



Subcontractor Information

Company Name: _____

Owner/Principal or Local Manager: _____ Cell: _____

Local Office Physical Address: _____ City: _____ State: _____ Zip: _____

Mailing Address (if different): _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ Email: _____

Business Type (i.e. Corporation, Partnership, Sole Proprietorship): _____

Main office address if different from above: _____

Estimator's Name: _____ Cell: _____ Email: _____

Emergency Contact Name: _____ Cell: _____ Email: _____

Years in Business: _____ Minimum Project Size: _____ Maximum Project Size: _____

What scope(s) of work do you perform?: _____

Number of Employees : Field _____ Office _____

List all Arizona ROC License Numbers include class: _____

Any complaints against your firm filed at the Registrar of Contractors? _____ If yes attach explanation.

____ Certified SBE ____ Certified MBE - Certified by: _____

Safety: List your EMR (Emod) for the last three years: _____

On a separate sheet explain any EMR greater than 1.0 and what measures were taken to remedy the situation.

OSHA -Any serious, willful or failure to abate OSHA violations received in the last 5 years? _____ If yes attach explanation.

References - Provide information on completed projects.

If multiple projects for the same contractor show range of subcontract amounts and number of years.

General Contractor: _____	Contact Name: _____	Email: _____
Project Name: _____	Value: _____	Year Completed: _____
General Contractor: _____	Contact Name: _____	Email: _____
Project Name: _____	Value: _____	Year Completed: _____
General Contractor: _____	Contact Name: _____	Email: _____
Project Name: _____	Value: _____	Year Completed: _____

Insurance: Minimum Coverage required by Division II is described on the attached. Does your policy meet these minimum requirements? _____ If not will you be able to provide policies that meet the requirements? _____

If there is additional cost to provide required coverage that cost MUST be included in your bid - you may state that amount separately.

By signing this form the undersigned certifies that the information provided is current and accurate.

Signature: _____ Title: _____ Date: _____



CONSTRUCTION CO. INC.

GENERAL CONTRACTORS

January 1, 2015

Insurance Requirements for Subcontractors (and all tiers of sub-subcontractors)

Commercial General Liability Insurance coverage including premises, operations, products, completed operations, and contractual liability coverage as follows: Coverage for the Subcontractor shall be in an amount no less than \$1,000,000.00 per occurrence and \$1,000,000.00 personal injury and advertising injury and \$2,000,000.00 Products and Completed Operations Aggregate and \$2,000,000.00 General Aggregate.

Automobile Liability Insurance for all motor vehicles operated by or for Subcontractor and its Sub-subcontractors, including owned, hired, and non-owned autos, with minimum Combined Single Limit for Bodily Injury and Property Damage of \$1,000,000.00 for each occurrence.

Workers' Compensation insurance in the statutory limits. The Workers' compensation policy shall be endorsed with a waiver of subrogation in favor of Division II Construction Co., Inc. and the Project Owner. Employers Liability coverage in an amount not less than \$500,000.00 each accident; and \$500,000.00 disease policy limit; and \$500,000.00 disease each employee

All general liability and umbrella policies shall (i) name Division II Construction Co., Inc. and their respective managers, directors, officers, partners, agents, employees, and other representatives "additional insured's"; (ii) be issued by an insurer and shall be in a form approved by Division II Construction Co., Inc. and (iii) provide that such insurance shall be primary on a non-contributory basis. All policies shall provide that such policies shall not be canceled or non-renewed without at least thirty (30) days prior written notice to Division II Construction Co., Inc.

All insurers shall be rated A-VII or better by A.M. Best Company and shall otherwise be acceptable to Division II Construction Co., Inc.