

Contractor's Questionnaire

1. Introduction

Contractor's Name		Fede	eral Tax ID#_		
Address					
Telephone	Fax #_		E-Mail		
Type of Organizati	ion: Corporation	n Partnershi	p Sole I	Proprietorship	_LLC _
Other (Please speci	fy)				
If Corporation, hav	ve Stockholders Electo	ed to be Consider	red a		
"Sub Chapter 'S' C	forporation? Yes	No			
Date Business Fou	nded	Date Incorpor	ated?		
List All Stockholde	ers/Owners and Key P	ersonnel in Your	Business		
Name & Address	Spouses Name	Title/ Position	% of Ownership	Date of Birth	Social Security Number
Are All Stockholders/C	Owners Actively Invo	lved in the Busin	ess? Yes	No	
(If No, Please Explain)					

List Affiliated, Subsidiary or Related Companies in Which This Firm or Its Stockholders/Owners Have Interest

Name & Address	% of Ownership	Scope of Operations
	_	

2. Financial Data

What is Your Fiscal Year End?
Who Prepares Your Fiscal Year End Financial Statements?
Telephone #
Do You Have Interim Financial Statements Prepared? How often?
What Method of Accounting is Used in Preparing Statements? Completed ContractAccrual % of CompletionOther (Please Explain)
On What Basis of Accounting are Taxes Paid? Completed ContractAccrual % of CompletionCash
Who is Responsible for Bookkeeping? Prepared Manually Computer
How Long With Firm? How Many Years of Experience?

Who is Responsible for Estimating?
Prepared ManuallyComputer
How Long With Firm? How Many Years of Experience?
Provide a Brief Description and Purpose of Inventory Shown on Financial Statement
Do Any Financial Statements Make Reference to Real Estate Owned Other Than Buildings Used to House the Construction Co.? Yes No (If Yes, Briefly Describe)
Have Operations Been Profitable Since Financial Statement Date? Yes No (If No, Please Explain) Have Changes Occurred Since Statement Date Such as Acquisition of Additional Equipment, Purchase of Fixed Assets, Loans To Officers, Investments, Withdrawals or Dividends that Would Significantly Affect Financial Condition of Contractor? Yes No (If Yes Briefly Describe)
Are Any New Ventures Contemplated? Yes No (If Yes Please Describe)
Has Your Business Been Audited By the IRS? Yes No Year?
Are Your Taxes Current? Yes No
Is a Buy-Sell Agreement in Effect? Yes No (f Yes, Please Attach a Copy)
In the Event of an Owners Death, Is a Plan in Effect to Complete All Uncompleted Work? Yes No (if Yes, Please Describe)

Life Insurance

Insured	Amount	Beneficiary	Insurer	Cash Value

State Limits and Carrier of Liability and Compensation Insurance	
With Whom Do You Bank?	
Address	
Telephone	
Name of Officer(s) With Whom You Deal	
Do You have an Established Line of Credit? Yes No	
How Much? \$	
What Was Given as Collateral to Secure This Line of Credit?	
Do You Currently Have an SBA Loan? Yes No	
(If Yes Which Bank?)	
Original Balance \$ Current Outstanding Balance? \$	
Are Payments Current?YesNo	

List Suppliers From Whom You Buy Most of Your Materials:

Name/ Contact Person	Complete Mailing Address	Telephone
1.		
2.		
2.		
3.		
4.		

5.			<u> </u>	
3. Scope of Operation				
Type of Construction Specialty:				
What Other Class of Bu	siness Do You H	Iandle?		
Territory				
How many Employees	do you have?	Work Crews? _		
A. % Work Done For F	Federal	% Public % I	Private %	6
B. What % of Work is a	as: Prime	% Sub	%	
C. What % of average j	ob is: Materials _	% Subcontracto	ed to others	_ %
D. Are Bonds Required	I for Subcontracto	ors? Yes No		
When?	What Trac	les?		
Largest Contracts Complete	ed Within Last 5	Years		
Owner or General Contractor Ma	niling Address	Phone Contact Person	Contract Amount \$	Date Completed
1.				
2.				
3.				
4.				
5.				
Princ	eipal Subcontract	ors You Have Used in	the Past 2 Years	
Company /Mailing Address		Phone Contact Person	Type of Work Contract Amount \$	Date Completed
1.			*	

2.				
3.				
Largest Previous	s Job \$			
Largest Previous	s Cost to Complete: #jobs	\$	Yea	ar
How Many Con	tracts do You Normally Have	e Underway At Any (One Time:	
#jobs	\$			
What Is The Lar	gest Single Contract Your C	ompany Can Best Ha	ndle \$	
What Is the max	imum Cost to Complete Tha	t Your Company Can	Best Handle	#jobs \$
In What Radius	(Miles) Can Your Company	Operate Best?		Miles
The Following (Questions Pertain To the Late	est Uncompleted World	k On Hand. E	Explain Any "Yes"
Answers.				
Are Any	More Than 10% Low Y	Yes No		
A A	During An Dahim d Calendala	N N.		
Are Any	Projects Behind Schedule	Yes No		
Are The	re Any Delays or Disputes	Yes No		
Any In P	enalty Yes No			
How Much of Y	our Equipment is: Owned	% Leased	%? (Please at	ttach equipment list.)
4. Bonding Hist	tory			
Name All Surety	y Companies With Whom Yo	ou Have Dealt and the	Reason For	Change
Surety Company		Amount of Bonding Credit	Year	Reason For Change
			I	

Reason For Changing Sureties At This Time
Has Bond Application Ever Been Denied? Yes No (If Yes, Please
Explain)
Have You Ever Caused a Surety to Pay a Claim? Yes No (If Yes Please Explain)
Are Any Mechanics Liens, Judgments, Law Suits or Claims Pending on Completed or
Uncompleted Work? Yes No
If Yes, Give Details
BOSS Bonds and its agents are authorized to verify any information contained herein including but not limited to my credit and employment history and to request, obtain and use credit information on me/us in the processing of my/our application. This document, or any photocopy hereof, hereby authorizes any third party to furnish to BOSS Bonds Insurance Agency, LLC and it agents with complete consumer credit reports. THE UNDERSIGNED CERTIFY THAT THE INFORMATION CONTAINED ON THIS FORM HAS BEEN CAREFULLY REVIEWED AND THAT IT IS TRUE AND CORRECT IN ALL RESPECTS
Date:
Firm Name:
SIGN HERE X