



Subcontractor Prequalification Checklist

 Show only Checklist

Display Style 

Company Information & Credentials

Verification of basic company details and legal standing.

Legal Company Name

Write something...

Doing Business As (DBA) Name (if applicable)

Write something...



Company Address

Write something...

Years in Business

Enter a number...

Business Structure

- Sole Proprietorship
- Partnership
- Limited Liability Company (LLC)
- Corporation
- Other

Copy of Business License/Registration

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Federal Tax ID (EIN)

Write something...

Brief Description of Company's Core Business & Services Offered

Write something...

Financial Stability

Assessment of the subcontractor's financial health and ability to complete projects.

Annual Gross Revenue (Last 3 Years)

Current Assets

Current Liabilities

Working Capital

Date of Last Financial Statement

Submit Financial Statements (e.g., Balance Sheet, Income Statement)

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Credit Rating (if available)

- Excellent
- Good
- Fair
- Poor
- Not Applicable

Explanation of any significant financial issues or concerns.

Write something...

Insurance & Bonding

Confirmation of appropriate insurance coverage and bonding capacity.

General Liability Insurance Coverage Limit (\$)

Enter a number...

Workers' Compensation Insurance Coverage Limit (\$)

Enter a number...


Automobile Liability Insurance Coverage Limit (\$)

Enter a number...

Type of Workers' Compensation Coverage

- State Fund
- Private Insurance
- Self-Insured

Certificate of Insurance (COI)

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Bond Type Required

- Performance Bond
- Payment Bond
- Bid Bond
- None Required

Bonding Capacity (\$)

Enter a number...

Safety Record & Program

Evaluation of the subcontractor's safety performance and implemented safety program.

Lost Time Incident (LTI) Rate (Past 3 Years)

Enter a number...

Total Recordable Incident Rate (TRIR) (Past 3 Years)

Enter a number...

Description of Safety Program (including training, hazard identification, and incident reporting)

Write something...

Copy of Safety Manual

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Safety Training Programs Offered (Check all that apply)

- OSHA 10-Hour
- OSHA 30-Hour
- Fall Protection
- Confined Space Entry
- First Aid/CPR
- Other (Specify in long text field)

Date of Last Safety Program Review

Enter date...

Describe process for investigating incidents and implementing corrective actions

Write something...

Experience & References

Review of project history and feedback from previous clients.

Describe 3-5 relevant construction projects completed within the last 5 years.

Write something...


Types of projects typically undertaken (select all that apply)

- Residential
- Commercial
- Industrial
- Healthcare
- Educational
- Government

Years of experience in the construction industry:

Enter a number...

Please provide project portfolio/resume showcasing relevant experience.

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Provide contact information (Name, Phone Number, Email) for 3 references from previous clients.

Write something...

Typical Project Size Range (based on contract value)

- Under \$10,000
- \$10,000 - \$50,000
- \$50,000 - \$250,000
- \$250,000 - \$1,000,000
- Over \$1,000,000

Quality Control & Assurance

Understanding of the subcontractor's quality control processes.

Describe the subcontractor's Quality Control (QC) Plan.

Write something...

What QC processes are utilized?

- Inspections
- Testing
- Audits
- Documentation Reviews
- Third-Party Verification

Average number of non-conformances per project (over last 2 years).

Enter a number...

Provide a sample Quality Control checklist or form used on previous projects.

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Is a dedicated Quality Control Manager assigned to projects?

Yes

No

Detail the process for identifying, documenting, and correcting quality issues.

Write something...

Legal Compliance & Regulatory Adherence

Verification of compliance with relevant laws, regulations, and licensing requirements.

Business License Status

Active

Inactive

Pending

Copy of Business License

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Registration with Relevant Authorities (e.g., Contractor State License Board)

- Registered
- Not Required
- Exempt

Copy of Registration Documents (if applicable)

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Workers' Compensation Insurance Coverage

- Compliant
- Non-Compliant
- Not Applicable

Workers' Compensation Insurance Policy Number

Enter a number...

Description of any Legal or Regulatory Issues (e.g., Liens, Judgements)

Write something...

Date of Last Legal Compliance Audit

Enter date...

Subcontractor Personnel & Training

Assessment of the qualifications and training of key personnel.

Number of Years of Experience in Relevant Field

Enter a number...

Brief Description of Key Personnel's Roles and Responsibilities on Projects

Write something...

Resumes/CVs of Key Project Personnel (e.g., Project Manager, Foreman, Lead Technician)

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Are personnel certified for specific tasks (e.g., Welding, Confined Space Entry)?

Yes

No

N/A

List of Relevant Certifications Held by Personnel (Select all that apply)

- OSHA 30
- First Aid/CPR
- Certified Welder
- LEED AP
- Other (Specify in Long Text)

If 'Other' was selected for certifications, please specify.

Write something...

Expiration Date of Key Personnel's Primary Certification (e.g., OSHA 30)

Enter date...

Equipment & Resources

Evaluation of the subcontractor's equipment, tools, and resources to adequately perform the work.

Number of Owned/Leased Excavators

Enter a number...

Number of Owned/Leased Dump Trucks

Enter a number...

Number of Skilled Operators (Certified)

Enter a number...

List of Standard Equipment & Tools (provide details)

Write something...

Equipment Inventory List (PDF/Excel)

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Equipment Maintenance Program - Description

- Formal Program
- Informal/Ad Hoc
- No Formal Program

Date of Last Equipment Inspection / Maintenance

Enter date...

Contractual & Legal Review

Review of agreements and legal documentation.

Current Business License (PDF)

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Describe any prior legal disputes or claims (including details and resolution). If none, state 'None'.

Write something...

Does the subcontractor agree to be bound by the Prime Contract's terms and conditions?

Yes

No

Does the subcontractor have a written conflict of interest policy?

Yes

No

Describe the subcontractor's process for handling change orders and claims.

Write something...

Maximum allowable deviation from agreed upon payment terms (in days)

Enter a number...

Date of execution of the agreement

Enter date...