



## Subcontractor Pre-Qualification Form

### **Submitted By:**

Company Name:

Mailing Address:

Street Address:

City:

State:

Zip Code:

Contact Name:

Telephone:

Fax:

Cell:

E-mail Address:

Company Website:

### **Organization:**

Corporation

Partnership

Individual

Joint Venture

Other

What type of work do you perform?

Number of years your organization has been doing business:

Under what other names has your organization done business?



**Experience:**

List the major construction projects that your organization is currently working on:

Name of Project	Contract Amount	General Contractor Name & Phone	Architect Name & Phone	Start Date	Completion Date

List the major construction projects that your organization has completed in the past three years:

Name of Project	Contract Amount	General Contractor Name & Phone	Architect Name & Phone	Start Date	Completion Date



Name of Project	Contract Amount	General Contractor Name & Phone	Architect Name & Phone	Start Date	Completion Date

What is the average annual volume (\$) of work your organization performs?



**References:**

Please provide three trade references:

Please return completed forms via fax, mail or email:

Fax: 603-883-5061 Attn: Estimating

Mail: D.L. King and Associates, Inc.  
27 Tanglewood Drive, Nashua NH 03062  
Nashua, NH 03062

Email: [Info@dlkingnh.com](mailto:Info@dlkingnh.com)