



SUBCONTRACTOR AND VENDOR QUESTIONNAIRE

Return to:
John Hyland Const., Inc.
P.O. Box 7867
Springfield, OR 97475
Tel 541.726.8081 - Fax 541.741.0896
Email: heidi@jhconst.com

A completed Questionnaire is required to be submitted with your bid unless it was submitted in the previous 12 months and there have been no significant changes in ownership or operations.

1. General Information

Name of Business: _____
Street Address: _____
City, State, Zip: _____
Mailing Address: _____
Telephone: _____ Fax: _____
Website: _____
Contact for Bidding: _____ E-mail: _____

2. Licenses

Type of License or Number	Federal or State	Number
Federal Employer Identification Number	Federal EIN	
OR Construction Contractors Board License	Oregon (CCB)	
WA Construction Contractors Registration	Washington (L&I)	
Other:		

3. Organization

C-Corporation S-Corporation LLC Partnership Joint Venture LLP Sole Proprietor
Where incorporated or formed? _____ Date founded? _____
Previous business names and years operated? _____
Name of parent company, if any, and headquarters location? _____
Other businesses owned or controlled by your firm, its officers or principals? _____

Owners, Officers and Principals:

Name and Title	Years with Company	Percent Ownership

Small Business Concern as defined by the SBA? Yes No
(Visit www.sba.gov/size for Small Business Size Standards.)

Currently MBE, WBE, DBE, or ESB Certified? Yes No

4. Legal Information

Has your firm, its officers or principals been involved in any bankruptcy or reorganization proceedings, failed to complete any work awarded to them, defaulted, or had a contract terminated for cause within the last five years? If yes, explain: _____

Are there any judgments, claims, lawsuits, arbitration or mediation proceedings currently pending or outstanding against your firm, its officers or principals? If yes, explain: _____

Has your firm, its officers or principals filed any claims, lawsuits, arbitration or mediation proceedings with regard to construction contract within the last five years? If yes, explain: _____

5. Revenue

Projected revenue for this year and next year? 20____ \$ _____ 20____ \$ _____
Revenue for the last three years? 20____ \$ _____ 20____ \$ _____
20____ \$ _____

Largest individual contract completed in each of the last three years?

20____ \$ _____ Contracted with/Description _____
20____ \$ _____ Contracted with/Description _____
20____ \$ _____ Contracted with/Description _____

Are key supervisory personnel on these projects still with your firm? [] Yes [] No – Attach explanation
Preferred contract size? \$ _____ Current Backlog? \$ _____

6. Experience

Attach a list of your Current (Work In Progress) major contracts.

Provide project name, location, owner, general contractor, contract amount, scope of work, start date and scheduled completion date. Include contact names and telephone numbers.

Attach a list of Completed (within last 5 years) major contracts.

Provide project name, location, owner, general contractor, contract amount, scope of work, start date and completion date. Include contact names and telephone numbers.

Contracts with John Hyland Const., Inc. within the last five years, if any? _____

Identify contract and building types your firm has worked with: [] Athletic [] Correctional
[] Cultural/Museum [] Destination/Hotel [] Educational [] Government [] Healthcare
[] High Tech/Labs [] Industrial [] Office [] Parking Facilities [] Renovation [] Residential
[] Transportation [] Design Assist [] Design/Build [] Guaranties Maximum Price

Describe your firm's design and/or in-house engineering capabilities, if any: _____

7. Safety

Workers' Compensation Experience Modification Rate (EMR) for the last five (5) years?

20__ EMR:____; 20__ EMR:____; 20__ EMR:____; 20__ EMR:____; 20__ EMR:____

If any EMR above is **greater than 1.00**, explain cause and remedial action implemented:

Do you have a written safety program? _____ Do you require yours subs to have a written safety program?

Any OSHA (Federal or State) Serious, Willful, and/or Repeat violations within last five (5) years? If yes, explain:

Any EPA (Federal or State) violations within last 5 years? If yes, explain:

Provide the following information (similar to OSHA Form 300A) for the last five (5) years:

Year	Average Number of Employees	Total Hours Worked	Number of Deaths (G)	Number of Cases			Number of Days	
				Days Away from Work (H)	Job Transfer or Restriction (I)	Other Recordables (J)	Days Away from Work (K)	Job Transfer or Restriction (L)

8. References

Banking – Bank Name & Branch _____

City, State, Zip _____ Since? _____

Contact Person _____ Telephone _____

Credit Line Amount \$ _____ Amount Available \$ _____ Expiration Date _____

UCC Filing? _____ How is credit secured? _____

Bonding – Bonding Company _____

Since? _____ Surety Broker/Agent _____

Since? _____ Contact Person _____

Telephone _____ Bonding Capacity – Per Project \$ _____

Aggregate \$ _____ Last Bond Issued – Date _____, Amount \$ _____

Type _____, Rate _____%

Persons or entities that provide indemnification to Surety _____

Insurance – General Liability Carrier _____

Since? _____ Insurance Broker/Agent _____

Since? _____ Contact Person _____ Telephone _____

Dun & Bradstreet – D&B Number _____ D&B Rating _____ Date of Rating _____

Suppliers:

A. Supplier Name & Location _____

Contact Person _____ Telephone _____

B. Supplier Name & Location _____

Contact Person _____ Telephone _____

C. Supplier Name & Location _____

Contact Person _____ Telephone _____

Contractors:

A. Contractor Name & Location _____

Contact Person _____ Telephone _____

B. Contractor Name & Location _____

Contact Person _____ Telephone _____

C. Contractor Name & Location _____

Contact Person _____ Telephone _____

9. Financial Information

****** IMPORTANT NOTE******

Please provide a COMPLETE copy of your firm's latest Audited or Reviewed year-end Financial Statements (Balance Sheet, Income Statement, Cash Flow Statement, etc.) with Accountants' Report including all footnotes.

Prequalification and/or evaluation of your firm cannot be completed without this information. Access to your firm's financial information will be restricted to John Hyland Const., Inc. personnel directly involved with the prequalification and/or evaluation of your firm.

10. Additional Information

Provide any additional information that you feel will help us determine your qualifications:

The undersigned warrants and represents that the information provided herein is complete and accurate in all respects and explicitly authorizes the references identified herein to provide any additional information requested by John Hyland Const., Inc. that it may require to complete its prequalification and/or evaluation process.

Company Name: _____

Prepared By: _____ **Title:** _____
(must be an officer or principal of the Company)

Signature: _____ **Date:** _____