

CONTRACTOR QUESTIONNAIRE

CONFIDENTIAL

We welcome the opportunity to secure bonding credit for you. Every question is important; please answer each one.

Business Name:	_____
Address:	_____
City:	_____ County: _____ State: _____ Zip Code: _____
Telephone #(s):	_____
Name of Contact:	_____

General Information

Business Structure: Corporation Partnership Proprietorship Sub Chapter S Corporation

Type of Construction Performed: _____ Union Non-Union

Geographical Area of Operation: _____

Licensed to do Business in the following States: _____

How many employees: Field? _____ (How many work crews? _____) Office? _____

Our contracts are with: General Contractors _____ % Directly with owner _____ % Subcontractors _____ %

What trades do you perform? _____

Percentage of work normally subcontracted to others: _____ % What trades are subcontracted? _____

When do you secure subcontracted bonds? _____

Do you ever engage in Joint Venture contracts? Yes No

How often are you required to provide bonds? Frequently Occasionally Rarely

Date when last performance bond was provided: _____

History

Date Business Established: _____ Date of Incorporation: _____ State of Incorporation: _____

Name of Predecessor Company: _____

When did current management assume control? _____

Organization/Owner and Key Employees

List all officers and owners

Name, Home Address (Include City & State)	Position	% of Stock	Year of Birth	Citizenship
1		%		
2		%		
3		%		
4		%		
5		%		
Years of Experience Here Other	Social Security #	Home Phone #	Spouse's Name	
1				
2				
3				
4				
5				

Are the owners personally involved on this business? Yes No

Are any of the officers, stockholders, owners or any companies that they have a financial interest in currently engaged in or expected to engage in any form of real estate investment, development, building or any other form of speculative venture?

Yes No If yes, describe: _____

In additional contracting, what other business activities are you engage in or intend to engage in? _____

Parent, Affiliates and/or Subsidiary Companies

List all subsidiaries, affiliates and/or predecessors, companies in which this firm or its stockholders have an interest in and/or indemnify or guarantee for:

Name	Location	Owned By	Scope of Operations

Continuity/Job Completion

Is there a formal Buy-Sell Agreement in place? Yes No

If yes, attach a copy. How is the Buy-Sell Agreement funded? _____ Who is the Buy-Sell between? _____

If no Buy-Sell is in effect, is a Will in effect which addresses how ownership is to change? Yes No

What arrangements have been made to assure contracts are completed in the event of the death or disability of the owner(s)?

What incentives are given to the key employees to follow through (bonuses, profit sharing, etc.)? _____

Bank

Name/Address	With Since	Name of Loan Officer	Telephone #

Working Line of Credit: \$ _____ Expiration Date: _____ Amount of Working Line of Credit Currently in Use? \$ _____

Is there a formal Buy-Sell Agreement in place?

- Unsecured Accounts Receivable Inventory Personal Endorsement
 Contract Rights Equipment Real Estate

Job Experience

Largest Single Job Completed in last 5 years: \$ _____ Year _____
 Largest amount of Uncompleted Work: \$ _____ Year _____
 Largest Single Job Ever Completed: \$ _____ Year _____
 Largest Amount of Uncompleted Work Ever Contemplated: \$ _____ Year _____

Average Single Job: \$ _____ Average Amount of Uncompleted Work: \$ _____
 Bond Line Desired: Single Job: \$ _____ Total Amount of Uncompleted Work: \$ _____

List the five largest jobs completed in the last five years:

Job Description:			
Contract was with:			
Address:		Telephone #:	
Contract Price: \$		Amount of Profit \$	
Year Completed:		Name of Surety:	
Architect/Engineer:			
Address:		Telephone #:	

Job Description:			
Contract was with:			
Address:		Telephone #:	
Contract Price: \$		Amount of Profit \$	
Year Completed:		Name of Surety:	
Architect/Engineer:			
Address:		Telephone #:	

Job Description:			
Contract was with:			
Address:		Telephone #:	
Contract Price: \$		Amount of Profit \$	
Year Completed:		Name of Surety:	
Architect/Engineer:			
Address:		Telephone #:	

Job Description:			
Contract was with:			
Address:		Telephone #:	
Contract Price: \$		Amount of Profit \$	
Year Completed:		Name of Surety:	
Architect/Engineer:			
Address:		Telephone #:	

