

## SUBTRADE PRE-QUALIFICATION FORM

### Company Background

#### Company Name and Contact Info

Name			
Street			City
Province	Postal Code	Website	
Phone		Fax	

#### Legal Information

If Incorporated Year Federal	Year Provincial	If Registered Province	Year	If Partnership or Sole Proprietor Name	Year
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#### Company partners and officers

Name		Title	Held Since
E-mail		Phone	Fax
Name		Title	Held Since
E-mail		Phone	Fax
Name		Title	Held Since
E-mail		Phone	Fax

#### Key Personnel (Other than above)

Name		Title	Held Since
E-mail		Phone	Fax
Name		Title	Held Since
E-mail		Phone	Fax

### Financial Information

#### Bank and Bonding Information

Bank		Reference
Phone	Fax	E-mail
Bonding Company		Bonding Limit
Phone	Fax	E-mail

Does your company have any outstanding liens / judgements / disputes?  Yes  No  
 Has your company had any major litigation in the last two years?  Yes  No

*If you've answered yes to the questions above please provide details on separate attachment*

**Insurance**

Liability Insurance Insurer		Limit	Reference
Phone	Fax		E-mail
Builders Risk Insurer		Limit	Reference
Phone	Fax		E-mail
Equipment Insurer		Limit	Reference
Phone	Fax		E-mail

**Business Practices**

**List 3 supplier references**

Supplier		Reference
Phone	Fax	E-mail
Supplier		Reference
Phone	Fax	E-mail
Supplier		Reference
Phone	Fax	E-mail

**Scope of work interested in performing**

Division	Scope	Division	Scope
Division	Scope	Division	Scope
Division	Scope	Division	Scope

**Of the work listed above, what work is sub contracted?**

Division	Scope	Division	Scope
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**List approximate annual construction volume in the last 3 years**

Year	Volume	Year	Volume	Year	Volume
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**List preferred cities / regions to perform work in**

City/Region	City/Region	City/Region	City/Region
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What size of contracts are you interested in and capable of performing?

What is the union status of your company?  Union  Non-Union  Open Shop

**If Union, list unions of which you are certified and have collective agreements**

Union	Expire Date	Union	Expire Date
Union	Expire Date	Union	Expire Date

**Provide current WCB information**

WCB Account No	Current Clearance Date
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**Projects and References**

**List 2 major projects completed in the last 5 years**

Project Name and Location		Start Date	Completed Date
Value	Scope	Scope	Scope
Owner		Reference	
Phone	Fax	E-mail	
Architect		Reference	
Phone	Fax	E-mail	
General Contractor		Reference	
Phone	Fax	E-mail	

Project Name and Location		Start Date	Completed Date
Value	Scope	Scope	Scope
Owner		Reference	
Phone	Fax	E-mail	
Architect		Reference	
Phone	Fax	E-mail	
General Contractor		Reference	
Phone	Fax	E-mail	

**List 3 current projects**

Project Name and Location		Start Date	% Complete
Value	Scope	Scope	Scope
Owner		Reference	
Phone	Fax	E-mail	
Architect		Reference	
Phone	Fax	E-mail	
General Contractor		Reference	
Phone	Fax	E-mail	

Project Name and Location		Start Date	% Complete
Value	Scope	Scope	Scope
Owner		Reference	
Phone	Fax	E-mail	
Architect		Reference	
Phone	Fax	E-mail	
General Contractor		Reference	
Phone	Fax	E-mail	

Project Name and Location		Start Date	% Complete
Value	Scope	Scope	Scope
Owner		Reference	
Phone	Fax	E-mail	
Architect		Reference	
Phone	Fax	E-mail	
General Contractor		Reference	
Phone	Fax	E-mail	

## Execution

*I hereby declare that the information provided is true and correct to the best of my knowledge and authorize Novacom Construction Limited to contact the references provided.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

### VANCOUVER OFFICE

#101 - 18663 52nd Avenue T 604.273.7303  
Surrey, BC V3S 8E5 F 604.273.7358

### CALGARY OFFICE

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Calgary, AB T2X 1M2 F 403.351.0649

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