



## CONTRACTOR'S QUESTIONNAIRE

- 1) Contractor \_\_\_\_\_  
*(name as it is filed with Secretary of State or IRS)*
- 2) Address \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
- 3) Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_ Cell ( \_\_\_\_\_ ) \_\_\_\_\_
- 4) Federal Tax I.D. # \_\_\_\_\_ 5) Total # of Employees \_\_\_\_\_
- 6) Form of Organization:     Corporation         Partnership         Proprietorship
- 7) Date Business Formed \_\_\_\_\_ Date Incorporated \_\_\_\_\_ 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 \_\_\_\_\_

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- 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 yes, please explain \_\_\_\_\_

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- 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 \_\_\_\_\_

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- 12) Is corporate and personal (including spouses) indemnification by all owners and/or affiliates of the company available?     Yes     No    If no, please explain \_\_\_\_\_

13) Key Operating Personnel: **(Provide resumes if available)**

Name	Position/Responsibility	Age	Time in Position	Time in Industry
1)				
2)				
3)				
4)				

14) Control and supervision of contracts by owner(s) is performed on a  Daily  Weekly  Monthly basis

15) What class of construction work does company:

- A. Generally do \_\_\_\_\_
- B. Specializes in \_\_\_\_\_
- C. At times handle \_\_\_\_\_

16) What is your geographic area of operation \_\_\_\_\_

17) What was the largest backlog of contract cost to complete (not contract value) \$ \_\_\_\_\_

Number of Jobs \_\_\_\_\_ Year \_\_\_\_\_

18) List the four largest/most important contracts completed in the last five years.

Owner's Name & Contact Person	Description of Project	Address, Phone No. & Fax No. Or Email Address	Contract Amount	Completion Date (MM/DD/YY)
1)				
2)				
3)				
4)				

19) Are bonds required from subcontractors or suppliers?  Yes  No If yes, over what amount \$ \_\_\_\_\_

20) What is the single largest contract you expect to attempt to obtain in the near future? \$ \_\_\_\_\_

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 volume of contract value you will attempt to handle in the near future? \$ \_\_\_\_\_

23) Do you presently own the equipment necessary to complete the program outlined in 20, 21, & 22?  Yes  No

If no, will you be buying renting leasing

Anticipated total acquisition cost (including down payment) \$ \_\_\_\_\_

24) Present or most recent surety \_\_\_\_\_  
Location \_\_\_\_\_ How long have you used this surety? \_\_\_\_\_  
Largest single contract previously bonded \_\_\_\_\_ Reasons for change in surety? \_\_\_\_\_

25) Is collateral currently posted with any other Surety to secure bonds on behalf of your firm?  Yes  No  
If yes, please provide details \_\_\_\_\_

26) 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?  Yes  No If yes, please explain \_\_\_\_\_

Ever defaulted on a contract forcing the surety to suffer a loss?  Yes  No If yes, please explain \_\_\_\_\_

Ever experienced a bankruptcy?  Yes  No If so, please explain \_\_\_\_\_

Been in receivership?  Yes  No If so, please explain \_\_\_\_\_

Been liened by a taxing authority?  Yes  No If so, please explain \_\_\_\_\_

Are any liens for labor and/or materials filed against your company on any contracts which have been done or are being done by your company?  Yes  No If so, please explain \_\_\_\_\_

27) Name of Bank \_\_\_\_\_

Address \_\_\_\_\_

Account Manager \_\_\_\_\_ Phone \_\_\_\_\_

With Bank Since \_\_\_\_\_ Current Line of Credit Amount \$ \_\_\_\_\_

Amount Presently in Use \$ \_\_\_\_\_

Anticipated Additional Amount to be Used in Next 90 days \$ \_\_\_\_\_

Secured by: \_\_\_\_\_

Corporate Signature  Yes  No Personal Signature  Yes  No Accounts Receivable  Yes  No

Inventory  Yes  No Other  Yes  No Describe: \_\_\_\_\_

Terms: Rate \_\_\_\_\_ Repayment \_\_\_\_\_ Expiration \_\_\_\_\_

**Provide Current Bank Line of Credit Commitment Letter**

28) CPA Firm \_\_\_\_\_

Address \_\_\_\_\_

Account Manager \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

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) Are interim financial statements prepared during the year?  Yes  No

If yes, how often \_\_\_\_\_ by whom \_\_\_\_\_

31) Are trial balances prepared monthly?  Yes  No If no, how often \_\_\_\_\_ by whom \_\_\_\_\_

32) If the company is a corporation, is it a Sub Chapter S Corporation?  Yes  No

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 basis:  % of Completion  Completed Contract  Accrual  Cash

35) Are corporate and personal taxes of owner(s) and spouse(s) current:  Yes  No If no, please explain \_\_\_\_\_

36) Give names of principal suppliers/subcontractors

Name of Firm and Contact	Address, Phone & Fax No. or Email	Material/Service Provided

**Provide a Current Certificate of Insurance**

Remarks: \_\_\_\_\_

*The following statement must be signed by an owner or officer of the company for which bonding is being requested.*

I acknowledge that all information is complete and correct and is given to induce the insurance company to execute surety bonds. I understand that false information may constitute misrepresentation or fraud. I, the undersigned, am authorized to allow you to investigate the credit, bank and performance reference and prior sureties of the company, its employees and owners for bond purposes.

Completed by: \_\_\_\_\_

(print name)

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

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