date: \_\_\_\_\_

Please list separately the construction experience and present commitments of key individuals of your organization.

**Supplier Diversity Information**

Please check all that apply and attach certifications\*:

**County, City, State and Transportation Departments**

- DBE Disadvantaged Business Enterprise\*
- MBE Minority Business Enterprise\*
- WBE Women Business Enterprise\*
- SBE Small Business Enterprise\*

**Federal Contracts (DoD) / Small Business Administration**

(Small Disadvantaged Businesses and HubZone Businesses must be certified by the SBA and registered in the CCR /Pro-Net system. For more information visit [www.ccr.gov](http://www.ccr.gov))

- HBCU/MI Historically Black Colleges Universities/ Minority Institutions\*
- HUBZone Historically Underutilized Business Zone\*
- LB Large Business
- LOSB Locally Owned Small Business\*
- SB Small Business\*
- SBA 8(a) Small Business Administration 8(a)\*
- SDB Small Disadvantaged Business\*
- SD-VOSB Service-Disabled Veteran Owned Small Business\*
- VOSB Veteran Owned Small Business\*
- WOSB Women Owned Small Business\*
- Other Please Specify \_\_\_\_\_

**Minority Ownership**

- Black American\*
- Hispanic American\*
- Native American (includes American Indian, Eskimo, Aleut & Native Hawaiian)\*
- Asian/Indian American (includes India, Pakistan, Bangladesh)\*

**Company Financial & Legal Information**

**Bonding**

Surety Company: \_\_\_\_\_

Broker: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Single Project Bonding Limit: \_\_\_\_\_

Annual Aggregate Limit: \_\_\_\_\_

**Financial**

Bank: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Line of credit: \$ \_\_\_\_\_ Unused portion: \$ \_\_\_\_\_

Expiration date: \_\_\_\_\_

**Legal\***

List all pending, current, and past litigation over the previous 10 years. If necessary, attach a separate sheet.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contractor Specific Information**

**Safety**

List Experience Modification Rate for past 4 years:

20\_\_ 20\_\_ 20\_\_ 20\_\_

**Procurement Experience**

% General Contractor Hard Bid Stipulated Lump Sum \_\_\_\_\_

% General Contractor Hard Bid with GMAX \_\_\_\_\_

% Construction Manager (agent) \_\_\_\_\_

% Construction Manager at Risk \_\_\_\_\_

% Design Build \_\_\_\_\_

% Job Order Contracting or Program Management \_\_\_\_\_

How many projects as a % require preconstruction services? \_\_\_\_\_

% of repeat clients? \_\_\_\_\_

**Project Experience**

What type of work do you do? (Check all that apply)

General Contractor

Specialty Contractor

Other. Specify \_\_\_\_\_

List the types of work which your company typically self-performs.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What types of projects would you consider your area(s) of expertise?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References**

Company Name	Address/Telephone	Contact	Year of last project

List three General Contractors (if a subcontractor) or Owners you do business with:

Company Name	Address/Telephone	Contact	Project

This form was prepared by: \_\_\_\_\_ Title \_\_\_\_\_

Date completed: \_\_\_\_\_

**Attach the following:**

- Surety letter stating single current project and aggregate project limit for which you can currently bond (bonding capacity).
- If you will be proposing on contracts in excess of \$1M you must submit a copy of your latest (consolidated) audited financial statements. Please be assured your financial information will be kept confidential. If a current copy is on file do not submit a duplicate.