Subcontractor Prequalification Questionnaire

SEA WEST ENTERPRISES, INC.

Items listed with a red *asterisk are to be submitted with the completed Prequalification

Section 1 - Company Information

Company Name									
Company Type	Sole Proprietor		Joint Venture		LLC		Corporation		Parnership	
DBA						*FEIN No.			
Years In Business	How Many Years Has The Company Operated Under The Present Name								
Physical Address									
Mailing Address									
Contact Name				Title					
Phone Number				Email					
*CSLB Number			Classification(s)						
Trades									
DIR Registration	Yes		No		DIR No.		Union		Open Shop	
Work Type	Public Works: Yes		No		Private Works: Yes		No		
Classification	DVBE	/ MBE	/ WBE	/ SBE	/ DBE	/ Other			
Annual Revenue	2021 $		2020 $		2019 $				
Contract Range	Smallest Job $		Largest Job $						
Worker's Comp Experience Modifier Rate If your 3-year average is higher than 3.50, attach an explanation	2022		2021		2020				

Section 2 - Bonding Information

Able to Bond: Yes	No	Single Project $	Aggregrate Limit $
Bonding Rate %	In the past 5 years have you failed to complete a project Yes	No	
In the past 5 years have you had any litigation proceedings or any pending lawsuits Yes	No		
If yes, explain:			

Section 3 - Insurance Requirements / Subcontract Agreement

Can you meet our insurance requirements (see attached sample): Yes No

Please review the attached Subcontract Agreement. If your bid is selected are you able to execute our Subcontract Agreement without modifications Yes No

Section 4 - Supplier References

	Supplier Name	Email Address	Phone Number	Terms
1				
2				
3				

Section 5 - General Contractor References

	Company Name	Email Address	Phone Number
1			
2			
3			

I certify the information provided in this Subcontractor Prequalification is true and accurate.

Signature: _____ Name/Title: _____

Date: _____ (Must be signed by an Owner or Officer)