



Subcontractor / Vendor Pre-qualification

It is the policy of Moyle Construction to pre-qualify our subcontractors prior to bidding on any of our projects. You will be required to pre-qualify annually to be able to continue bidding on work. Moyle Construction may request that this form be completed on a specific basis rather than just annually if the scope or size of the project is greater than the subcontractor's historical average amount.

All financial information collected will be kept confidential.

Project Name _____
(If applicable)

General Information
Legal Name of Firm: _____

DBA: _____

Registered Address: _____

City: _____ State _____ Zip _____

Phone: _____ Fax _____

Your business is: Sole Proprietorship Partnership
 Corporation LLC

If incorporated, please provide date and state of incorporation:

Provide the names and titles of your firm's principal contacts

Principal Contact _____ Title _____
Phone _____ Fax _____
Email Address _____

Estimating Contact _____ Title _____
Phone _____ Fax _____
Email Address _____



Safety

Do you have a written safety plan that satisfies MIOSHA/OSHA requirements?

Yes _____ No _____

Do you have a designated Safety Officer?

Yes _____ No _____

If yes, Name: _____ Phone _____

Have you been cited by MIOSHA within previous three years and this year to date?

Yes _____ No _____

If yes, please attach on a separate page an explanation of the rules violation.

Please provide the last three years' totals for Columns G, H, I, J, K, and L from the MIOSHA or OSHA 300 form.

Year _____ Total _____

Year _____ Total _____

Year _____ Total _____

Moyle Construction may require additional information regarding your company's safety history and record upon review of the information provided herein.

Geographical Work Area, Minority Certification, and Capabilities

List the states in which you are licensed to perform work:

List categories of work you are qualified to perform with your own personnel

List categories of work you normally subcontract to others



Minority Certification	MBE	Yes _____	No _____
	WBE	Yes _____	No _____
	Small Business	Yes _____	No _____
	Small Disadvantaged Business	Yes _____	No _____
	Disabled Veteran Owned Business	Yes _____	No _____
	Hub-Zone Business	Yes _____	No _____

References

List the three largest projects you have worked on in the last three years:

1. Project Name: _____

Contract Value: _____ Date of Completion: _____

General Contractor: _____

Contact: _____ Phone: _____

2. Project Name: _____

Contract Value: _____ Date of Completion: _____

General Contractor: _____

Contact: _____ Phone: _____

3. Project Name: _____

Contract Value: _____ Date of Completion: _____

General Contractor: _____

Contact: _____ Phone: _____

List any major projects you have worked on with Moyle Construction:



List three major General Contractors you have worked with in the last three years:

1. Company Names: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

2. Company Names: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

3. Company Names: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

List three major Suppliers:

1. Company Names: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

2. Company Names: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

3. Company Names: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____



Financial Information

Name of Your Primary Bank: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

Are any of your payable accounts 90 days past due with your material suppliers or subcontractors? Yes _____ No _____

If yes, attach a separate sheet detailing the amounts and the reason for the past due accounts.

Has your company, owners, and/or principals been involved in any form of bankruptcy proceeding? Yes _____ No _____

If yes, attach a separate sheet detailing the circumstances surrounding this situation.

Have you been involved in any litigation within the past 5 years? Yes _____ No _____

If yes, attach a separate sheet detailing each case and the outcome.

Bonding Capacity

What is your bonding capacity?

Who is your bonding company?

Name: _____

Address: _____

Phone: _____ Fax: _____

Contact: _____

Additional Attachments

In order for pre-qualification to be accepted, please attach the following items

- A copy of your standard insurance certificate listing all insurance coverage types and limits
- A letter from your insurance agent illustrating your current and past three (3) years Workers' Compensation Experience Modification Rating and what your current minimum MOD for your job code is.



**MOYLE
CONSTRUCTION**

46702 M-26 PO Box 399
Houghton MI 49931
P (906) 482-3000 F (906) 482-3087

Please complete pre-qualification in its entirety and return to Moyle Construction.

Mail
Moyle Construction
Attn: Estimating
46702 Hwy M-26
PO Box 399
Houghton, MI 49931

Email
bidroom@moyleusa.com
Fax
(906) 483-3505

Moyle Construction reserves the right to reject any subcontractor or supplier based upon review of the enclosed information and any additional information requested. Moyle Construction is an equal opportunity employer.

Completed by

Signature: _____

Date: _____

Printed Name: _____

Title: _____