

p: 352.363.6070 f: 352.363.6071

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Subcontractor & Vendor Prequalification Form

Section I – General Information				
Company Name				
Mailing Address				
Physical Address				
Contact				
Phone				
Fax				
Email Address				
Type of Company:				
Corporation	Partnership	Join	t Venture	Individual
	_	<u> </u>		
Small/minority Busine	ess - check all th	at <u>ap</u> ply:		<u></u>
SBE	MBE	WB	Ξ	Other
Role (sub, supplier, etc) Contractor License No				
Spec. Divisions/Produ	ıcts Provided			
Geographic Area of B	usiness Interest			
Years in Business und	der Present Nam	e		
Years Performing Work Specialty				
Value of Work Preser	-	act <u>\$</u>		
Value of Work in Plac	e Last Year	\$		
Value of Work Presently Bonded \$				
Total Bonding Capaci		\$		
Bonding Surety Name				
Bonding Agent Name				
Bonding Agent Phone	· · · · · · · · · · · · · · · · · · ·			
Percentage of Work F	•	n Forces		
Number of Field Personnel Number of Office Staff				
Avg. Work Force for Past 3 Years				
Approx. Value of Equi	pment Owned	\$		
In-house Engineeri	ng Canability		In-house F	abrication Canability





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Section II – Experience Is your firm in compliance with EEO requirements? Yes Has your firm ever been at fault of an OSHA safety violation? If Yes, please explain below. Does your firm have a current rating with Dunn & Bradstreet? If Yes, please provide a copy. Select the market segments for which your firm has significant project experience and indicate the percent volume of your overall annual workload: Hospital/AHCA Higher Education K-12 Education % Government/Municipal Multi-family Office Mixed Use Retail Other Has your firm provided services on a LEED project? Yes If Yes, list the 3 most recent: 1. Has your firm provided services on a Building Information Modeling Yes No project? If Yes, list the 3 most recent: 2. If YES to any of the following, submit details on a separate page. Has your firm ever failed to complete a contract? Yes No Has your firm ever been involved in bankruptcy or reorganization? Yes No Yes Has your firm ever had pending judgment claims or suits against it? No

Has your firm ever been assessed liquidated damages on any project?



Yes

No



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Section III – References

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	es with contact name, phone number, and address:
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ist 3 recently completed projects of Project Name & Location	
Project Contact	
Contract Amount	
Architect/Engineer	
Project Name & Location	
Project Contact	Contact Phone
Contract Amount	
Architect/Engineer	Campulation Data
	Completion Date
	Completion Date
	Completion Date Contractor
Project Name & Location	Contract Dhave
Project Name & Location Project Contact	Completion Date Contractor Contact Phone
Project Name & Location	Contract Dhave





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Section IV – Terms and Conditions

All Subcontractors and Vendors must review the Scorpio subcontract documents before submitting a bid. By submitting a bid, each subcontractor acknowledges that he or she has reviewed the subcontract documents or that they waive the opportunity to review said documents, and in any event, the Subcontractor consents and agrees to be bound by the terms thereof.

If being considered for contract award, Scorpio reserves the right to request a copy of your last two (2) fiscal year-end financial statements. A current interim financial statement may also be requested if the last fiscal year end is over six months old.

I understand that the contents of this application will be considered confidential and used solely to determine my firm's qualifications. I hereby certify that the information provided herein is true and complete to the best of my knowledge.

Signature	
Name	
Title	
Date	

