

## SUBCONTRACTOR QUESTIONNAIRE

Company Name:				
Your Name:Title:				
Company Address:				
Pho	hone #: Mobile Phone #:	_ Fax #:	email:	
1.	. What is your company's area of expertise?			
2.	. Do you have a subspecialty within that area?			
3.	How long has your company been in business?			
4.	. Are you affiliated or signatory to any trade associations?			
5.	What position do you hold in this company?			
6.	What is your length of employment with this company?			
7.	. What was the Dollar Volume of your business at the most recent ye	ear end?		
8.	. How many people does your company employ?			
9.	How many employees are in the field? Project Mgrs? F	Foremen?	Administrative?	
10.	0. Does your company use computers? Y or N			
11.	1. Do you have a web site? Y or N Web address:			



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12.	Describe the geographical area that you prefer to work within.
13.	What type of resources (equipment) do you have available?
14.	Do you have HAZCOM/Safety programs in place?
15.	What is the average size job you are involved with?
16.	What is the smallest size job you are willing to accept?
17.	Please indicate the number of jobs completed in the last year.
18.	Please list three business references, along with their contact numbers.
	1.
	2.
	3.
	Signature: Printed Name:
	Date:



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