



SUBCONTRACTOR PRE-QUALIFICATIONS

Date: _____

Project: CMC Vail-Eagle Campus – Addition/Renovation

Location: Edwards, Colorado

Subcontractor Name: _____

Subcontractor Specialty: _____

Legal Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone: _____ **Fax:** _____

Point of Contact: _____

Single Project Bonding Capacity: \$ _____

Past Experience:

Project size completed over the past 3 years (dollar value)

- | | | |
|------------------------|----|-------|
| 1) Project Name: _____ | \$ | _____ |
| 2) Project Name: _____ | \$ | _____ |
| 3) Project Name: _____ | \$ | _____ |

Insurance Requirements:

	Yes	No
General Aggregate - \$2,000,000.00:	_____	_____
Product-Completed Ops - \$2,000,000.00:	_____	_____
Each Occurrence - \$1,000,000.00:	_____	_____
Personal Injury - \$1,000,000.00:	_____	_____
Auto-All Vehicles - \$1,000,000.00 Combined Single Limit:	_____	_____
Umbrella - \$2,000,000.00:	_____	_____
Workman's Compensation:		
\$100,000.00 E.L. Each Accident	_____	_____
\$500,000.00 E.L. Disease-Policy Limit	_____	_____
\$100,000.00 Disease –Each Employee	_____	_____

Other Information

Safety EMR of 1 or less over the last 3 years: _____

Past work experience with Colorado Mountain College: _____

Local Employer: _____

Average number of employees over past three years: _____

General Contractor References

- | | |
|----------------|--------------|
| 1) Name: _____ | Phone: _____ |
| 2) Name: _____ | Phone: _____ |
| 3) Name: _____ | Phone: _____ |