Job Description:			
Contract was with:			
Address:		Telephone #:	
Contract Price: \$		Amount of Profit \$	
Year Completed:		Name of Surety:	
Architect/Engineer:			
Address:		Telephone #:	

References

List your five major suppliers/subcontractors:

	Name/Address	Phone #	Contact
1			
2			
3			
4			
5			

Accounting and Financial Reporting

Name/Address (Include City & State) of Accounting Firm	Name of Accountant	Telephone #

This Accounting Firm is CPA Public Accountant Independent Internal Other _____

How many years has this firm prepared your financial statements? _____ Tax Returns? _____

Date of Your Fiscal Year-End: _____

Do you have a full time accountant on staff? Yes No

If yes, name of staff accountant: _____ Employed for (# of years): _____

What year was your last IRS audit? _____ Results: _____

Have your operations been profitable since the last statement date? Yes No

Since the last statement date, have there been any major changes in your financial condition such as changes in ownership, major loans or refinancing, major equipment purchases or leases, withdrawals or other? Yes No

If yes, please explain: _____

Life Insurance/Corporation as Beneficiary

Name of Insured	Amount	Insurance Company

Other Insurance Data

	Insurance Company	Policy Expiration Date
General Liability Insurance		
Pollution Liability Insurance (if applicable)		
Worker's Compensation Insurance		
Professional Liability Insurance		

Bonding Information

Name of Prior Sureties: _____

Name and address if Present Surety: _____

How long have you been with your present Surety? _____ Reason for Changing? _____

As an inducement for bonding, are you currently providing: Personal Indemnities Additional Corporate Indemnities Collateral

Are all owners and their spouse(s) willing to personally indemnify the surety? Yes No

Have you been turned down by your present or prior Surety? If yes, please attach an explanation. Yes No

Has your company or any officer of any partner ever caused a loss to a Surety? If yes, please attach an explanation Yes No

Attorney

Name of Address (Include City & State) of Law Firm	Name of Attorney	Telephone #

Is your firm or any of its owners or officers currently involved in any litigation? Yes No

If yes, please have the attorney, on his/her letterhead, briefly explain the nature of the litigation and its current status

Suits/Judgments/Defaults and Contingent Liabilities

Has your company or any officer or any partner ever filed bankruptcy or otherwise compromised with your creditors? Yes No

Has your company ever failed to qualify for a bond after an award? Yes No

Has your company ever failed to complete a contract? Yes No

Have any Mechanics Liens been filed on your work? Yes No

Has your bond credit ever been terminated by a surety? Yes No

Is your company, any affiliated, any subsidiary, or any other company you now own or did own in a Surety's Claim Department? Yes No

Are you acting as surety or bondsman for others? Yes No

Are you acting as endorsers for others on their notes or accounts? Yes No

Does your company or any officer or partner owe any money to a bonding company? Yes No

Are Federal, State and Local taxes for your company and all officers or partner current? Yes No

Has you company, or any officer of partner, ever required any financial assistance or borrowed any money from a bonding company? Yes No

This application consists of this instrument, the financial statement(s) and all indemnity, security and trust agreements signed by the applicant with regard to the bond(s) requested, such financial statement and agreements being incorporated herein be reference. In addition to routing verification of information pertinent to the bond(s) applied for, if the application is by an individual primarily for the benefit of a corporation and the said application is also executed for the officers of the corporation in a personal, not a corporate capacity, thereby acting a co-guarantor thereof, the bonding company or its authorized representative may have an investigative consumer report made including information bearing on the character, general reputation, personal characteristics or mode of living of said Individual(s), and, upon written request of said individual(s), will disclose in writing the nature and scope of the investigation requested, if such investigative consumer report is in fact secured.

The representations contained in this instrument, the financial statements and all other forms provided are warranted by the applicant to be true. Such representations are made as material inducements to be relied upon the surety and its authorized representative in issuing bond(s) requested. Any person who knowingly and with intent to injure, defraud, or deceive any Insurer files a statement of claim or an application containing any false ncomplete or misleading information is subject to criminal and civil penalties and is guilty of a felony of the third degree.

