



Teal Construction Company

SUBCONTRACTOR PREQUALIFICATION

Dated: _____

Person filling our form: _____ **Email:** _____

Subcontractor must update annually

Please notify Teal Construction of any changes to assure bid opportunities

CHECK HERE IF SUPPLIER

Prequalification & Subcontract Review

Thank you for your interest in working with Teal Construction Company

Prequalification

In an effort to select the most highly qualified, safety conscious Subcontractors we have a comprehensive prequalification process. If not already pre-qualified with Teal, please follow the below steps.

PLEASE COMPLETE CAREFULLY, ATTACH REQUESTED INFORMATION AND SUBMIT DIRECTLY TO:

- Teal Construction Company Attention: Estimating
1335 Brittmoore Road Houston, Texas 77043
Phone: 713.465.8306 Fax: 713.465.9837
Email: estimating@tealcon.com

Required Attachments (Please check that all below are attached with Prequalification Document)

- Financial Statements (must be submitted in order to be prequalified for working with Teal)
- Letter from Surety or Surety Agent (not applicable to Suppliers)
- Work in Progress Report (anticipated during the same duration as contemplated project)
- Major Projects in the last 5 years
- Attach OSHA 300 Log for the last three years.
- Sample of your insurance certificate



BUSINESS CONTACT INFORMATION

Company name		Date business commenced	
Executive officers		<input type="checkbox"/> Sole proprietorship <input type="checkbox"/> Corporation _____ State List any organizations that your company is involved with or members of <i>*Attach if needed</i> Attach brochure or promotional information. <i>*if you have multiple documents combine before attaching</i>	<input type="checkbox"/> Partnership <input type="checkbox"/> Other
Phone Fax			
Registered company address City, State ZIP Code			
List any industry awards or honors your company has earned <i>*Attach if needed</i>			

ESTIMATING CONTACT AND TRADE INFO

Contact name(s) for bidding		Email to receive all ITB's <i>*is there a generic email</i>	
What percentage of your work is usually subcontracted to others?		Company certifications WBE, MBE, HUB etc. <i>*Attach certificates</i> <input type="checkbox"/>	
What percentage of your work is?	Private _____ Public _____	Service Area	<input type="checkbox"/> Houston <input type="checkbox"/> San Antonio <input type="checkbox"/> Austin <input type="checkbox"/> Dallas <input type="checkbox"/> Corpus Christi <input type="checkbox"/> Statewide <input type="checkbox"/> Other
Trades Divisions CSI Codes			

KEY CONSTRUCTION PERSONNEL

Name & Title		Email	
Years with company		Construction Experience	
Name & Title		Email	
Years with company		Construction Experience	
Name & Title		Email	
Years with company		Construction Experience	

FINANCIAL AND CREDIT INFORMATION

Name of Bonding Company How long with this surety?		Bank name How long with this Bank?	
Phone Fax		Primary business address City, State ZIP Code	
Name of Agent E-mail		W-9 & Insurance coverage <i>*attach and submit</i> <input type="checkbox"/>	



Surety Rating <i>*Letter from surety co on their letterhead, notarized and signed attorney in fact.</i> <input type="checkbox"/>		Financial statement <i>*Please attach your firm's most recent financial statement (audited, if available) for the entity</i>	
Current capacity		Single Limit Aggregate limit	

ANNUAL CONSTRUCTION VOLUME

Please indicate this year's estimated annual sales volume? \$ _____
 Indicate the annual volume of work completed for the past three years from the signature date:

Year:	Year:	Year:

GENERAL CONTRACTOR/SUPPLIER REFERENCES

Company name		Phone	
Address		E-mail	
Project		\$	
Company name		Phone	
Address		E-mail	
Project		\$	
Company name		Phone	
Address		E-mail	
Project		\$	

CURRENT PROJECTS & UPCOMING PROJECTS

Project		General Contractor	
Address		Main Contact Name	
Phone		E-mail	
Size		Project delivery Method	
Project		General Contractor	
Address		Main Contact Name	
Phone		E-mail	
Size		Project delivery Method	
Project		General Contractor	
Address		Main Contact Name	
Phone		E-mail	
Size		Project delivery Method	
Project		General Contractor	
Address		Main Contact Name	
Phone		E-mail	



Size		Project delivery Method	
SAFETY <input type="checkbox"/>			
Do you have an active safety program in place? <i>*attach copy</i> <input type="checkbox"/>		Safety Director: <input type="checkbox"/>	
Do you have a training program for your personnel?		Phone Email	
EMR (last 3 years) <i>*attach and submit letter</i> <input type="checkbox"/>		Do you have a drug and alcohol testing policy? <i>*if yes attach a copy of policy</i> <input type="checkbox"/>	
OSHA 300 (last 3 years) <i>* attach and submit</i> <input type="checkbox"/>		Do you conduct project safety inspections? <i>*if yes how often</i> <input type="checkbox"/>	
Do you have a full-time QA/QC representative?		Do you have a formal written Quality Control Manual/Program? <i>*if yes, attach</i> <input type="checkbox"/>	
Has your organization received any OSHA Citations in the last (5) years? <i>If the answer is yes, please attach details.</i> <input type="checkbox"/>		Has your organization had any jobsite fatalities in the last (5) years? <i>If the answer is yes, please attach details.</i> <input type="checkbox"/>	

LICENSING AND REGISTRATION

Jurisdictions in which your company is legally qualified to conduct business

1. Issuing Authority		Expiration	
License Number		Type	
2. Issuing Authority		Expiration	
License Number		Type	
3. Issuing Authority		Expiration	
License Number		Type	
In the past three years has your company had any business or professional license suspended or revoked? <i>If yes, explain</i> <input type="checkbox"/>			

RELEASE AUTHORIZATION

WE CERTIFY THAT ALL INFORMATION IN THIS QUESTIONNAIRE AND THE ATTACHMENTS IS TRUE AND CORRECT. WE HEREBY AUTHORIZE TEAL CONSTRUCTION COMPANY SYSTEMS AND ITS REPRESENTATIVES TO INVESTIGATE DIRECTLY WITH THE REFERENCES GIVEN HEREIN, ANY INFORMATION PERTAINING TO THE UNDERSIGNED AND/OR THE INDIVIDUALS INVOLVED THEREIN. WE AUTHORIZE OUR FINANCIAL INSTITUTIONS, PRIOR AND EXISTING SURETIES, CUSTOMERS, CREDITORS AND SUPPLIERS TO RELEASE CREDIT HISTORY AND OTHER UNDERWRITING/QUALIFICATION INFORMATION.

Name		Title	
Signature		Date	