



CONTRACTOR BOND PREQUALIFICATION PACKET

CHECKLIST OF ITEMS:

Contractor's Questionnaire completed and dated.

Supplementary Application

Consent to Credit completed and signed. * Note a personal credit check will be obtained on each principal owner of the business. This is a "soft" pull and does not adversely affect the credit score.

Business Financial Statements as of the most recent fiscal year end prepared using the accrual basis of accounting. Financials should include at a minimum: Balance Sheet

Income Statement

Aging Schedule for Accounts Receivable

Aging Schedule for Accounts Payable

Business Financial Statements as of the most current available (If the fiscal year end has been over 6 months ago)

A current **Work In Progress Schedule** – Sample Form Attached

A current **Personal Financial Statement** for each principal owner of the business - Sample Form Attached

Bank Reference Letter or Copies of most recent bank statements to verify cash balances and Line of Credit details, if applicable

Resumes on owner(s) and key personnel

Copy of current **Insurance Certificate(s)**

This is the basic information required. The surety may ask for additional information and/or documents upon review and evaluation.

CONTRACTOR QUESTIONNAIRE

1. Name of Firm: _____

2. Address: _____ 3. Fiscal Year End _____

_____ (City) _____ (State) _____ (Zip)

4. Phone: (____) _____ 4a. Fax: (____) _____

5. Contracting Specialty: _____

6. Contact Person: _____ 7. Title: _____

8. Year Business Started: _____ 9. Type of Business: Corp Part. Prop. Sub S. Corp.

10. State of Incorporation: _____ 11. Area of Operation: _____

12. List the corporate officers, partners or proprietors of your firm:

	<u>Name</u>	<u>Yr. of Birth</u>	<u>Position</u>	<u>Percent Owned</u>	<u>Name of Spouse</u>
A.	_____	_____	_____	_____	_____
B.	_____	_____	_____	_____	_____
C.	_____	_____	_____	_____	_____
D.	_____	_____	_____	_____	_____
E.	_____	_____	_____	_____	_____

13. Will the above individuals and spouses personally indemnify Surety? Yes No

If no, explain:

14. Is there a buy/sell agreement among the owners of the business? Yes No

15. Is this agreement funded by life insurance? Yes No

16. Corp. Indemnity? Yes No

17. Cross/Corp Indemnity? Yes No

18. How many people does your firm employ? _____ 19. How many work crews? _____

20. Has your firm or any of its principals ever petitioned for bankruptcy, failed in business or defaulted so as to cause a loss to a Surety? Yes No

If yes, please explain: _____

21. Is your firm or any of its owners or officers currently involved in any litigation?

Yes No. If yes, explain: _____

22. What percentage of the firm's work is normally for:

Government Agencies _____% Private Owners _____%

23. What percentage of the firm's work is normally subcontracted: _____%

24. Are bonds required of subs? Yes No.

25. What trades do you normally subcontract? _____

26. What is largest amount of uncompleted work on hand at one time in the past?

Amount: \$ _____ Year: _____

27. What is the largest job you expect to do during the next year? \$ _____

28. What is the largest uncompleted work program expected during the next year? \$ _____

29. What is your expected annual volume next year? \$ _____

30. What trades do you normally undertake with your own forces? _____

31. SIC CODE _____

32. Do you lease equipment? Yes No

33. Type of lease? _____

34. What are the terms of the lease? _____

35. Name of your CPA: _____

Address: _____

Phone: _____ Contact Person: _____

36. On what basis are taxes paid? Cash Completed Job Accrual % of Completion

37. On what basis are financial statements prepared? Cash Completed Job Accrual % of Completion

38. On what level of assurance are financial statements prepared? CPA Audit Review Compilation

39. How often are financial statements prepared? Annually Semi-annually Quarterly Monthly

40. Do you have full time accountant on staff? Yes No 41. Yrs. Experience _____

42. Are job cost records kept? Yes No

43. How often reviewed? _____ 44. How often updated? _____

45. Do they show job detail? Yes No 46. Frequency? _____

47. Name of your Bank: _____

Address: _____

Phone: _____ Contact Person: _____

48. Amount of line of credit: \$ _____ 49. Expiration date: _____ 50. What is interest rate? _____%

51. UCC Filing? Yes No 52. How is credit secured? _____

53. Is your firm union? Yes No 54. What is firm's Dun & Bradstreet Number? _____

55. D & B Rating: _____ 56. Pay Record: _____ 57. Date of Rating: _____

58. Previous Bond Companies

<u>Name</u>	<u>Reason for Leaving</u>
A. _____	_____
B. _____	_____
C. _____	_____