Date Signed _____

Subscribed and sworn before me this
_____ day of _____ 20____

Notary Public

Name of Firm

Signature (If corporation, signature of Secretary & President) SEAL

Signature

RESUME

Individual: _____ Home Address: _____

City, State, Zip: _____ Telephone: _____

PERSONAL DATA

Date of Birth: _____ Social Security #: _____

Driver's License: _____ Marital Status: _____

Spouse's Name: _____ Spouse's Employer: _____

(Name, address, position and length of employment)

EDUCATION

Did you graduate from high school? Yes No

College - _____ to _____

SPECIAL EDUCATION RELATING TO CONSTRUCTION AND/OR TO YOUR TYPE OF PROFESSION:

BUSINESS AND PROFESSIONAL EXPERIENCE RELATING TO CONSTRUCTION AND/OR YOUR TYPE OF PROFESSION: Indicate firm name, length of time employed, occupation, largest project in which you were involved and reason for leaving.

PERSONAL REFERENCES: Name, address, phone number, length of time acquainted.

CONTRACTOR'S CUSTOMER REFERENCE

APPLICANT'S/PRINCIPAL'S NAME: _____
NAME OF CUSTOMER: _____
CONTRACT NAME: _____
TELEPHONE NUMBER(S): _____
SPOKE TO: _____ DATE: _____
LEFT MESSAGE _____

QUESTIONS:

1. What type of work did the Contractor do for you?
A. New Construction
 Remodel, Renovation, Rehabilitation
 Tenant Improvement
 Other _____
- B. What trade: _____
(Example: electrical, concrete, framing, etc.)
- C. Description: _____
2. Was the project: Commercial Individual Residential Public
3. How many projects has this Contractor completed for your company? If more than one, over how many years? _____

4. How much was the largest job? \$ _____
5. Approximately how much was the contract(s) for? \$ _____
 Confirmed amount from application
6. When was the project(s) completed? If not, when will it be completed (date?) Month/Year _____
7. How was the quality of his/their work? _____

8. Were there any problems with the job? _____

9. Did he/they have any subcontractors? _____

10. Who supervised the job for the contractor? Name/Title: _____
11. Was supervision adequate? _____
12. Would you hire him/them again or recommend him/them to anyone? _____

Form completed by: _____ Date: _____

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CONTRACT NAME: _____
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Form completed by: _____ Date: _____

SUPPLIER REFERENCE

Date: _____

To: _____

RE: _____

Dear Sir/Madam:

We are considering a bond request for the above captioned account and would appreciate the following information from your records. Thank you!

Account Since: _____

High Credit Extended: _____

Balance Owing: _____

Currently Due: _____

Past Due: _____

(in days and amounts)

Terms: _____

Special Conditions attach to account: _____

General Comments: _____

Your Signature: _____

Printed Name: _____

Title: _____

SUPPLIER REFERENCE

Date: _____

To: _____

RE: _____

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Financial Statement Requirements

PRESENT THIS INFORMATION TO YOUR ACCOUNTANT

All Year-End and Interim Statements must include:

- Cover letter of accountant (on their letterhead) describing the scope of their work. In the case of the company's first financial statement, the preparer's cover letter must contain information outlining when the business started, the date of the year-end, and comments (if applicable) concerning any affiliated companies still in existence or recently discontinued.

- Balance Sheet
- Income Statement
- Statement of Cash Flow
- Footnotes

BONDS UP TO \$99,999.99

Compiled year-end and six-month interim financial statements are required.

BONDS OF \$100,000.00 TO \$499,999.99

Reviewed year-end financial statements are required. The six-month interim financial statement may be either audited or reviewed.

CASH BASIC FINANCIAL STATEMENTS ARE NOT ACCEPTABLE.

SAMPLE BANK LETTER (Short Form)

Attention: Bond Department

Gentlemen:

We have been handling _____ banking and
(Name of Contractor or Client)
credit relations for _____ year(s).

We have established a signature line of credit of \$_____ with our only
collateral being the signature of the corporate officers.

Under proper needs situation, we would entertain loaning additional funds in excess of our
open line in the amount of \$_____ with our security _____
_____.

Our relationship with this firm has been _____ and we consider them
a(n) _____ customer.

Sincerely,

(Name and Title)

[If a formal line of credit has not been established, the bank letter should indicate the willingness to bring into existence a line of credit as well as describing the banking and credit relations.]

