



GAINESVILLE OFFICE

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BIDDER QUALIFICATION FORM

RETURN TO: M.M. PARRISH CONSTRUCTION CO. OFFICE APPROPRIATE TO JOB

PROJECT: _____

Date: _____

Company Name: _____

Mailing Address: _____

Physical Address: _____

Phone: _____ Fax: _____ E-mail: _____

Contact Name: _____

Contractor License Number (attach a copy): _____

Geographic Area of Business Interest: _____

Years in Business Under Present Name: _____

Work Specialty: _____

Years Performing Work Specialty: _____

Work Now Under Contract: \$ _____

Work in Place Last Year: \$ _____

Value of Work Presently Bonded: \$ _____

Total Bonding Capacity: \$ _____

Bonding Surety: _____

Bonding Agent: _____ Phone Number: _____

Insurance Agent: _____ Phone Number: _____

Percent of work performed by own forces: _____ %

Total number of permanent staff employed by company: _____

This includes _____ Office Staff _____ Field Personnel

Average work force for the past five years: _____

Is the company a Florida State Certified M/WBE? ___ Yes ___ No. Certification No. _____

Is the company in compliance with EEO requirements? ___ Yes ___ No

Approximate value of equipment owned by company: \$ _____

Does the company have a safety program? _____

What is the company's EMR (Experience Modifier Ratio)? _____

Does the company maintain an OSHA 200 log (Total Hrs Worked, Total Lost Time, Total Accidents, Etc.)? _____

If yes, provide a copy.

Has Company Ever _____	Failed to complete a contract?
_____	Been involved in bankruptcy or reorganization?
_____	Had pending judgment claims or suits against it?
_____	Been assessed liquidated damages on any project?

(If YES to any of the preceding, submit details on a separate sheet.)

Does Company have a current rating with Dun & Bradstreet? ___ Yes ___ No

If yes, what is your D&B Rating ? _____

Trade References (Contact Name, Phone, Address)

1. _____
2. _____
3. _____

Trade References (Contact Name, Phone, Address) Continued

- 4. _____
- 5. _____
- 6. _____

List three **similar** projects that your company has worked on during the past 5 years.

- 1. _____
- 2. _____
- 3. _____

List three General Contractors & Construction Managers that your company has worked for during the past two years. (Contact Name, Phone, Address)

- 1. _____
- 2. _____
- 3. _____

List three of your **most significant** projects currently **under** construction

Project & Location	Contact Name/Phone	Architect	Completion	Contract Amount
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

Attach a complete resume of the proposed Project Manager and Superintendent to be utilized for this project. Resume should include relative experience and experience in scheduling. If the qualified bidder is successful in obtaining the contract, it is expected that these individuals will actually be committed to the project.

I hereby certify that the above information is true and complete to the best of my knowledge.

Signature _____
(Officer of the company)

Name (Print) _____

Type of Company: _____ Corporation _____ Partnership _____ Sole Proprietor