59. List five of your largest contracts:

<u>Job Name</u>	<u>Contract Price</u>	<u>Gross Profit</u>	<u>Completion Date</u>	<u>Bonded?</u>
A. _____	_____	\$ _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Owner: _____	Design Professional: _____			
B. _____	_____	\$ _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Owner: _____	Design Professional: _____			
C. _____	_____	\$ _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Owner: _____	Design Professional: _____			
D. _____	_____	\$ _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Owner: _____	Design Professional: _____			
E. _____	_____	\$ _____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Owner: _____	Design Professional: _____			

60. List five of your major suppliers

	Name	Address	Telephone	Contact
A.	_____	_____	_____	_____
B.	_____	_____	_____	_____
C.	_____	_____	_____	_____
D.	_____	_____	_____	_____
E.	_____	_____	_____	_____

61. List five subcontractors (or contractors if you are a subcontractor) with whom you do business:

- A. Name: _____
Address: _____ Telephone _____
Contact: _____ Job _____
- B. Name: _____
Address: _____ Telephone _____
Contact: _____ Job _____
- C. Name: _____
Address: _____ Telephone _____
Contact: _____ Job _____
- D. Name: _____
Address: _____ Telephone _____
Contact: _____ Job _____
- E. Name: _____
Address: _____ Telephone _____
Contact: _____ Job _____

62. List any subsidiaries and affiliates of the contracting firm:

	Firm Name	Ownership	Type Business	NANDA Code
A.	_____	_____	_____	_____
B.	_____	_____	_____	_____
C.	_____	_____	_____	_____
D.	_____	_____	_____	_____
E.	_____	_____	_____	_____

REMARKS: _____

Completed by: _____

Title: _____

Date: _____

SUPPLEMENTARY APPLICATION

Firm Name: _____

Address: _____

Fed Tax ID- _____

1. Is your firm or any subsidiary or affiliate currently involved in any litigation or subject to any liens or judgments?

YES NO If yes, explain below:

2. Are any of the owners/stockholders indemnitors currently involved in any litigation, divorce or separation proceedings?

YES NO If yes, explain below:

3. Has your firm ever petitioned for bankruptcy, failed in business or caused a loss to a surety?

YES NO If yes, explain Below:

4. Have any of the owners/stockholders/indemnitors ever petitioned for bankruptcy, failed in business or caused a loss to a surety?

YES NO If yes, explain below:

5. Is your current surety or any prior surety on notice of any payment or performance claims naming your firm?

YES NO If yes, explain below:

6. Current Surety: _____

Reason for changing surety: _____

Contact: _____

Telephone: _____

7. Will your firm, subsidiaries and affiliates and all stockholders and their spouses willingly indemnify the surety, for any and all bonded obligations? YES NO If no, explain below:

8. Is your firm current on all Taxes: Withholding, Sales, Income and miscellaneous?

YES NO If no, explain below:

9. Are the owners/stockholders/indemnitors current on all Taxes : Withholding, Sales, Income and miscellaneous?

YES NO If no, explain below:

EXPLANATIONS TO EXCEPTIONS NOTED ABOVE: _____

(Attach supporting information)

The undersigned hereby acknowledges that the Surety will rely on the information furnished above and may, in fact, verify certain responses in accordance with existing statutes and insurance regulations. Any person who knowingly files an application for insurance or statement of claim containing any materially false information commits a fraudulent act, which is a crime, and may also be subject to a civil penalty, punishable under laws governing fraudulent insurance acts.

Firm Name: _____

Date: _____

Principal signature: _____

Agent as Witness: _____

Printed name - _____

Printed name - _____

ALAMO SURETY BONDS

CONSENT TO CREDIT HISTORY

ATTACHMENT TO SURETY BOND QUESTIONNAIRE

RE: THE OBTAINING AND USE OF PERSONAL CREDIT HISTORY

The undersigned personal and/or business guarantor(s) acknowledge and recognize that his, her, or its individual or business credit history may be a necessary factor in the evaluation of this personal guarantee. The undersigned hereby consent to, and authorize **ALAMO SURETY BONDS**, its agents, assigns, or successors to obtain, at any time, as they deem necessary, a consumer credit report on the undersigned. This authorization shall remain in full force and effect until cancelled in writing by both the undersigned and an authorized representative of **ALAMO SURETY BONDS**, its agents, assigns or successors.

Print Name

Signature

Address

Social Security #

Date

Print Name

Signature

Address

Social Security #

Date

Print Name

Signature

Address

Social Security #

Date