



**HASEN**

DESIGN BUILD & DEVELOPMENT

## Contractors Qualification Statement

The Undersigned certifies under oath that the information provided herein is true and sufficiently complete so as not to be misleading.

---

SUBMITTED TO: HASEN Construction Services

ADDRESS: 2900 Photo Ave.

Fort Worth, Texas 76107

SUBMITTED BY: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: □

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME OF PROJECT: \_\_\_\_\_

TYPE OF WORK (Trade Specific): \_\_\_\_\_

1. How many years has your organization been in business as a Contractor? \_\_\_\_\_
2. How many years has your organization been in business under its present business name? \_\_\_\_\_
3. Under what other or former names has your organization operated?  
 □
  
4. If your organization is a corporation, answer the following:
  - a. Date of incorporation: \_\_\_\_\_
  - b. State of incorporation: \_\_\_\_\_
  - c. President's name: \_\_\_\_\_
  - d. Vice Presidents name(s)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - e. Secretary's name: \_\_\_\_\_
  - f. Treasurer's name: \_\_\_\_\_
5. If your organization is a partnership, answer the following:
  - a. Date of organization: \_\_\_\_\_
  - b. Type of partnership (if applicable): \_\_\_\_\_
  - c. Name(s) of general partner(s): \_\_\_\_\_
6. If your organization is individually owned, answer the following:
  - a. Date of organization: \_\_\_\_\_
  - b. Name of Owner: \_\_\_\_\_
7. If the form of your organization is other than those listed above, describe it and name the principals.  
 □

-

8. List the jurisdictions and trade categories in which your organization is legally qualified to do business, and indicate registration or license numbers, if applicable.  
□
  
9. List jurisdictions in which your organization's partnership or trade name is filed.  
□
  
10. List the categories of work that your organization normally performs with its own forces.  
□
  
11. Claims and Suits. (If the answer to any of the questions below is yes, please attach details.)
  - a. Has your organization ever failed to complete any work awarded to it? \_\_\_\_\_
  - b. Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against your organization or its officers? \_\_\_\_\_
  - c. Has your organization filed any law suits or requested arbitration with regard to construction contracts within the last five years? \_\_\_\_\_
  
12. Within the last 5 years, has any officer or principal of your organization ever been an officer or principal of another organization when it failed to complete a construction contract? (If the answer to any of the questions below is yes, please attach details.)  
□
  
13. On a separate sheet, list major construction projects your organization has in progress giving the name of project, owner, architect, contract amount, percent complete and scheduled completion date. State total worth of work in progress and under contract:  
□
  
14. On a separate sheet, list the major projects your organization has completed in the past five years, giving the name of the project, owner, architect, and contract amount, date of completion and percentage of the cost of work performed with your own forces.
  
15. State average annual amount of construction work performed during the past five years.  
□

✓

16. Below or on a separate sheet, list the construction experience and present commitments of the key individuals of your organization.

□

17. On a separate sheet, list similar project experience to this project that your organization has in progress or have completed giving the name of project, project address, square footage, owner, architect, contract amount, percent complete and or scheduled completion date. List references contact names and telephone numbers for above list of similar projects. Provide any available photos for above list of similar projects.

18. On a separate sheet, provide Proposed Project Team included Experience/Qualifications.

19. Trade References: (Contact Names and Phone Numbers)

Company Name	Contact Name	Phone Number

20. Bank References: (Contact Names and Phone Numbers)

Bank Name	Contact Name	Phone Number

21. Surety:

- a. Name of bonding company: \_\_\_\_\_
- b. Agent Name: \_\_\_\_\_
- c. Agent Phone: \_\_\_\_\_
- d. Address of agent:  
□

22. Please provide a copy of your most recent company financial statements including a balance sheet and income statement.

23. Please provide any additional information that may help in the evaluation process.  
□

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

Name of Organization: \_\_\_\_\_

By (Print name): \_\_\_\_\_

Title: \_\_\_\_\_

Signed: \_\_\_\_\_

Witness: \_\_\_\_\_

**NOTE: For items requiring an attachment, be sure and put the appropriate item # on each attachment.**