

Tel: (410) 888-9110 Fax: (301) 725-2430

## **CONTRACTOR'S QUESTIONNAIRE**

1)	Contractor								
	(name as it is filed with Secretary of State or IF	'S)							
2)	Address								
٥)	Street	_	,	City	State	Zip			
3)	Phone ( )	Fax	(		Cell (	)			
4)	Federal Tax I.D. #			5) Total # of E	mployees				
6)	Form of Organization:   Corporation	n	□ Partne	ership 🗆 Proprie	torship				
7)	Date Business Formed	Date	e Incorpo	rated	State of Inc				
8)	Ownership Detail: (Provide resumes)								
	Name and Residence Address	% Own.	DOB	Title / Responsibility	Individual Social Security#	Marital Status	Spouse's Legal Name & SS#		
	1)								
	Cell: Email:								
	2)								
	Cell: Email:								
	3)								
	Cell: Email:								
9)	Has there been any change in ownership in the past two years? ☐ Yes ☐ No								
	If yes, please explain								
10)	Is the Company or any of its owners connected with other companies that operate as a parent, subsidiary, holding								
	company or affiliate? ☐ Yes ☐	No If y	es, pleas	e explain					
11)	Have provisions been made for continuation of the duties of the owner(s) and an orderly transfer of ownership in the								
	event of death or disability?   Yes  No Provide details								
12)	Is corporate and personal (including someony available?			-	ers and/or affiliat	es of the			

,	Name		Position/Responsibility			Time in Position	Time in Industry				
	1)					1 COLLIGIT	- madotry				
	2)										
	3)										
	4)										
14)	Control and supervision	n of cont	racts by owner(s) is perfo	ormed on a □ Daily □ W	l /eekly		basis				
15)	•	What class of construction work does company:									
,	A. Generally do										
	B. Specializes in	·									
	C. At times handle										
16)	What is your geograph	ic area c	f operation								
17)	What was the largest b	acklog c	of contract cost to comple	ete (not contract value) \$							
	Number of Jobs Year										
18)	List the four largest/mo	st impor	tant contracts completed								
	Owner's Name & De		scription of Project	Address, Phone No. & Fax No. Or Email Address		Contract Amount	Completion Date (MM/DD/YY)				
	2)										
	3)										
	4)										
19)	Are bonds required from	n subco	ntractors or suppliers?	☐ Yes ☐ No If yes, over	r what a	mount \$					
20)	What is the single large	est contr	act you expect to attemp	t to obtain in the near future? \$	6	_					
21)	What is the largest backlog of cost to complete you expect to attempt to handle in the near future? \$										
22)	What is the largest volu	ıme of c	ontract value you will atte	empt to handle in the near futur	re? \$						
23)	If no, will you be buy	ying ı	oment necessary to comp renting leasing st (including down payme	olete the program outlined in 20 ent) \$	0, 21, &	22? 🗆 🗅	∕es □ No				

Present or most recent surety							
Location	How long have you used this surety?						
Largest single contract previously bonded	Reasons for change in surety?						
Is collateral currently posted with any othe	er Surety to secure bonds on behalf of your firm?    Yes   No						
If yes, please provide details							
Has the company, any affiliate or subsidiary, or any owner(s) or companies in which they have had ownership interest:							
Ever defaulted on a contract?   No If yes, please explain							
Ever defaulted on a contract forcing the surety to suffer a loss?							
Ever experienced a bankruptcy?	es   No If so, please explain						
Been in receivership? ☐ Yes ☐ No	o If so, please explain						
Been liened by a taxing authority?	Yes □ No If so, please explain						
Are any liens for labor and/or materials file being done by your company?	ed against your company on any contracts which have been done or are						
•							
being done by your company? ☐ Yes							
being done by your company?   Yes  Name of Bank							
being done by your company?   Yes  Name of Bank  Address	□ No If so, please explain						
being done by your company?   Yes  Name of Bank  Address  Account Manager	□ No If so, please explain  Phone						
being done by your company?   Yes  Name of Bank  Address  Account Manager  With Bank Since	Phone Current Line of Credit Amount \$						
being done by your company?	Phone Current Line of Credit Amount \$						
being done by your company?	Phone Current Line of Credit Amount \$  I in Next 90 days \$						
Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	Phone Current Line of Credit Amount \$  I in Next 90 days \$						
Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	□ No If so, please explain  Phone Current Line of Credit Amount \$  I in Next 90 days \$  Personal Signature □ Yes □ No Accounts Receivable □ Yes □ If Yes □ No Describe:						
Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	Phone Current Line of Credit Amount \$  I in Next 90 days \$  Personal Signature   Yes   No   Accounts Receivable   Yes   If Yes   No   Describe:  ment   Expiration   Expiratio						
Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	Phone Current Line of Credit Amount \$  I in Next 90 days \$  Personal Signature   Yes   No   Accounts Receivable   Yes   If Yes   No   Describe:  ment   Expiration   Expiratio						
Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	Phone Current Line of Credit Amount \$  I in Next 90 days \$  Personal Signature   Yes   No   Accounts Receivable   Yes   If Yes   No   Describe:  ment   Expiration   Expiration   Expiration   Accounts Receivable   Yes   If Yes						
Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	Phone Current Line of Credit Amount \$  I in Next 90 days \$  Personal Signature   Yes   No   Accounts Receivable   Yes   If Yes   No   Describe:  ment   Expiration   Expiratio						
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Name of Bank Address Account Manager With Bank Since Amount Presently in Use \$ Anticipated Additional Amount to be Used Secured by: Corporate Signature	Phone Current Line of Credit Amount \$  I in Next 90 days \$  Personal Signature   Yes   No   Accounts Receivable   Yes   If Yes   No   Describe:  ment   Expiration   Expiratio						

29)	Have there been any changes in outside accounting firms since your last fiscal year end?   — Yes  — No  If yes, please explain the reason for change							
	If no, how long have you been using the present firm?							
	What computer software do you use for internal accounting?							
30)	O) Are interim financial statements prepared during the year? ☐ Yes ☐ No  If yes, how often by whom							
31)	Are trial balances prepared monthly?			n	by whom			
32)	• •		ŕ	-	by whom			
33)	If the company is a corporation, is it a Sub Chapter S Corporation?   Yes   No  Financial statements are prepared by the CPA on the following basis:							
33) Financial statements are prepared by the CPA on the following basis:  □ % of Completion □ Completed Contract □ Accrual □ Cash								
34)	Income taxes are paid on the following to			Completed Conti	ract □ Accrual □ Cash			
35)	· · · · · · · · · · · · · · · · · · ·							
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36)	Give names of principal suppliers/sub	Give names of principal suppliers/subcontractors						
	Name of Firm and Contact	Address,	Phone & Fax No.	or Email	Material/Service Provided			
	1							
	Provide a Current Certificate of Insurance							
	Remarks:							
	fallowing statement mount by signed by an according		Completed by:					
	following statement must be signed by an own any for which bonding is being requested.	ner or officer of the	Completed by.	(print name)				
I ackr	nowledge that all information is complete and co	orrect and is given to	Title:	(print name)				
induce	e the insurance company to execute surety bond information may constitute misrepresentation	Signature:						
under	rsigned, am authorized to allow you to investigate rmance reference and prior sureties of the com	the credit, bank and	Date:					
	where for bond purposes.	parry, its critpioyees						