

1 Forest Park Drive Farmington, CT 06032

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## **CONTRACTOR'S OPERATIONS QUESTIONNAIRE**

CONTRACTOR:					DATE:			
ADDRESS:					PHONE:			
CITY/STATE/ZIP CODE:								
E-MAIL ADDRESS:								
		• GENER	AL INFORMATION	•				
Form of business: (check one)	Proprietorship 🖵	Partnership	☐ Corporation	on 🖬 Su	b-Chapter S Corporation 🛘	LLC 🗅		
Type of Construction performed:								
	Union 🗆	Non-Un	ion 🗆 Meri	it/Open Shop □				
Geographical Area of Operations: _								
States in which licensed to do busin	ess:							
Do you ever engage in Joint Venture How often are you required to provide		ntly 🖵 O	details on separate let ccasionally					
Date Business Established:			lncorpor	ated:				
Name of Predecessor Company:								
When did current management assu	me control?							
			ZATION-OWNERS	•				
NAME SS#	AC	GE % OF STOCK	POSITION	NAME OF SPOUSE				
Are the owners personally active in	this business? Yes	 D No D	(If no, give details.)					
Have any of the principals declared I	bankruptcy? Yes 〔	□ No □	(If yes, give details.)					
• KE	Y EMPLOYEES (Incl	ude Proj. Mgrs,	•	-				
Number of Years Position Experience Here/Of				Name of Previous Employer				
Name	• PARENT, AF	FILIATE AN	D/OR SUBSIDIAR Owned by	Y COMPANIES	Scope of Operations			

Has any entity in which the contra or building or any other related ac		ompanies have financia	l interests engage	d in any form of re	al estate investment, development
If yes, describe:					
In addition to contracting, what ot	her business activities are you	or do you intend to en	gage in?		
	• COI	NTINUITY-JOB CO	MPLETION •		
ls there a formal Buy-Sell Agreem	nent in effect? Yes 🛭 No	☐ If yes,attach a cop	oy. How is the Buy	-Sell Agreement fu	unded?
Who is it between?					
	Amount of Lif	e Insurance Payab	le to the Corpo	ration	
Insured	Insurance Company	Amount	Amou	nt Borrowed	Beneficiary
What arrangements have been ma	ade to assure contracts are cor				s)?
What incentives are given the key	employees to follow through (	oonuses, profit sharing	, etc.)?		
		• BANK REFEREN	ICES •		
Name of Bank:					With Since:
Address:					
City/State/Zip Code:					
Name of Loan Officer:				Phone	
Amount of Bank Line: \$		Unsecured	\$		Secured
Description of Security:	☐ Accounts Receivable☐ Inventory	☐ Contract Rights☐ Equipment/Real E		onal Endorsement r	
Expiration Date:		Amount of Bank L	ine currently in use	e:	
	• ACCOUNT	TING AND FINANC	CIAL REPORTIN	IG •	
Name/Address of Accounting Firm: Contact Person:			☐ Public Accountant		
Phone:					
	lependent ernal and/or accountant is an of her	ficer or partner of the	construction comp	pany	
How many years has this firm pre	pared your financial statements	? Numb	er of years	tax returr	s? years
Fiscal year end date:	This s	statement is prepared:	☐ Fully audite☐ Partially au	ed (unqualified) idited	<ul><li>□ Review basis</li><li>□ Compilation basis</li></ul>
Are interim statements prepared? How often?		□ No □ Quarterly □ Se	emi Annually		
Name of Accounting Software us	ed in-house				

Method of Accounting: (Check one each line)	% of Completion	Completed Contract	Accrual	Cas	sh		
For financial reporting	D						
For tax purposes	ū			٥			
Date of your last IRS clearance	Res	sults:					
Have your operations been profitable since the Are Taxes current?	Any tax	liens? 🛭 Yes	□ No	espect t	ю [	<b>]</b> ownership,	☐ major loans or refinancin
☐ major equipment purchases or leases, ☐ wi	thdrawals or	☐ other? If so,	describe:				
Internal cost accounting records provide job sta	·	-		·	-		
Please provide your Federal I.D. No.		CURRENT WO					
Attach a "Schedule of Uncompleted Work" for statement is more than 3 months old. The followany "Yes" answers.  Was your bid on any project more than 10% be Any projects behind schedule to complete?  Any delays or disputes on any projects?  Any in penalty for late completion?	wing questions	pertain to the late	est "Schedule o				
		• REFER	ENCES •				
List your 5 major suppliers:							
Name/Address			Telephone	No.		Credit Man	ager
List your Subcontractors (Contractors if you are	e a subcontract	or) with whom yo	u have worked	I in the la	ast 2 years	S:	
Name/Address						Telephone N	o./Contact Person
						_	

## • INSURANCE CURRENTLY IN FORCE •

Attach Certificate of Insurance listing all insurance coverages including carrier, limits and expirations.

## • SUITS, JUDGEMENTS, DEFAULTS AND CONTINGENT LIABILITIES •

Has your company or any officer or any partner eventually a company ever failed to complete a contra		prised with creditors?	Yes ⊔ No ⊔ Yes □ No □
Have you ever failed to qualify for a bond after an a	Yes 🗖 No 🗖		
Are you acting as surety or bondsman for others? Are you acting as an endorser for others on their n	Yes □ No □ Yes □ No □		
Does your company or any officer or partner owe a	Yes 🗆 No 🗅		
Has your company or any officer or partner ever re Do you have the necessary equipment to perform	Yes ☐ No ☐ Yes ☐ No ☐		
	• JOB EX	(PERIENCE •	
Largest Single Job Completed: \$		Year:	
What has been the greatest dollar volume of work on hand at one time?\$		Year:	
Please list the 3 largest contracts completed to da	te.		
1. Job Description:			
Owner		Contact Person:	
Address			
Contract Price \$Ame	ount of profit or loss \$	Date Completed:	
Architect/Engineer			
2. Job Description:			
Owner		Contact Person:	
Address			
Contract Price \$Ame	ount of profit or loss \$	Date Completed:	
Architect/Engineer			
3. Job Description:			
Owner		Contact Person:	
Address			
Contract Price \$Ame	ount of profit or loss \$	Date Completed:	
Architect/Engineer			
	• PRIOR	SURETIES •	
Name/Address of present surety:			
——————————————————————————————————————	years. Reason fo	or changing:	
Have you ever been refused a bond by your prese	nt or prior surety? Yes 🖵	No ☐ If yes, explain:	
Signed		Dated	