



## Subcontractor Qualification Form

Please complete the following to the best of your ability. We realize that the information requested may not apply to every subcontractor. If you are a supplier, please provide recent data on projects for which you have supplied material.

### COMPANY INFORMATION

Company Name: \_\_\_\_\_ Specialty: \_\_\_\_\_

Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street or PO Box* *City* *State* *Zip*

Office Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

NC State Contractor License # (if applicable): \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Number of Years in Business: \_\_\_\_\_

Annual Volume: \$ \_\_\_\_\_

Is your company bondable? Yes / No Bonding Limit: \$ \_\_\_\_\_

Does your company have a Substance Abuse Program? Yes / No

Does your company have a Safety Program? Yes / No

**PROJECT EXPERIENCE**

**Typical Range of Projects Performed:**

Average Project: \$ \_\_\_\_\_  
 Smallest Project: \$ \_\_\_\_\_  
 Largest Project: \$ \_\_\_\_\_

**List Three Completed Projects:**

Project Name:		Location:	
Contact Person:		Phone Number:	
Year work completed:		Value:	\$

Project Name:		Location:	
Contact Person:		Phone Number:	
Year work completed:		Value:	\$

Project Name:		Location:	
Contact Person:		Phone Number:	
Year work completed:		Value:	\$

**Please provide three suppliers and/or general contractor references:**

Company Name	Contact Person	Phone Number

I am interested in bidding and performing work for CHADCO Builders, LLC.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

Any additional information (brochures, references, current projects and contract amounts, etc.) that you can provide would be helpful and appreciated.

**Form may be returned by email, mail or fax:**  
 Email: [frontdesk@chadcobuilders.com](mailto:frontdesk@chadcobuilders.com)  
 Mail: P.O. Box 877, Graham, NC 27253  
 Fax: (336) 227-6586