Subcontractor Supplemental Information

Please complete the following to the best of your ability and submit to our office to perform work for Centennial or its JV Partners. Evaluation of your firm cannot be completed without this information.

Point of Contact: Phone:			
Number of Employees:	(Mark Secondary/Additional Trades on Page 3		
Union(s) your firm is signatory with, if any? Union Name and Local Number			
Apprentice Program Participant			
Program Name:			
Bonding Do you have the ability to bond a project over \$100k or more?			
Do you have the ability to bond a project over \$100k or more?			
If Yes, please complete the below information: Bonding Company Name:			
Bonding Agent Name: Project Bond Limit \$			
Project Bond Limit \$ Aggregate Bond Limit \$ HSEQ (Health, Safety, Environment and Quality) A Safety orientation must be scheduled with a Project Safety Manager prior to starting work submitting a written Company Safety Program and Accident Prevention Plan (APP). • Has your company been cited by OSHA/State for a safety violation within the last to Please list your firm's Experience Modification Rate for the most recent three years. Year			
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Please list your firm's Experience Modification Rate for the most recent three years Year EMR Experience - Identify contract and building types that your firm has performed on or in: Athletic	on our project sites. This includes		
Year EMR Experience - Identify contract and building types that your firm has performed on or in: □ Athletic □ Correctional □ Cultural/Museum □ Educational □ Government □ Transportation □ High Tech/Labs □ Office □ Parking Facilities □ Renovation □ Industrial □ Healthcare Has your company worked in active Healthcare facilities? □ Yes □ No Which facilities: □ Attach a separate page or list below at least three (3) completed projects with the following: (1) Project Name: □ Location: Point of Contact: □ Phone: Year work was completed: □ \$ Value:			
Experience - Identify contract and building types that your firm has performed on or in: Athletic	s:		
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□ Athletic □ Correctional □ Cultural/Museum □ Educational □ Government □ Transportation □ High Tech/Labs □ Office □ Parking Facilities □ Renovation □ Industrial □ Healthcare Has your company worked in active Healthcare facilities? □ Yes □ No Which facilities: Attach a separate page or list below at least three (3) completed projects with the following: (1) Project Name: Point of Contact: Year work was completed: Year work was completed: \$ Value: \$ Value			
□ Government □ Transportation □ High Tech/Labs □ Office □ Parking Facilities □ Renovation □ Industrial □ Healthcare Has your company worked in active Healthcare facilities? □ Yes □ No Which facilities: Attach a separate page or list below at least three (3) completed projects with the following: (1) Project Name:			
□ Parking Facilities □ Renovation □ Industrial □ Healthcare Has your company worked in active Healthcare facilities? □ Yes □ No Which facilities: □ Attach a separate page or list below at least three (3) completed projects with the following: (1) Project Name: □ Location: Point of Contact: □ Phone: Year work was completed: \$ Value: □	☐ Design/Build		
Has your company worked in active Healthcare facilities? Yes No Which facilities: Attach a separate page or list below at least three (3) completed projects with the following: (1) Project Name: Location: Point of Contact: Phone: Year work was completed: \$Value:	☐ Design Assist		
Which facilities: Attach a separate page or list below at least three (3) completed projects with the following: (1) Project Name: Location: Point of Contact: Phone: Year work was completed: \$ Value:			
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Point of Contact: Phone: Year work was completed: \$ Value:			
Year work was completed: \$ Value:			
-			
(2) Project Name: Location:			

Scope of Work performed:				
B) Project Name:		Locatio	n:	
Point of Contact: Year work was completed:				
		\$ Value:		
Scope of Work performed:				
redit References				
Supplier/Vendor Name		Contact Name	Phone	Email
dditional Information Please attach a	additional information :	about your company (option	nal).	
ompleted by (Print Name)	Title		Date	
				Page 2
				rage 2

Check all that apply:	
Check all that apply: 01 56 Traffic Control 02 41 Whole Building Demolition 02 65 Underground Storage Tank Removal 02 82 Asbestos/Lead/Mold Remediation 03 31 Structural Concrete (For Sidewalks see 32 16) 03 48 Precast Concrete 03 81 Concrete Cutting 04 05 Masonry 04 01 Restoration Masonry 05 05 Mobile Welding 05 58 Metal Fabrication 06 05 Wood Framing & Sheeting 07 05 Waterproofing Systems 07 21 Building Thermal Insulation 07 22 Roof & Deck Insulation 07 23 Siding (RS Means 07 46) 07 24 EIFS Systems 07 31 Roofing - Composition 07 33 Roofing - Green Roof Systems 07 52 Roofing - Built Up 07 53 Roofing - BPDM 07 61 Roofing - Sheet Metal 07 81 Applied Fireproofing 08 13 Doors 08 34 Special Function Doors 08 51 Windows 08 62 Skylights 08 71 Door Hardware 08 81 Glazing 09 29 Gypsum Board (Drywall) 09 30 Tiling 09 51 Acoustical Ceilings 09 64 Wood Flooring 09 65 Resilient Flooring 09 68 Carpeting 09 91 Painting 09 97 Special Coatings 10 28 Toilet, Bath Accessories 10 75 Flagpoles 11 41 Food Service Equipment	13 34 Prefabricated Engineered Structures 14 05 Conveying Equipment 21 05 Fire Suppression Systems 22 05 Plumbing, General Purpose 22 10 Hydronic/Steam Piping Systems & Boilers (RS Means 23 21) 22 15 Fuel Piping (RS Means 23 11) 23 05 HVAC Systems 23 31 HVAC Duct & Accessories 23 35 Instrumentation & Control for HVAC (RS Means 23 09) 26 09 Instrumentation & Control for Electrical Systems 26 12 Medium/High Voltage Electrical Gear & Systems 26 27 Low Voltage Electrical Systems 27 05 Communications 28 16 Intrusion Detection/Video Surveillance Systems 31 26 Clearing, Grading, Excavation & Fill 32 12 Paving, Asphalt Systems 32 14 Porous Paving Systems 32 14 Porous Paving Systems 32 17 Pavement Markings (Striping) 32 31 Fencing & Gates 32 84 Irrigation Systems 32 92 Grasses, Hydroseeding & Sod 32 93 Landscaping & Plants 33 05 Utilities - Water, Sewer, Storm 33 71 Utilities - Water, Sewer, Storm 33 71 Utilities - Communications (Overhead or Underground) 34 11 Rail Track Systems 35 20 Waterway & Marine Construction Other
□ 07 52 Roofing – Built Up	☐ 32 16 Sidewalks & Driveways
☐ 07 53 Roofing – EPDM	□ 32 17 Pavement Markings (Striping)
□ 07 61 Roofing - Sheet Metal	☐ 32 31 Fencing & Gates
☐ 07 81 Applied Fireproofing	☐ 32 84 Irrigation Systems
☐ 08 13 Doors	☐ 32 92 Grasses, Hydroseeding & Sod
☐ 08 34 Special Function Doors	☐ 32 93 Landscaping & Plants
☐ 08 51 Windows	☐ 33 05 Utilities – Water, Sewer, Storm
□ 08 62 Skylights	☐ 33 51 Utilities - Natural Gas & Propane
☐ 08 71 Door Hardware	☐ 33 71 Utilities – Electrical (Overhead or Underground)
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☐ 11 66 Special Athletic Equipment & Surfaces☐ 11 68 Play Field Equipment & Structures	
☐ 12 35 Specialty Casework, Cabinets & Countertops	
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