CREATIVE BUILDERS, INC.

200 East Broad Street, Suite 150
Greenville, South Carolina 29601
Tel: 864.233.1631 Fax: 864.235.1176

SUBCONTRACTOR PREQUALIFICATION

COMPANY INFORMATION:

Company Name: _____

DBA: _____

Street Address: _____ **Mailing Address:** _____

City, State, Zip: _____ **City, State, Zip:** _____

Phone Number: _____ **Year Established:** _____

Type of Company: ☐ Corporation ☐ Partnership ☐ Sole Proprietor ☐ LLC

Certifications: ☐ Section 3 ☐ Minority Business Enterprise (MBE) ☐ Women's Business (WBE)
☐ Small Business (SBE) ☐ Other: _____

Primary Contact:

Name: _____ Phone: _____ Email: _____

Estimating Contact:

Name: _____ Phone: _____ Email: _____

TRADES PERFORMED:

_____	☐ Material	☐ Labor	☐ Turnkey
_____	☐ Material	☐ Labor	☐ Turnkey
_____	☐ Material	☐ Labor	☐ Turnkey
_____	☐ Material	☐ Labor	☐ Turnkey
_____	☐ Material	☐ Labor	☐ Turnkey

Please list any labor that is self-performed: _____

SERVICE AREAS:

What areas do you perform work? (check all that apply)

South Carolina
- ☐ Upstate (Greenville)
- ☐ Midlands (Columbia)
- ☐ Pee Dee (Myrtle Beach)
- ☐ Lowcountry (Charleston)

North Carolina
- ☐ Mountains (Asheville/Hendersonville)
- ☐ Piedmont (Charlotte)
- ☐ Coastal Plains (Wilmington)

Georgia
- ☐ North Georgia

CONSTRUCTION TYPE, SIZE, & CAPACITY:

What type/size projects do you do? (check all that apply)

Multifamily
- ☐ 0 – 50 units
- ☐ 50 – 100 units
- ☐ 100 – 200 units
- ☐ 200 + units
- ☐ Apartments
- ☐ Townhomes (Lease)

Commercial
- ☐ New Construction

Medical
- ☐ Doctor
- ☐ Dentist
- ☐ Veterinary
- ☐ Surgical Center
- ☐ Hospital

Upfit/Renovation
- ☐ Office
- ☐ Restaurant
- ☐ Retail
- ☐ Financial
- ☐ Educational

How many projects can you work on at the same time? _____

How many projects do you typically complete in a year? _____

Do you have any limitations as to project type, size, or contract value?

Do you have any additional certification or experience you would like to share?

REFERENCES:

Please provide at least 3 references for each:

Owner / General Contractor	Contact	Phone	Email

Supplier / Subcontractor	Contact	Phone	Email

EXPERIENCE:

Please list at least 3 recent projects you have completed:

Project Name	General Contractor	Year	Scope

Do you have any experience using Procore? ☐ Yes ☐ No

PERFORMANCE & LEGAL DISCLOSURES:

Has your company or any of its owners, officers, or major shareholders ever petitioned for bankruptcy, been terminated on a contract, or failed to complete work awarded it? ☐ Yes *(explain below)* ☐ No

Is your company or any of its owners, officers, or major shareholders currently involved in any arbitration, litigation, or have any outstanding judgments or claims against it? ☐ Yes *(explain below)* ☐ No

INSURANCE & SAFETY:

Please attach a copy of your certificate of insurance and fill in the tables below for the last 3 years.

OSHA 300 Information:	2022	2023	2024
Total Number of Recordable Claims			
Total Number of Lost Time Injuries			
Total Number of Fatalities			

Worker's Compensation:	2022	2023	2024
Experience Modification Rate (EMR)			

Please indicate any circumstances or unusual events that may have contributed to an elevated EMR (over 1.0) as well as any safety program changes subsequently enacted to enhance the safety of your workers.

Does your company have a written safety program? ☐ Yes ☐ No

Are your employees OSHA certified? ☐ Yes – OSHA 10 ☐ Yes – OSHA 30 ☐ No

DISCLAIMER AND SIGNATURE:

I certify that my answers are true and complete to the best of my knowledge. If this application leads to subcontracting opportunities, I understand that false or misleading information in my application or interview may result in my Companies release and not being considered for future subcontracting opportunities.

Signature: _____ **Date:** _____

Print Name: _____ **Title:** _____

THIS APPLICATION MUST BE FILLED OUT COMPLETELY AND SENT TO SUB@CREATIVEBUILDERS.NET
Please include a copy of your Certificate of Insurance (COI) and any certifications (if applicable).