



Subcontractor Prequalification Questionnaire

All subcontractors are required to complete this questionnaire. The contents of this questionnaire will be considered confidential and used solely to determine your firm’s qualifications and will not be disclosed to the project staff. Please direct any questions, and return this completed form by fax, email or postal mail, to:

Forrester Construction Company
Attn: Shannon Buck
12231 Parklawn Drive
Rockville, Maryland 20852
Telephone: 301-255-1782
Fax: 866-531-0108
Email: sbuck@forresterconstruction.com

1. GENERAL INFORMATION. Please fill in the following.

- 1.1. Name of Business _____
Street Address _____ City, State, Zip Code _____
Telephone Number _____ Fax Number _____
- 1.2 Person to Contact _____ Email Address _____
- 1.3 Current Number of Employees:
Office _____ Field _____ Shop(s) _____
- 1.4 Dunn and Bradstreet Number _____
- 1.5 Government Rated Security Contractor (Yes or No) Rating (S, or TS).

The undersigned hereby also certifies that he/she is authorized to execute this document on behalf of the said firm and that the statements contained herein are true:

Printed Name _____ Signature _____ Date _____

2. LICENSE INFORMATION. Please provide all trade and professional licenses, if any, required for you to perform your services:

Type of License/Name of License	State	License Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. ORGANIZATION. Please indicate your firm’s legal structure:

- 3.1 This firm is a: () C Corporation () S Corporation () Partnership
() Sole Proprietor () Limited Liability Company



FORRESTER CONSTRUCTION COMPANY

3.2 Date Founded _____ State of Formation _____

3.3 Federal Employer Identification Number: _____

3.4 Corporate Officers:

1) Name: _____
Title: _____
Phone: _____
Fax: _____
Email: _____

2) Name: _____
Title: _____
Phone: _____
Fax: _____
Email: _____

3) Name: _____
Title: _____
Phone: _____
Fax: _____
Email: _____

4. WORK CLASSIFICATION.

Please tell us what trade (s) your company specializes in (example: Drywall, Electrical, Sitework, etc.).

- 4.2 Wage Scale work (Check one)
 - Perform Wage Scale work only Check if Yes
 - Do not perform Wage Scale work Check if Yes
 - Both Wage Scale and Non Wage Scale work Check if Yes

- 4.3 Labor Affiliation (Check one)
 - Union shop Check if Yes
 - Open shop Check if Yes
 - Both Check if Yes

- 4.4 Geographic Preferences (check all that apply)
 - Washington DC Metro Check if Yes
 - Northern VA Check if Yes
 - Central / Southern VA Check if Yes
 - Southern MD Check if Yes
 - Western MD Check if Yes
 - Delmarva Peninsula Check if Yes
 - Baltimore Metro Check if Yes
 - Other _____

- 4.5 Market Preference(s) Check all that apply:
 - Federal / Government Check if Yes
 - Local / Civic Check if Yes
 - Interiors / Tenant fit out Check if Yes



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- Healthcare Check if Yes
- Industrial Check if Yes
- Educational Check if Yes
- Religious Institutions Check if Yes
- Retail Check if Yes
- Restaurants Check if Yes
- Other _____

4.6 Minority Business Enterprise

Please see the list below and check all that apply to your company:

- Small Disadvantaged Business Enterprise
- Small Business Enterprise
- Hubzone Small Business Enterprise
- Veteran Owned Small Business Enterprise
- Service Disabled Veteran Owned Small Business Enterprise
- Woman Small Business Enterprise
- Disabled Veteran Business Enterprise
- LSDBE
- Large Business Enterprise

5. WORK EXPERIENCE.

What is your average job size: \$ _____

What is your largest job size: \$ _____

What is your backlog:

- (i) as of last financial statement: \$ _____
- (ii) as of today: \$ _____
- (iii) as of 12 months ago: \$ _____

6. BONDING CAPACITY.

6.1 Is Bidder able to provide bid, payment and performance bonds? YES NO

6.2 Single Project Limit: \$ _____ Aggregate Limit: \$ _____

6.3 Bonding Company: _____

6.4 Address: _____

6.5 Agent Contact: _____ Phone: _____

6.6 Date, amount and type of last bond issued: _____
Bond rate: _____

6.7 When you return this form, please include a Financial Analysis of your company.

7. FINANCIAL STATEMENTS

7.1 Most recent audited /reviewed financial statements to include:

- 1.) Income statement
- 2.) Balance Sheet
- 3.) Work in progress schedules
- 4.) Cash Flow
- 5.) Financial Statement notes



8. Insurance/Safety Information

8.1 EMR Rating for the past 3 years: 1st Year _____ 2nd Year _____ 3rd Year _____

8.2 Lost work day injury rating for most recent year end: _____

8.3 OSHA Recordable Incident Rating & Fatalities for the most recent year: _____

8.4 Current Insurance Certificate

9. Company References

1) Project Name _____
Contract Amount \$ _____
GC _____
GC Contact Name _____
GC Contact Phone _____

2) Project Name _____
Contract Amount \$ _____
GC _____
GC Contact Name _____
GC Contact Phone _____

3) Project Name _____
Contract Amount \$ _____
GC _____
GC Contact Name _____
GC Contact Phone _____

10. ADDITIONAL INFORMATION.

10.1 Current Projects

<u>Project name</u>	<u>Value</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

10.2 Please list any additional information that you feel will help us determine your firm's qualifications and expertise: _____

11. Please complete the following W-9 form and return it with this package.

**Request for Taxpayer
Identification Number and Certification**

Give form to the requester. Do NOT send to the IRS.

Please print or type	Name (if a joint account or you changed your name, see Specific Instructions on page 2.)	
	Business name, if different from above. (See Specific Instructions on page 2.)	
	Check appropriate box: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		

<p>Part I Taxpayer Identification Number (TIN)</p> <p>Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). However, if you are a resident alien OR a sole proprietor, see the instructions on page 2. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 2.</p> <p><i>Note: if the account is in more than one name, see the chart on page 2 for guidelines on whose number to enter.</i></p> <table style="width:100%; text-align: center;"> <tr> <td style="border: 1px solid black; padding: 2px;">Social security number</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;"> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; 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Part III Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 2.)

Sign Here	Signature ▶	Date ▶
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Purpose of form. A person who is required to file an information return with the IRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9, if you are a U.S. person (including a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are an exempt payee.

If you are a foreign person, IRS prefers you use a Form W-8 (certificate of foreign status). After December 31, 2000, foreign persons must use an appropriate Form W-8.

Note: if a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

What is backup withholding? Persons making certain payments to you must withhold and pay to the IRS 31% of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

If you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return, payments you receive will not be subject to backup withholding. Payments you receive will be subject to backup withholding if:

- You do not furnish your TIN to the requester, or
- You do not certify your TIN when required (see the Part III instructions on page 2 for details), or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

- You do not certify to the requester that you are not subject to backup withholding under 3 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the Part II instructions and the separate Instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.