Contractor's Questionnaire

Form A



п	nsti	""		\sim	nc
п	1131	·	L. L	w	113

The Lender requires that this questionnaire be completed in detail, dated and signed by the general contractor. Please provide complete addresses and telephone numbers where requested.

Вс	rrower(s) Name				
Ge	neral Information				
Na	me of Contractor (exac	ctly as it appears on State	Contractor's License)		
Вι	Business Name (including DBA) Number of years in business				
Вι	siness Address				
Ci	ty		State	Zip Code	
Вι	siness Telephone (area	a code)	Fax (area code)		
Er	nail Address				
В	usiness Informatio	on			
Fe	deral Tax ID Number				
St	ate Contractor's Licens	e Number	Class(es)		
ls	your License in good s	tanding?			
	Yes No - ex	plain on a separate sheet	and include with this completed questionnaire.		
Н	ave you ever had a Cor	ntractor's License revoked	?		
	No Yes-e	xplain on a separate shee	t and include with this completed questionnaire.		
Na	ame Here				
ls	your business a Sole	Proprietorship?			
Sc	Sole Proprietor's Name Years experience in residential construction				
ls	your business a Partr	nership?			
Pa	Partner Name Title				
Pe	Percent Owned Years experience in residential construction				
Pa	Partner Name Title				
Pe	rcent Owned		Years experie	ence in residential construction	
ls	your business a Corp	oration?			
CE	EO/President		Percent Owned Years experi	ence in commercial construction	
CF	O/Controller		Percent Owned Years experi	ence in commercial construction	
H	Have you, your organization, any officer or partner ever failed to complete a construction contract or failed in a construction related business?				
	No Yes-e	xplain on a separate shee	t and include with this completed questionnaire.		
Aı	e you or your organiza	tion currently involved in a	ny disputes, lawsuits, judgements, liens or surety	claims?	
	No ☐ Yes - e	xplain on a separate shee	t and include with this completed questionnaire.		
		ets Completed Histo gross sales and number of	ry projects completed for each of the last three fisca	l years.	
	Year	Gross Sales(\$)	# of Renovation Projects Completed	# of Ground Up New Construction Projects Completed	
1.	2020				
2.	2019				
3	2018				

Contractor's Questionnaire

Form A

Continued - Page 2



R	References			
	Previous Residential Project References dentify your company's gross sales and number of project.	cts completed for each of the last three ca	endar or fiscal years.	
1.	Client	Contract Amount (\$)	New Construction	Remodel
	Address	City	State	Zip Code
	Telephone (area code)			
2.	Client	Contract Amount (\$)	New Construction	Remodel
	Address	City	State	Zip Code
	Telephone (area code)			
3.	Client	Contract Amount (\$)	New Construction	Remodel
	Address	City	State	Zip Code
	Telephone (area code)			
R	esidential Projects - Identify the total number of resider	ntial projects completed for this business e	ntity:	
	Subcontractor References ist major trade subcontractor references - attach a sepa	rate sheet if necessary.		
1.	Company	Contact Name		
	Telephone (area code)	Fax (area code)		
	Email			
	How many years have you worked with this subcontra	actor?	Type of Sub	
2.	Company	Contact Name		
	Telephone (area code)	Fax (area code)		
	Email			
	How many years have you worked with this subcontra	actor?	Type of Sub	
3.	Company	Contact Name		
	Telephone (area code)	Fax (area code)		
	Email			
	How many years have you worked with this subcontra	actor?	Type of Sub	
	Supplier References ist major trade suppliers - attach a separate sheet if nec	essary.		
1.	Company	Contact Name		
	Telephone (area code)	Fax (area code)		
	How many years have you worked with this supplier?		Type of Supplier	
2.	Company	Contact Name		
	Telephone (area code)	Fax (area code)		
	How many years have you worked with this supplier?		Type of Supplier	
3.	Company	Contact Name		
	Telephone (area code)	Fax (area code)		
	How many years have you worked with this supplier?		Type of Supplier	
В	Banking Reference - Identify your bank with whor	m you have current business account	s.	
Bank Name Contact Name				
Te	elephone (area code)	Fax (area code)		

Contractor's Questionnaire

Continued - Page 3

Form A



Filing your Completed Questionnaire

After signing the Declarations and Authorization to Release Information section which immediately follows these instructions, return this completed questionnaire and any additional attachments to the Lender along with the documents listed below.

Important Note: Your questionnaire cannot be processed without the following documents on file.

- 1. Copy of State Contractor's License
- 2. Copy of Declarations Page of Worker's Compensation Insurance
- 3. Copy of Declarations Page of General Liability
- 4. Copy of valid driver's license
- 5. Valid, completed W-9 form
- 6. List all projects completed within the past 3 years or a minimum of 10 projects, whichever is less.

Please sign and complete the following:

The undersigned hereby declares that the statements made to Lender herein are true and correct, and authorizes Lender to obtain personal and/or business credit information should Lender deem it necessary.

The undersigned has been advised and further authorizes Lender to obtain information concering the undersigned's past employment, past performance, construction contracts, work history, credit and any other matter which Lender deems relevant and also authorizes, but does not require Lender to disclose any such information to Lender's borrower and/or necessary persons. The undersigned hereby agrees that so long as Lender acts in good faith, Lender and Lender's agents shall be held harmless and shall be indemnified in connection with any claims, suits, actions or the like which relate in any way to said investigation or disclosures.

Individual or Sole Proprietor

Signature	Date		
Print Name	Social Security Number		
Partnership or Corporation (All listed principals must execute this document and provide Social Security Numbers.)			
Authorized Officer Signature	Date		
Print Name	Title		
Social Security Number			
Authorized Officer Signature	Date		
Print Name	Title		
Social Security Number			