

Felderman Design-Build Subcontractors Qualification Summary

Date: _____

Company Information:

Company Name: _____ Website: _____

Legal Name(if different): _____

Company Address: _____

Contact Name: _____ Cell: _____

Phone: _____ Fax: _____ Emergency # (injury/weekend #): _____

Type of Work: Concrete Doors/Windows Electrical Engineered Wood Systems
 Equipment Supplier Excavation Fire Protection Floor Covering HVAC
 Insulation Interior Finishes Landscaping Masonry Mechanical Metal Bldg
 Overhead Doors Painting Plumbing Roofing Specialty Contractor Steel Erection
 Steel Framing Other (please specify) _____

1. How many years has your organization been in business under its present business name? _____
2. Under what other or former names has your organization operated? _____
3. Number of employees: Office: _____ Field: _____

Claims & Suits: (If the answer to any of the questions below is yes, please attached details.)

1. Has your organization ever failed to complete any work awarded to it? _____
2. Are there any judgements, claims, or suits pending or outstanding against your organization or its officers? _____
3. Has your organization filed any law suits or requested arbitration with regard to construction contracts within the last 5 years? _____

References: (Please list the company name, contract, phone number and address of three references who have worked directly with your company).

1. _____

2. _____

3. _____

Experience: (Please list the project name, company contracted with and the contract value of your three largest projects worked on).

1. _____

2. _____

3. _____

4. How many projects does your company currently have in progress? _____ Total Dollar Value: _____

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Experience Continued:

5. What does your company offer that will benefit Felderman Design-Build? _____
6. What makes your company stand out from its competitors in the same trade? _____

Insurance: (Please provide Felderman Design-Build with an accurate & current certificate of insurance. Please show all insurance coverages and Subcontractor is required to have the following with minimum coverages as stated below):

****Felderman Design-Build must be listed as additional insured on certificate of insurance.**

1. General Liability: Bodily injury & property damage: \$1,000,000 each occurrence & each aggregate.
2. Auto Liability: Bodily injury: \$500,000 each person & each accident. Property damage: \$100,000 each accident
3. Worker's Compensation: Statutory Indiana coverage with \$500,000 employer's liability. (If company is only made up of (1) personnel and does not have Worker's Compensation, they are required to get a waiver from the State of Indiana releasing them of Worker's Compensation insurance coverage. Felderman Design-Build requires a copy of this waiver in hand for the company to be an eligible subcontractor along with their current insurance coverage).

Direct Subcontracting:

1. No contractual relationship (direct subcontracting) shall exist between this Subcontractor and the Owner of any Felderman Design-Build project without written approval from Felderman Design-Build. _____ (please sign)
2. Will additional companies be used to perform work on Felderman Design-Build projects (please specify who if known)?

Testimony:

I _____ of _____ state that the information provided above in the Felderman Design-Build Subcontractors Qualification Summary is true and sufficiently complete so as not to be misleading.

Print Name: _____

Signature: _____

Company Name: _____

Date: _____