TAMEER

Subcontractor Prequalification Form

1. GENERAL INFORMATION

COMPANY NAME * **YEAR ESTABLISHED ***

CITY * **STATE *** **ZIP ***

PHONE * **FAX** **COMPANY EMAIL ***

FEDERAL TAX ID **D&B #** **LICENSE #**

1.1 — Type of Firm *(select all that apply)*

[ ] General Contractor [ ] Subcontractor [ ] Professional Services [ ] Supplier

1.2 — Number of Staff by Level

EXECUTIVE **FIELD PERSONNEL** **PROJECT MANAGERS**

ESTIMATING **ADMINISTRATIVE**

2. CONTACT INFORMATION

	PRIMARY CONTACT	ESTIMATING CONTACT	ACCOUNTING CONTACT
NAME			
TITLE			
EMAIL			
PHONE			

3. CERTIFICATION DESIGNATION

Please forward a copy of applicable certification with this form.

[ ] Small Business Enterprise (SBE) [ ] Women-Owned Business Enterprise (WBE)

[ ] Minority Business Enterprise (MBE)

[ ] Disadvantaged Business Enterprise (DBE)

[ ] Small Disabled Veteran / Veteran Business Enterprise (VBE)

[ ] Other

4. STATE LICENSES

List all states in which your firm is currently licensed.

STATE	LICENSE #	LICENSE DESCRIPTION

5. SAFETY

5.1 — Has your firm been cited by OSHA or the EPA in the last three (3) years? *

( ) Yes ( ) No

If yes, please explain in detail...

5.2 — Interstate Experience Modification Rate (IEMR) — Last Three Years *

YEAR	EMR RATE

Provide written explanation for any EMR rating over 1.0...

5.3 — Does your company hold Safety Meetings or Toolbox Talks?

( ) Yes ( ) No

If yes, who conducts them and how often?

5.4 — Does your company have a Health and Safety training program? *

( ) Yes ( ) No

If yes, who conducts training?

5.5 — Does your company employ a dedicated Safety and Health professional on each project site? *

( ) Yes ( ) No

6. CORE COMPETENCY

6.1 — Scope of work your company is willing and able to perform *

Describe your scope of work...

6.2 — PERCENTAGE (%) OF WORK NORMALLY SUBCONTRACTED

6.3 — TRADES/% PERFORMED WITH OWN WORKFORCE

6.4 — Type of Labor *(select all that apply)*

[ ] Union [ ] Prevailing Wage [ ] Non-Union / Open Shop [ ] PLA

6.5 — Union(s) your company is currently affiliated with or signatory to *

List all affiliated unions...

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7. CAPACITY & FINANCIAL STATUS

7.1 — Gross Receipts / Annual Revenue (last 3 years) *

YEAR	REVENUE ($)

7.2 — Current Backlog (Active contracts not yet completed)

TOTAL BACKLOG VALUE ($)

NUMBER OF ACTIVE PROJECTS

7.3 — Commercial Bank Credit References

BANK / INSTITUTION	ACTIVE LINE OF CREDIT ($)	ACCOUNT CONTACT & PHONE

7.4 — Additional Bonding Exposure

SURETY NAME

BONDING AGENT NAME / PHONE

SINGLE PROJECT BOND LIMIT ($) *

AGGREGATE BONDING CAPACITY ($) *

AVERAGE CONTRACT VALUE ($) **HIGHEST CONTRACT VALUE ($)**

7.5 — Current Insurance Limits *(Please forward a copy of insurance certification)*

INSURANCE COMPANY * **INSURANCE AGENT ***

GENERAL LIABILITY ($) *** **EXCESS LIABILITY ($)

PROFESSIONAL LIABILITY ($) *** **WORKERS COMPENSATION ($) *

7.6 — Audited Financial Statements — Submit copy of most recent audited financial statements with this form.

[ ] Attached [ ] Will provide upon request [ ] Not available

8. RISK TRANSFER ACKNOWLEDGMENT

The subcontractor acknowledges and agrees that any contract entered with Tameer Inc. will include provisions that transfer all project-related risks, liabilities, and obligations to the subcontractor, to the extent permitted by applicable law. This includes but is not limited to risk of loss, damage, delay, safety compliance, and third-party claims arising from the subcontractor's scope of work. By signing this form, the subcontractor confirms their understanding and acceptance of this condition.

[ ] I acknowledge and accept the above Risk Transfer condition

9. CONTRACT REFERENCES

9.1 — Please list your last 3 completed projects

YEAR	PROJECT NAME / LOCATION	OWNER / AGENCY	TYPE OF WORK	CONTRACT AMOUNT	CONTACT NAME & PHONE

9.2 — Largest Project Ever Completed

PROJECT NAME	SCOPE OF WORK	CONTRACT VALUE ($)	YEAR COMPLETED

10. CONTRACT HISTORY, LEGAL STANDING & OWNERSHIP

10.1 — Has your firm or any organization with which its officers were involved ever failed to complete a contract or been terminated for cause? *

( ) Yes ( ) No

If yes, please explain in detail...

10.2 — Are there any judgments, claims, arbitration proceedings, or suits pending or outstanding against your firm or its officers? *

( ) Yes ( ) No

If yes, please explain in detail...

10.3 — Has your firm filed any lawsuits or requested arbitration or mediation regarding construction contracts within the last three (3) years? *

( ) Yes ( ) No

10.4 — Does your firm have any pending judgements, claims, or suits? *

( ) Yes ( ) No

If yes, please explain in detail...

11. REQUIRED DOCUMENTS CHECKLIST

[ ] Certificate of Insurance (current version copy / record attached)	*[Choose File: No file chosen]*
[ ] Bond Letter from Surety Company (confirming operational capacity requirements)	*[Choose File: No file chosen]*
[ ] W-9 Form (completed and signed execution copy)	*[Choose File: No file chosen]*
[ ] Federal Tax ID Verification document link/copy	*[Choose File: No file chosen]*
[ ] Copy of all MWBE / DBE / SBE / VBE Certifications held by firm	*[Choose File: No file chosen]*
[ ] Audited Financial Statements (most recent fiscal calendar year submission)	*[Choose File: No file chosen]*
[ ] State License copies for all registered operational states checked in Section 4	*[Choose File: No file chosen]*

ATTACH SUPPORTING DOCUMENTS *(PDF, JPG, PNG, DOC — max 10MB)*

[Choose File: No file chosen]

12. CORPORATE DECLARATION & SIGNATORY AFFIRMATION

I, the undersigned, affirm that I have answered all questions in this Prequalification Form completely and truthfully. I understand that the consideration of my company, as a potential subcontractor for Tameer, Inc., will ultimately depend upon the submission of accurate and acceptable information in this form.

AUTHORIZED SIGNATURE (Type Full Name as signature) * **PRINT NAME ***

SUBMIT PREQUALIFICATION FORM