

CONTRACTOR'S QUESTIONNAIRE



Surety Bond Solutions

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Website: www.suretybondsolutions.net

GENERAL INFORMATION

Contractor: (Legal name as it appears on license) Type: (Corp/S Corp/LLC etc.)

Mailing Address: Tel:

Physical Address: Tax ID #:

License Number: License Class: Type of Work:

State Incorporated: Date Started:

Geographical Area of Operations:

Typically Subcontracted (%): Trades Subcontracted (%):

Number of Employees (excluding Owners):

CONTACT INFORMATION

(Corporate Officers and Key Personnel)

Name:	Title:	Email:	Cell:
Name:	Title:	Email:	Cell:
Name:	Title:	Email:	Cell:
Name:	Title:	Email:	Cell:
Name:	Title:	Email:	Cell:

OWNERS

(Include Spouses, unless there is a legal matrimonial agreement in effect)

Full Legal Name	Marital Status	DOB	Position	% of Ownership	Social Security Number

Is there a formal Buy/Sell Agreement in place? (Please provide a copy)

If Yes to above, is the agreement funded by life insurance?

Has there been any recent change in control of company?

Does the company have subsidiary, parent, holding or affiliated companies?

Do any of the owners have a majority ownership in any other companies?

Does this apply of any of the owners: 8a Veteran Disabled Veteran Native American

Have you ever participated in either of these programs:

____ Louisiana Economic Development - Small & Emerging Business Development Program

____ Small Business Association (SBA) Surety Bond Guarantee

If yes to any of these questions above, please provide documentation

JOB EXPERIENCE

PLEASE LIST THE 3 LARGEST CONTRACTS COMPLETE IN THE LAST THREE YEARS

1. Job Description:

Contract With: (Owner or GC)

Contact:

Phone:

Email:

Contact Price: \$

Amount of Profit/Loss: \$

Date Completed:

Comments:

2. Job Description:

Contract With: (Owner or GC)

Person to Contact:

Phone:

Email:

Contact Price: \$

Amount of Profit/Loss: \$

Date Completed:

Comments:

3. Job Description:

Contract With: (Owner or GC)

Person to Contact:

Phone:

Email:

Contact Price: \$

Amount of Profit/Loss: \$

Date Completed:

Comments:

REFERENCES

LIST 3 OWNERS/ARCHITECTS/ENGINEERS WITH WHO YOU HAVE WORKED WITH IN THE LAST 3 YEARS

NAME

1.

2.

3.

LIST 3 SUBCONTRACTORS/GENERAL CONTRACTORS WITH WHO YOU HAVE WORKED WITH IN THE LAST 3 YEARS

NAME

1.

2.

3.

LIST 3 SUPPLIERS WITH WHOM YOU BUY MOST OF YOUR MATERIAL

NAME

1.

2.

3.

BOND HISTORY

(List Current and Previous Bonding Companies)

Agency Name:

Surety Name:

Reason for Moving:

