PREQUALIFICATION APPLICATION

It is HESS policy that all subcontractors have a current prequalification application on file to be awarded a contract. Prequalification's are used by HESS to evaluate the qualifications of a subcontractor to perform the specific work for which they are being considered. Subcontractor financial information is held in strict confidence and only reviewed by our executive management team for the purpose of qualifying the organization. At no time will any information be shared with a third party.

HESS uses an internet and e-mail based system to collect evaluations from your references. Please be sure you have valid email addresses for your references.

Please return the prequalification application to Sasha Raab, sraab@HESSconstruction.com.

SUBCONTRACTOR PREQUALIFICATION APPLICATION				
Date:	• CM Project Specific • New Application • Renewal If CM Project Specific is selected THEN			
	PROJECT SPECIFIC APPLICATION: (For Construction Management Projects)	PRIME TRADE BID PACKAGE:		
PLEASE MAKE SURE THE FOLLOWING ARE ATTACHED: Audited financial statements for last 3 years Sample insurance certificate Insurance broker / NCCI verification of EN	ИR			

NAME OF COMPANY			PRIMARY ESTIMATING CONTACT
DDRESS 1			TELEPHONE
ADDRESS 2		EMAIL	
OTY	STATE	ZIP CODE	
PHONE	FAX	WEBSITE	CORPORATE OFFICER (Authorized to Sign Contracts)
OF EMPLOYEES	STATE OF FO	DRMATION	
ED TAX ID#	DUNS#	DATE FORMED	TELEPHONE
			EMAIL

SERVICES

HESS is committed to inclusion and maximizing participation of local, small, minority, veteran, women and disadvantaged business enterprises on our projects.

Subcontractor Certifications • YES • SKIP

(this is a repeat of the Subcontractors Registration From)

Please select CSI Division that most closely applies to your company*

Supplier or • Trade Contractor

• Division 01 — General Requirements

Division 02 — Site Construction

Division 03 — Concrete Division 04 — Masonry

Division 04 — Masonry Division 05 — Metals

Division 06 — Wood and Plastics

Division 07 — Thermal and Moisture Protection

Division 08 — Doors and Windows

 ${\rm Division}\ 09-{\rm Finishes}$

Division 10 — Specialties

Division 11 — Equipment

Division 12 — Furnishings

 $\begin{array}{l} {\rm Division} \ 13 - {\rm Special} \ {\rm Construction} \\ {\rm Division} \ 14 - {\rm Conveying} \ {\rm Systems} \end{array}$

Division 15 — Mechanical

Division 16 — Electrical

FINANCAL					
FINANCIAL (Audited Financial Statements for the Year CURRENT Last Year Prior Year Revenue(\$)	e last 3 years must accon	npany this fo	rm)		
EXPECTED ANNUAL REVENUE THIS YEAR (\$) CURRENT BACKLOG VALUE (\$) # OF PROJECTS I FINANCIAL INSTITUTION CREDIT LINE (\$) DO YOU HAVE AN INDEPENDENT ACCOUNTING NAME OF INDEPENDENT ACCOUNTING FIRM	N CURRENT BACKLOG FIRM? YES NO		_		
BONDING & INSURANCE					
ARE YOU ABLE TO PROVIDE PAYMENT AND PER NAME OF SURETY	AGGREGATE mount \$ mum Insurance coverage: I with the Prequalification Age Automotive Liability as income and a surface of all vendors unless required of all vendors unless required of a section of the control of the	_RATING (\$) oplication verificated below. ired by bid doc 1,000,000 per coccurrence ase/\$1,000,000	ying that the Contra Waiver of Subrog uments to be greate occurrence/\$2,000,0	er: OOO aggregate (Only required if the	ies and a 30-Day Notice of
SAFETY					
Any OSHA Citations in the last 3 years?	Yes No	If yes, pleas	se explain:		
Do you perform regular job site safety inspections?		Yes No			
EXPERIENCE MODIFICATION RATE		_			
Experience Modification Rate (EMR for past thr *Attach Insurance Broker/NCCI verification of r *If current EMR is above 1.00, attach letter of e	nost current EMR	-	201	201	201

REFERNCES

Provide project information and references utilizing this form below, on your companies 5 largest relevant projects completed in the 24 months prior to the date of submission. Include a description of the scope of work provided on each project. Also provide reference contact names, addresses, telephone numbers, and e-mail addresses for each project. Projects submitted as references must be verifiable. Failure to provide project references that can be verified will result in an incomplete application.

vermed win result in an incomplete application.	
	DROUGHT ONE
Name of Project/Location:	PROJECT ONE
Project Completion Date:	
Contract Amount:	
Scope of Work:	
Reference Contact Name/Title:	
Reference Contact Company/Agency Name:	
Reference Contact Telephone:	
Reference Contact E-Mail:	
	PROJECT TWO
Name of Project/Location:	
Project Completion Date:	
Contract Amount:	
Scope of Work:	
Reference Contact Name/Title:	
Reference Contact Company/Agency Name:	
Reference Contact Telephone:	
Reference Contact E-Mail:	
	DOOLEGE TUDE
Name of Project/Location:	PROJECT THREE
Name of Project/Location.	
Project Completion Date:	
Contract Amount:	
Scope of Work:	
Reference Contact Name/Title:	
Reference Contact Company/Agency Name:	
Reference Contact Telephone:	
Reference Contact E-Mail:	
	PROJECT FOUR
Name of Project/Location:	
Project Completion Date:	
Contract Amount:	
Scope of Work:	
D 6	
Reference Contact Name/Title:	
Reference Contact Company/Agency Name:	
Reference Contact Telephone:	
Reference Contact E-Mail:	
	PROJECT FIVE
Name of Project/Location:	
Project Completion Date:	
Contract Amount:	
Scope of Work:	
Reference Contact Name/Title:	
Reference Contact Company/Agency Name:	
Reference Contact Telephone:	
Reference Contact E-Mail:	

COMPLETED BY	
DATE COMPLETED	_
TELEPHONE	
EMAIL	

PLEASE MAKE SURE THE FOLLOWING ARE ATTACHED:

- Audited financial statements for last 3 years
- Surety bonding confirmation letter

- Sample insurance certificate
- Insurance broker / NCCI verification of EMR

* Upon clicking Submit, you will be prompted to select what type of e-mail you are using; **Desktop E-mail Application** (i.e., Microsoft Outlook, Eudora, etc.) or **Internet E-mail Application** (i.e., Yahoo, MSN, Hotmail, etc.)

If you are still having trouble, please save this completed form to your computer, create a new e-mail to Sasha Raab sraab@HESSconstruction.com and manually attach the file and required attachments.

SUBMIT APPLICATION

Thank you.

HESS Estimating Department