



JHC COMMERCIAL, LLC | COMMERCIAL CONSTRUCTION | CCB# 158061

JHC GENERAL, LLC | MULTI-FAMILY CONSTRUCTION | CCB #169493

**SUBCONTRACTOR QUALIFICATION FORM**

It is our policy before we use quotes or sign subcontracts to ask subcontractors to submit this qualification form. This enables us to categorize subcontractors within their trade by types and sizes of contracts they can handle.

**1. SUBCONTRACTOR IDENTITY**

Type of work:

Company name:

Address:	City:	State:	Zip:
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Phone #:	Fax #:	Tax I.D. or SS #:
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Oregon CCB #:	Washington CCB #:
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Contact Person:	Cell #:
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Email Address:	Total number of employees:
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Type of Company:  Sole proprietorship  Corporation  Partnership    Date formed:

State(s) in which the company is licensed to do business:

Names and title of key people in company:

Has the company operated under any other name in the past five years?     Yes  No

If yes, give name(s):

Does the company have offices, plants, or warehouses at other locations?     Yes  No

If yes, give addresses:

**2. MBE/WBE/SBE CERTIFICATION**

Is the company a certified Minority Business Enterprise (MBE), Women Business Enterprise (WBE), Small Business Enterprise (SBE), or any other type of certified business enterprise?  Yes  No

If yes, which type?	Certifying agency:
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**3. BANK REFERENCE(S)**

Financial Institution(s) name/address/phone:

**4. BONDING CAPACITY**

Do you have bonding?  Yes  No (if yes, give details)

Single project limit:	Aggregate limit:
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Bonding company name/address:

Bonding agent name/address/phone number:

**5. COMPLETED PROJECTS (Summarize representative projects completed in past five years.)**

Name of Project	Scope of Work	Contract Amount	Completion Date

<b>6. TRADE REFERENCE (You must list three of your subcontractors or suppliers)</b>			
Name	Phone #	Fax #	Contact Name
<b>7. CLIENT REFERENCES (You must list three clients. Preferably General Contractors.)</b>			
Name	Phone #	Fax #	Contact Name
<b>8. INSURANCE: DO NOT send certificates, check the boxes and list limits.</b>			
Does your company carry General Liability & Auto Liability Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>LIMITS: General Liability: \$</b>		<b>Auto Liability: \$</b>	
Does your company carry Workman's Compensation Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>9. OTHER INFORMATION</b>			
Has your company or any of its key people been a party to a bankruptcy or reorganization proceeding? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give date:			
During the past five years, have any liens been filed against you by any of your subcontractors or suppliers? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details for any and all liens over \$5,000:			
Have you ever failed to complete a contract, been defaulted or had a contract terminated? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details:			
In the past five years, have you had liquidated damages assessed against you upon completion of a project? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details:			
In the past five years, has your company or any of its key people been involved in any lawsuits arising from construction projects? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details:			
In the past five years, has your company or any of its key people been investigated for or found to have committed a violation of any labor laws? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details:			
In the past five years, has your company or any of its key people been investigated for or found to have committed a serious OSHA violation? <input type="checkbox"/> Yes <input type="checkbox"/> No WISHA Violation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details:			
Do you have a written company Safety Program? <input type="checkbox"/> Yes <input type="checkbox"/> No *** A copy of your written safety program and copies of all applicable MSD sheets will be required at time of contracting with JHC. ***			
In the past five years, has your company or any of its key people been investigated for or found to have committed a violation of state, federal, or local environmental protection laws? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, give details:			
If you have any other information that you would like to give us, please attach.			