



3325 Landco Drive
Bakersfield, CA 93308
(661) 327-1436 Fax (661) 327-8865

Subcontractor Prequalification

Company Name: _____
Address: _____
Contact Name: _____ Title: _____
Phone Number: _____ Fax: _____
Email Address: _____ Website: _____
License #: _____ License Type: _____

List the trades you normally perform with your own forces:

CSI #	Description
_____	_____
_____	_____
_____	_____
_____	_____

Is your Company? MBE WBE DBE Section 3

How many people does your Company presently employ?
Office _____ Field Supervisory _____ Trades People _____

Owner References: (Company, Contact, Phone Number):

1. _____
2. _____
3. _____

Project References: (Project, Contact, Phone Number):

- 1. _____
- 2. _____
- 3. _____

Bonding Yes No

Insurance

<u>General Liability Carrier</u>	<u>Limits</u>	<u>AM Best Rating</u>
_____	_____	_____

Worker's Compensation Carrier

To be completed by Wallace & Smith

Information verified by: _____
Date: _____
Notes: _____
