

Acct _____

Bnkr _____

CONTRACTOR QUESTIONNAIRE

1. Name of Firm: _____

2. Address: _____ 3. Fiscal Yr. End _____

(City)

(State)

(Zip)

4. Phone: (____) _____ 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>Year 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 normal 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 a full time accountant on staff? ☐ Yes ☐ No 41. Years of 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: _____

Remarks: _____

58. Previous Bonding Companies:

Name

Reason for Leaving

A. _____

B. _____

C. _____

59. List five or your largest contracts:

Job Name

Contract Price

Gross Profit

Completion Date

Bonded?

A. _____ \$ _____ ☐ Yes ☐ No

Owner: _____ Design Professional: _____

B. _____ \$ _____ ☐ Yes ☐ No
 Owner: _____ Design Professional: _____

C. _____ \$ _____ ☐ Yes ☐ No
 Owner: _____ Design Professional: _____

D. _____ \$ _____ ☐ Yes ☐ No
 Owner: _____ Design Professional: _____

E. _____ \$ _____ ☐ Yes ☐ No
 Owner: _____ Design Professional: _____

60. List five of your major suppliers:

	<u>Name</u>	<u>Address</u>	<u>Telephone</u>	<u>Contact</u>
A.	_____	_____	_____	_____
B.	_____	_____	_____	_____
C.	_____	_____	_____	_____
D.	_____	_____	_____	_____
E.	_____	_____	_____	_____

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

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 three Architects you have done business with:

A. Name: _____
 Address: _____ Telephone: _____
 Contact: _____ Job: _____

B. Name: _____
 Address: _____ Telephone: _____
 Contact: _____ Job: _____

C. Name: _____
 Address: _____ Telephone: _____
 Contact: _____ Job: _____

63. List key personnel, foremen or supervisors:

	<u>Name</u>	<u>Position</u>	<u>Year of Birth</u>	<u>Yrs. Exper.</u>	<u>Previous Employer</u>
A.	_____	_____	_____	_____	_____
B.	_____	_____	_____	_____	_____
C.	_____	_____	_____	_____	_____
D.	_____	_____	_____	_____	_____
E.	_____	_____	_____	_____	_____

64. List any life insurance in effect on key personnel:

	<u>Name</u>	<u>Beneficiary</u>	<u>Amount</u>	<u>Cash value</u>
A.	_____	_____	\$ _____	\$ _____
	Insurance Company _____			
B.	_____	_____	\$ _____	\$ _____
	Insurance Company _____			
C.	_____	_____	\$ _____	\$ _____
	Insurance Company _____			

65. List other insurance coverage currently in effect:

	<u>Limits in "000"s</u>		<u>Carrier</u>	<u>Expiration Date</u>
	<u>BI</u>	<u>PD</u>		
A. General Liability:	\$ _____	\$ _____	_____	_____
B. Auto Liability:	\$ _____	\$ _____	_____	_____
C. Umbrella:	\$ _____	\$ _____	_____	_____
D. Owner's Protection:	\$ _____	\$ _____	_____	_____

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

	<u>Firm name</u>	<u>Ownership</u>	<u>Type of Business</u>	<u>NANDA Code</u>
A.	_____	_____	_____	_____
B.	_____	_____	_____	_____
C.	_____	_____	_____	_____
D.	_____	_____	_____	_____
E.	_____	_____	_____	_____

REMARKS: _____

Complete and Return to:

FAX - 800-737-4880

Email - info@a1suretybonds.com

Completed by: _____

Title: _____

Date: _____

Agency: _____ Phone: _____

Date Requested: _____

____ Bid Bond

Date Bond Needed: _____

____ Performance / Payment Bond

____ Maintenance Bond

____ Subdivision Bond

Contractor: _____

Obligee Name: _____

Obligee Address: _____

Description of Work: _____

Project Number: _____ Special Bond Form Required?: _____

If Yes, Please Attach Special Form

% of Bid: _____ Bid/Contract Date: _____ Time of Bid: _____

Bid Estimate: _____ Contract Amount: _____

Estimated Start Date: _____ Estimated Completion Date: _____ Retainage: _____

Warranty/Maintenance Period: _____ Penalty for Non-Completion: _____

Liquidated Damages: _____ Was there a Bid Bond?: _____

Amount Subbed: _____ Work on Hand (bonded & Non Bonded): _____

Performance Bonds (Attach copy of the Contract)

Bid Results

1st Bidder

2nd Bidder

3rd Bidder

Engineers Estimate

Complete and Return to:

Fax - 800-737-4880

Email - info@a1suretybonds.com

INSTRUCTIONS

As your Surety, we are as interested as you in accurate progress reports on your construction work. The reverse side of this form is designed to help present such a report.

We ask that you take a moment to read these instructions before completing the work-on-hand schedule.

1. All projects should be listed: Bonded and unbonded, including cost plus.
2. Contract Price should include APPROVED change orders only. Claims and disputed items should not be included.
3. Cost should be entered on a basis consistent with the financial statement (P&L) allocation EXCLUDING general and administrative overhead.
4. Billed-to-Date and Cost to Complete should be as of a concurrent date. It should be consistent with the treatment in the financial statement.
5. Estimated Cost to Complete: This figure should be an accurate estimate of the cost remaining at the time this report is completed. It would reflect any developments, which occurred after the bid date, which would affect the final cost. You should NOT just subtract the cost to date from the original estimated cost.

Thank You,

WILLIAMSON

WORK-ON-HAND SCHEDULE

CONTRACTOR						STATUS AS OF (Date)	
1	2	3	4	5	6	7	8
Job Description	Owner	Contract Price Plus Change Orders	Original Estimated Cost Plus Cost of Change Orders	Total Billed to Date Incl. Retainage	Total Costs (Direct) to Date	Total Revised Estimated Cost to Complete *	Estimated Completion Date
TOTALS							

Contracts Completed Since Last Closing Statement or Last Report

Job Description	Owner	Final Contract Price	Total Cost	Gross Profit/Loss
TOTALS		\$	\$	\$

***MUST BE A NEW ESTIMATE OF REMAINING COSTS INCLUDING UNRECOVERABLE COSTS**

Total Uncompleted Work \$ _____

Total Uncompleted Work by Subcontractors \$ _____

Bonded \$ _____

Unbonded \$ _____

Signed _____ Title _____