

## **Vendor Qualification Form**

Prequalification Form will NOT be accepted unless completed in its entirety

<b>BUSINESS SECTION</b>	(please print or typ	e)						
Legal Business Name	Date:							
	Project, if applicable:							
	Type of Compa		_					
			Subcor		☐ Sup	oplier 🔲 Bo	th	
Address #1 (Street Address)			Address #2 (Ma	iling Ad	dress)			
City	State 2	Zip	City		State	Zip		
Principal Contact	Contact's Title		Years in Busine	ess	# of Employe	ees Fed. Tax ID	#	
Telephone Number	elephone Number Toll Free Number			Business Type: Corporation			ation:	
Fax Number	Cellular Phone Number	r	1 = '	Sole Proprietor LLC/LLP Union Partnership Other Merit Shop				
Contact Email Address			Company Webs	ite Addı	ress	•		
Company Certifications (Mark in	appropriate)	MBE	WBE DBE		VOSB S	SBE JSEB	Oth	er
Certifying Agency:	ty	State	e		Federal 🔲 D	OOT Other		
Design-Build Capabilities?	Yes O	No	Have you failed terminated for o	-			0	Yes No
LEED Design Capabilities?	Yes O	No						
If yes, is engineering staff:	☐ Internal ☐	External						
List the corporate officers, p	partners, or proprietor	s of your fi	i <b>rm:</b> (If additiona	l space r	needed, list on a	a separate sheet ar	nd attach to	this form.)
Name			Title			% Ownershi	р	
Name			Title			% Ownershi	р	
Name			Title			% Ownershi	% Ownership	
Name			Title			% Ownershi	% Ownership	
Have any of the above officers of through another company? (	ever done business with If yes, please explain be		uctors Inc. or ES	l Design	Services Inc.,		☐ Yes	☐ No
SAFETY SECTION								
List your Experience Modific	cation Rate (EMR) for	the last thr	ee years:		Number of	OSHA Recordal	ble incide	ents
Year	ı	Rate			over the pri	ior 3 years:		
					( D	ata available at	www.osl	na.gov )
Do you have a written Safe Are all employees trained Do you have a Company S If yes, Contact Name:	in safety requirement		ofessionals or	Staff?	_		O Yes O Yes O Yes	No No No

<b>PROJECT</b>	<b>INFORMA</b>	TION SECTION					
List data for three most recent completed fiscal years							
Year 1 Ma	ax. Contract Val	ue Completed	Annual Company Revenue	Current Yr Company Workload			
\$			\$	\$			
Year 2 Ma	ax. Contract Val	ue Completed	Annual Company Revenue	Current Yr Company E	Backlog		
\$			\$	\$			
	ax. Contract Val	ue Completed	Ψ Annual Company Revenue			T	
\$			\$				
Select the	geographical		g below where your company i nly a portion of an area, pleas		icensed a	and will provide quot	es for work.
All The Un	ited States						
AL AK AZ AR AR Internation	CO GA	IA ME	MA	NV NY OH OK	OR PA RI SC	SD VT TN VA TX WA UT WV	□ WI □ WY
List license n	umbers of juri	sdictions in which yo	our company is legally qualified	to work. (	List addit	tional on separate sh	neet.)
0.		-	License Number	Francisco	.:	-	
51	tate		License Number	Expira	tion		
_						-	
_						-	
_						_	
_						•	
List the types	of projects fo	r which your compar	y typically performs work or in	n which it s	pecializes	S.	
		ONDING SECTION					
-		•	e following insurance cover	rage?			
	-	=	at Project Site Location?			O Yes	O No
General Lia	•	\$2,000,000				O Yes	O No
Automobile	-	\$1,000,000				O Yes	O No
Employer L	iability Min.	\$500,000				Yes	☐ No
Insurance Com	nsurance Company Insurance Agent Insurance Agent Telephone						phone
Bonding Company			Bonding Company Contact			Bonding Contact Telephone	
			Total Bonding Capacity Current Availabl			Bonding Capacity	
			\$				

