### \*\*\*\*MUST BE ON FILE 5 DAYS PRIOR TO SOLICIATION DUE DATE\*\*\*\*

Vendor is responsible to update annually

## CITY OF OSHKOSH CONTRACTOR QUALIFICATION FORM

### **Company Information**

Company Name:	
Complete Address:	
Phone:	Fax:
State Contractor's Licer	nse #:
State Public Works Con	tractor's License #:
Other Applicable Licen	ses:
Union Affiliation:	
Work Trades Performed	l:
Type of Company: [] C	Corporation [] Partnership [] Sole Proprietorship
Federal Tax ID#:	
Company Contact:	
Email Address:	
Date Formed:	_ Number of Employees: Salaried: Hourly:
Bank Reference	
Lenders Name and Add	ress
Lending Officers Name	and Phone Number
	st four (4) representative projects completed in the last five (5) years g Company Contact Name/Phone # Contract Amount

Current Projects List four (4) representative projects currently under constructionProject NameContracting CompanyContact Name/Phone #Contract Amount

# Trade ReferencesList three (3) of your subcontractors or suppliersCompany NameAddressPhone #Contact Name

Client References List three (3) clients				
Company Name	Address	Phone #	Contact Name	

#### **Other Information**

In the past five years has your company failed to complete a contract or had a contract terminated? [] Yes [] No

In the past five years, has your company had any liens filed against it by any subcontractors or suppliers? [] Yes [] No

Has your company ever had liquidated damages assessed against it? [] Yes [] No

Has your company or any of its employees been involved in a lawsuit related to a project? [] Yes [] No

Has your company been investigated for any violations of local, state, or federal laws? [] Yes [] No

Has your company or any of its employee's been investigated for violation of any labor laws? [] Yes [] No

Provide a detailed description of the circumstances behind any "yes" answers given above below: