

# SUBCONTRACTOR APPLICATION

## THE GARABEDIAN COMPANY

Company Name \_\_\_\_\_ Date: \_\_\_\_\_

Name \_\_\_\_\_ Are You The Owner? \_\_\_\_\_

Drivers License Number \_\_\_\_\_ Social Security # \_\_\_\_\_

Company Address \_\_\_\_\_ state \_\_\_\_\_ Zip \_\_\_\_\_

Billing Address (If Different) \_\_\_\_\_ state \_\_\_\_\_ Zip \_\_\_\_\_

Company Phone Number \_\_\_\_\_ Fax \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

Company Website \_\_\_\_\_

Contractor License Number \_\_\_\_\_ (Copy Will Be Required)

Insurance Company \_\_\_\_\_ (Copy Will Be Required Listing GC)

Please Answer The Following Questions To The Best Of Your Ability:

1. Have You Ever Been Convicted Of A Felony? YES \_\_\_\_\_ NO \_\_\_\_\_

If Yes, Please Explain Why

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2. Have You Ever Had Your Driver's License Revoked? YES \_\_\_\_\_ NO \_\_\_\_\_

If Yes, Please Explain

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3. Have You Ever Been Sued Due To A Problem With Work Or Non-Completion Of A Job?

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# SUBCONTRACTOR APPLICATION (CONT.)

## THE GARABEDIAN COMPANY

4. Are You In Good Standing With Your Vendors? YES \_\_\_\_\_ NO \_\_\_\_\_

Please list 3 Vendors Below

Company/ Contact Name	Phone Number

5. What Is The Trade(s) That Your Company Is Able To Preform In A Professional Manner?

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6. How Many Employees Does Your Company Have? \_\_\_\_\_

7. What Equipment Does Your Company Own? (Please List The Year Of The Model)

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8. As The Owner, Are you Present On Each Job Site Daily? Please Explain

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9. How Many Days Will It Take For You To Provide A Detailed Estimate?

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10. Please List 10 Skills Your Company Has From Best To worst:

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# SUBCONTRACTOR APPLICATION (CONT.)

## THE GARABEDIAN COMPANY

11. Are Your Employees All On Payroll? YES \_\_\_\_\_ NO \_\_\_\_\_

12. Are Your Employees Covered By Workers Compensation? YES \_\_\_\_\_ NO \_\_\_\_\_

13. Please List The Names Of The Last 5 Jobs Your Company Has Completed:

Job Completed	Address	Contact / Phone #	Project Cost

14. What Is The Average Size/Cost Of The Projects Your Company Completes?

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15. Do You Sub Work For Other Companies? YES \_\_\_\_\_ NO \_\_\_\_\_

Company/Name	Phone Number

I, (Name) \_\_\_\_\_ Of, (Company) \_\_\_\_\_

authorize the Garabedian Company to check all of my information and references provides. I understand that I am being hired as a subcontractor and the Garabedian Company expects my firm to complete their project in a timely and most professional manner. I understand that I cannot sub any of the work provided to me by The Garabedian Company to another firm. Violation of any of the above will result in a forfeiture of the contract. We look forward to building a great business relationship.

Signature \_\_\_\_\_

Company Name \_\_\_\_\_

Date \_\_\_\_\_