REFERENCE SECTION						
Project References (within last three	years)					
Project Name	Project Loca	tion (City, State)	Completion Date (	MM / YY)		
Your Firm's Approximate Contract Amount Project Gener \$		eral Contractor	General Contracto	ontractor Contact & Telephone Number		
Briefly Describe Work Performed By Your Firm:	•					
Project Name Project Location		tion (City, State)	Completion Date (	Completion Date (MM / YY)		
Your Firm's Approximate Contract Amount Project General Projec		eral Contractor	General Contracto	r Contact & Telephone Number		
Briefly Describe Work Performed By Your Firm:	•					
Project Name	Project Loca	ion (City, State) Completion Date		(MM / YY)		
Your Firm's Approximate Contract Amount \$	Project Gene	eral Contractor	General Contracto	r Contact & Telephone Number		
Briefly Describe Work Performed By Your Firm:						
Project Name	Project Name Project Location		Completion Date (	(MM / YY)		
Your Firm's Approximate Contract Amount Project Gener		eral Contractor	ntractor General Contractor Contact & Telephone Number			
Briefly Describe Work Performed By Your Firm:	•					
Major Supplier References (list three	e current supp	lier references)				
Company Name		Address				
Contact		Phone				
Company Name	Address					
Contact	Phone					
Company Name	Address					
Contact	Phone					
Bank References (list three financial	references)	<u>.</u>				
Financial Institution		Address				
Contact		Phone		Established Line of Credit?		
Financial Institution		Address				
Contact	Phone		Established Line of Credit?			
Financial Institution	Address		,			
Contact	Phone		Established Line of Credit?			

SCC	PES OF WORK SECTION (Scope	s of	work that your company performs	. Ch	eck all that apply.)
01-00	0 GENERAL CONDITIONS	09-00	0 FINISHES	ME	CHANICAL
	01402 Geotechnical Investigation	$\Box$	09000 Finishes		21000 Fire Suppression/Protection
H	01403 Material Testing		09250 Drywall & Metal Framing		22100 Plumbing
Ħ	01532 Construction Fence/Scaffold Rental	$\sqcup$	09300 Tile		23000 HVAC
H	01550 Progress/Aerial Photos		09500 Acoustical Ceilings		23090 HVAC Instrumentation & Control
H	· ·		09600 Resilient Flooring/Carpet		23900 Industrial Refrigeration
H	01556 Clean-Up 01720 Layout/Surveying		09640 Wood Flooring		23910 Freon Sub-bid
H	01990 Other	Ц	09670 Fluid Applied Flooring		23920 Ammonia Sub-bid
ш	01930 Other	닏	09840 Acoustical Wall Treatment		23930 Refrigeration Equipment
02-00	0 EXISTING CONDITIONS		09900 Painting/Wall Covering		23990 Other
	02200 Demolition	Ш	09990 Other	26-	000 ELECTRICAL
П	02990 Other	10-00	0 SPECIALTIES		26000 Electrical
_			10100 Visual Display Boards		26230 Generators
03-00	0 CONCRETE		10160 Toilet Partitions & Accessories	Щ	26500 Lighting Supplier
Ц	03080 Concrete Demolition		10200 Louvers & Vents	$\sqsubseteq$	26600 Fire Alarm System
	03200 Reinforcing Steel - Installed		10260 Wall & Corner Guards		26650 Lighting Protection
	03300 Cast-in-Place Concrete		10270 Access Flooring		26700 Communications
H	03410 Architectural Precast Concrete 03410 Structural Precast Concrete		10350 Flagpoles		26701 Security Access & Surveillance
ᆸ	03470 Situatural Fredasi Concrete		10400 Identification Devices/Signage	Ц	26800 Sound & Video
Ħ	03810 Concrete Cutting		10500 Lockers & Benches	ᆜ	26910 Instrumentation & Control
	03990 Other		10520 Fire Extinguishers & Cabinets		26990 Other
			10530 Prot. Covers/Awnings/Canopies		EWORK .
04-00	00 MASONRY		10560 Storage Racks	SII	EWORK
Ц	04000 Masonry		10650 Oper. Partitions/Accordion Wall	Ц	31220 Earthwork
닏	04900 Masonry Restoration & Cleaning		10750 Telephone Specialties		31310 Soil Treatment
	04990 Other		10990 Other	Ц	31600 Piles/Caissons
05-00	0 METALS	_	0 EQUIPMENT	닏	32120 Asphalt Paving
	05020 Structural Steel Supply		11130 Audio-Visual Equipment		32131 Concrete Paving
	05025 Structural Steel Erection	╚	11140 Vehicle Service Equipment		32160 Curb & Gutter
	05200 Steel Joist/Supply	Ц	11150 Parking Control Equipment		32310 Fencing & Gates
	05300 Metal Deck Supply	닖	11170 Solid Waste Handling Equipment		32320 Retaining Walls
	05500 Misc. Metals Fabrication	$\Box$	11190 Detention Equipment 11200 Water Supply & Treatment Equip.		32900 Landscape & Irrigation
	05510 Metal Stairs & Handrails	Ħ.	11400 Food Service Equipment		33100 Site Utilities (Water, Sewer, Storm)
	05700 Ornamental Metals	$\blacksquare$	11480 Athletic & Recreation Equipment		34100 Railroad Construction
Ш	05990 Other	Ħ	11500 Industrial & Process Equipment		
			11600 Laboratory Equipment	DESI	GN
06-00	0 WOOD & PLASTIC	口	11700 Medical Equipment	П	Architectural
	06100 Rough Carpentry Material	닏	11800 Variable Message Signs	Ħ	Civil Engineering
	06200 Finish Carpentry	ш	11990 Other	Ħ	Structural Engineering
닏	06400 Architectural Casework	12-00	0 FURNISHINGS	Ħ	Mechanical Engineering
	06990 Other	T2-00	12300 Manufactured Casework	Ħ	Electrical Engineering
07 000	THERMAL & MOIST, PROTECTION	Ħ	12350 Grilles, Mats & Frames	Ħ	Other
	07100 Waterproofing & Sealants	Ħ	12400 Window Treatment	_	
	07210 Building Insulation	Ħ	12500 Furniture		
무	07240 Ext. Insul. & Finish Systems (EIFS)	Ħ	12700 Systems Furniture		
Ħ	07410 Metal Roof & Wall Panels	Ħ	12990 Other		
	07500 Membrane Roofing	13-00	0 SPECIAL CONSTRUCTION		
	07600 Flashing, Sheet Metal & Accessories		13030 Special Purpose Rooms		
	07700 Roof Specialties	▤	13060 Insulated Metal Panels		
	07810 Fireproofing		13080 Sound, Vibration, & Seismic Cont.		
	07900 Joint Sealers		13120 Pre-Engineered Metal Buildings		
	07990 Other		13121 Metal Building Erector		
08-000	DOORS & WINDOWS		13200 Storage Tanks		
	08100 Doors, Frames & Hardware		13300 Cold Storage Rooms		
Ħ	08111 Doors & Hardware Install		13990 Other		
ŏ	08360 Overhead Doors	14-00	0 CONVEYING SYSTEMS		
ä	08400 Storefronts		14200 Elevators & Lifts		
	08500 Windows		14300 Escalators & Moving Walks		
	08600 Skylights		14500 Material Handling		
	08800 Glass & Glazing		14580 Pneumatic Tube System		
	08900 Glazed Curtain Walls		14600 Hoists & Cranes		
	08990 Other		14990 Other		

CONFIDENTIALITY NOTE: The infor ESI Constructors.	mation supplied by the undersigned in	this document is intended only for the use of
The undersigned certifies that the info	rmation provided herein is a clear and acc	urate representation of this organization.
Information Supplied By:		
Print Name		
Signature		
Title	Date	
Return completed form to:	ESI Constructors, Inc. Estimating Department 950 Walnut Ridge Drive Hartland, WI 53029	
	OR	
	Fax: 262-369-3536	
	OR	
	Email: estimating@esigroupus	a.com