



Lorain County
Urban League



AECOM Technical Services
Greenspace Construction Services
Scaparotti Consulting Group

Date:

Local Subcontractor Information Form

Elyria School District Elementary Projects

Instructions: The information provided below will be shared with the pre-qualified contractors bidding the project.

Company Information

Company Name: Phone Number:
 Main Office Street Address: Email:
 City: State: Zip:

Company Type: Corporation State of Incorporation: # Office Employees
 Partnership Date Company Started: # Field Employees
 LLC
 Joint Venture
 Other: State Licenses:
 License #: State:
 License #: State:

Labor Affiliations:

Company is: Union (identify local below) Open Shop
 Local #: Trade Name: Contract Renewal:
 Local #: Trade Name: Contract Renewal:

Certifications:

MBE: Certifying Agency: Certification #:
 SBE: Certifying Agency: Certification #:
 EDGE: Certifying Agency: Certification #:
 DBE: Certifying Agency: Certification #:

Type of Work Performed:

Annual Volume of Work: (3 yrs)

Year	Volume
Current	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Largest Project Completed:

Name:
 Volume:

Typical Contract Size: Under \$100,000
 \$100,000 to \$500,000
 \$500,000 to \$1,000,000
 \$1,000,000 to \$3,000,000
 Over \$3,000,000



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Example Projects:

List 3 recent projects and your contract value:

	<u>Project Name:</u>	<u>Contract Amount:</u>	<u>Completion Date:</u>
1	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>

Safety Performance

Does your company have a Drug-Free Workplace Program in place:

Yes No

Is your program certified by the State of Ohio BWC:

Yes No

Experience Modification Rate: (past 3 years)

<input type="text"/>	-----	<input type="text"/>	<input type="text"/>	-----	<input type="text"/>	<input type="text"/>	-----	<input type="text"/>	<input type="text"/>
Year		Rate	Year		Rate	Year		Rate	Year

Signatures

The undersigned certifies that all information provided in this prequalification and attached as supplemental information is accurate to the best of their knowledge.

Company Name

Signature

Insert image or type signature

Printed Name

Title

Date