

| Name and Contact Details | |
|--|---|
| Contact Person: | Date: Lead Source: |
| Address: | Home Phone: |
| Company Name: | Cell Phone: |
| Specialized Field (GC, Plumber, Electric, Roofer, etc): | Work Phone: |
| Email: | Contractor License #: |
| | |
| Insurance and Experience | |
| Are you licensed and insured: Yes No What type of in | nsurance: |
| | License updated: |
| How long have you been doing business in the area: | How long running own crew: |
| How many guys on crew full time: | |
| Current Projects and Bidding | |
| How many projects do you have going on right now: | In the past year: |
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| | |
| How do you usually bid out your work: | |
| Materials and Labor charged together or separate in your bid | ds: |
| Do you give written warrantees for your work: | How long of a warrantee: |
| Sub-Contractors and More Prescreening | |
| Do you use subcontractors: Are they licensed | and insured: |
| Who is your electrician: | Who is your plumber: |
| Do you belong to the Better Business Bureau or local Chambe | er of Commerce: |
| Do you have any certificates/licenses regarding the skills you | have: |
| Have you ever declared bankruptcy: | |
| How often do you communicate with your clients during a job | b: |
| Do you clean the job site daily: | |
| Do you have a problem with signing a lien waiver: | |
| References | |
| Can you provide a list of references; with the names and num | nbers you have done work for in the past: |
| 1 | |
| 2 | |
| 3 | |



| Please indicate any standardized pricing lourly rate standard: | |
|--|---|
| | when applied: |
| | when applied what mileage from you location would it apply and what would the amount |
| | mat mileage from you location would it apply and what would the amount |
| ny other flat rate pricing you can come up with | |
| my other nativate priemy you can come up with | that you have not seen listed. |
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Mark the services you perform

| ☐ Paint |
|--|
| □Cabinets □Exterior □Interior |
| □Drywall □Garage |
| ☐ Pest Control |
| ☐ Ants/Small Pests ☐ Rodents/Large Pests ☐ Termites |
| ☐ Plumbing |
| ☐ Backflow test ☐ Gas Lines ☐ Septic System |
| ☐ Bath Accessories ☐ Glass Enclosure ☐ Toilet |
| ☐ Exterior Lines/Fixtures ☐ Hot Water Heater ☐ Tub/Shower/Sink |
| ☐ Garbage Disposal ☐ Interior Lines/Fixtures |
| □ Pool/Spa |
| ☐ Equipment ☐ Leak Detection ☐ Pool Screens |
| ☐ Fencing/Gate/Locks ☐ Plaster Issue ☐ Service |
| □ Roof |
| ☐ Gutters ☐ Roofing Material ☐ Other |
| ŭ |
| ☐ Window Coverings |
| Please indicate all of the maintenance categories that the Company can service: |
| ☐ Air Conditioning/Heating |
| ☐ Swamp Cooler ☐ Thermostat |
| ☐ Temporary Units ☐ Unit |
| ☐ Appliances |
| ☐ Cooktop ☐ Range/Oven ☐ Washer/Dryer |
| Company Name (Note that invoices will be paid out to this name) |
| |
| |
| Do you provide emergency/afterhours service? ☐ Yes ☐ No |
| Do you hold any specialized licenses or certifications? (e.g. Plumbing, Electrical, Remediation) |
| ☐ Dishwasher ☐ Refrigerator |
| ☐ Microhood ☐ Vent Hood |
| ☐ Cabinets/Countertops |
| ☐ Cabinets ☐ Countertops |
| □ Doors/Windows/Siding |
| ☐ Exterior – Doors ☐ Interior - Hardware/Locks ☐ Structural |
| □ Exterior - |
| Hardware/Locks |
| Tidi dwai c/ Locks |
| ☐ Interior - Trim/Baseboard ☐ Windows |
| ☐ Interior - Doors ☐ Siding |
| ☐ Electrical/Lighting |
| ☐ Bathroom Fan ☐ Exterior Lighting ☐ Smoke & Carbon Monoxide Alarms |
| ☐ Ceiling Fan ☐ Interior Lighting ☐ Wiring |



| □Door Bell □Outlet |
|--|
| ☐ Flooring |
| □Carpet □Tile □Vinyl |
| ☐Stairs/Stair Railing ☐Vertical Tile (Bath/Kitchen) ☐Wood Laminate |
| ☐ Garage/Garage Door |
| □Accessories/Opener □Door |
| ☐ General Maintenance |
| □Ceiling □Drywall □Other |
| □Cleaning □Fireplace □Pest Control |
| □Demolition □Inspection □Stairs/Stair Railing |
| ☐ Landscape/Irrigation |
| □Irrigation □ Trees/Plants |
| ☐ Masonry/Fencing/Gates |
| □Brick/Concrete □Fencing □Mailbox |
| □Driveway □Gates □Shutters |
| ☐ Coverings/Blinds ☐ Screens |
| |
| We will pay you a bonus for successful referrals of sub contactors that we currently do no work with that you have worked with in the past or recommend as a good fit: |
| Leave their name and Number and we will call them for an interview if they successfully perform for us we will give you a referral bonus: |
| Contractor lead contact: |
| Contractor number: |
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