BANK LETTER-LONG FORM

Dear _____

_____ is pleased to offer a revolving credit facility to _____
(Bank) _____ in accordance with the following provisions:

Borrower: _____ (Borrower) _____ a corporation having its principal office
in _____.

Amount: _____

Purpose: Expansion of trading assets

Term: Thirteen (13) months

Interest Rate: _____ Bank's Prime Rate plus _____ % to change as and when
changes occur in such prime rate. Interest will be payable monthly in arrears and will be calculated
on the basis of actual days elapsed divided by a 360-day factor.

Payment: Any time during the thirteen (13) months of this revolving credit, the full amount can be borrowed,
repaid and borrowed again. A 30-day consecutive payout period will be required annually.

Fees: A _____ percent or _____ will be payable annually.

Expenses: The Borrower will pay all expenses and costs in connection with this loan.

Guarantors: The loan will be unconditionally guaranteed joint and severally by _____

Principal Covenants: Borrower will:

- A) Provide _____ (Bank) with a company prepared quarterly financial statement, in conformity with generally accepted accounting principles applied on a consistent basis, within 45 days of the end of such quarter. In submitting financial statements to _____ (Bank) an authorized officer of the Borrower will certify continuing compliance with all representations, warranties and covenants contained herein and will also certify that they are not in violation or default with any other agreement or contract.
- B) Provide _____ (Bank) with an annual financial statement in conformity generally accepted accounting principles applied on a consistent basis, within 90 days of fiscal year and prepared and certified by a CPA acceptable to _____ (Bank) in submitting financial statements to _____ (Bank) an authorized officer of the Borrower will certify continuing compliance with all representations, warranties and covenants contained herein and will also certify that they are not in violation or default with any other agreement or contract.
- C) Provide _____ (Bank) with job status reports as requested by the Bank.
- D) Maintain consolidated net working capital of _____ and current ratio of at least _____
- E) Maintain a consolidated tangible net worth of at least \$ _____ through fiscal year end. Consolidated tangible net worth shall mean the aggregate amount of assets shown on the consolidated balance sheet of Borrow at any particular date (but excluding from such assets capitalized organization and development costs, capitalized interest, debt discount and expense, goodwill, patents, trademarks, copyrights, franchises, licenses, amounts due from officers, employees, directors, stockholders and affiliated, and such other assets as are properly classified "intangible assets" under generally accepted accounting principles) less liabilities at such date, all computed in accordance with generally accepted accounting principles applied on a consistent basis.

- F) Maintain consolidated total liabilities at a level not exceeding _____ of Consolidated tangible net worth.
- G) Maintain and preserve its Corporate existence and all rights, privileges, franchises and other Authority for the conduct of its business.
- H) Maintain its properties and facilities in good order and repair.
- I) Maintain insurance with responsible insurance carriers against such risks and in such Amounts as is customarily carried by similar businesses.
- J) Pay and discharged all taxes, assessments and governmental charges in a timely manner, except those being contested in good faith.

SCHEDULE OF UNCOMPLETED WORK (ALL WORK - BONDED & UNBONDED - IF COST PLUS PLEASE INDICATE)

NAME OF CONTRACTOR		DATE AS OF							
OBLIGEE - PERSON TO CONTACT - PHONE	STARTING DATE	COMPLETION DATE	Bonded	Un-Bonded	CONTRACT PRICE (Including Approved Change Orders)	Contractors Est. Cost When Bid (Including Cost of Approved Change Orders)	Total Billed to Date including Retainage (Explain any Dispute Items)	TOTAL COST TO DATE	TOTAL REVISED ESTIMATED COST TO COMPLETE
OBLIGEE _____ Contact _____ Phone _____ Project _____									
OBLIGEE _____ Contact _____ Phone _____ Project _____									
OBLIGEE _____ Contact _____ Phone _____ Project _____									
OBLIGEE _____ Contact _____ Phone _____ Project _____									
OBLIGEE _____ Contact _____ Phone _____ Project _____									
OBLIGEE _____ Contact _____ Phone _____ Project _____									
OBLIGEE _____ Contact _____ Phone _____ Project _____									
TOTALS									
TOTAL UNCOMPLETED WORK:						SIGNATURE			
TOTAL UNCOMPLETED WORK BY SUBCONTRACTOR:						TITLE			
BONDED:						REMARKS			
UNBONDED:									

ATTACHED ADDITIONAL SHEETS IF NECESSARY