



A.G. Sadowski Company

Surety Bonds & Insurance

SERVING THE CONSTRUCTION INDUSTRY SINCE 1976

Contractor's Questionnaire



The purpose of this questionnaire is to develop sufficient information to assist us in evaluating your qualifications so that we will be able to put you in a position to provide **MAXIMUM BONDING CAPACITY**. If additional space is needed, attach extra pages. Please be certain that all questions are answered completely. If you require assistance on any section of this questionnaire, please feel free to give our office a call.

Information Needed:

In order for us to respond timely to your request for credit, please enclose the following:

- * Last three fiscal year-end financial statements with appropriate supporting schedules
 - *Job schedules (both open and closed)
 - *Accounts receivable and payable aging schedules
 - *G & A schedule
- *Current Interim financial statement with appropriate supporting schedules
- *Personal financial statements for all owners with appropriate supporting schedules
 - *Real estate schedule
 - *Marketable securities schedule
 - *Investment schedule
- *Trust Agreements (if any assets of owners are held in Trusts)
- *Continuity Plan (ex. life insurance, buy-sell agreement)
- *Bank Loan Agreement (specifying line of credit)
- *Limited Liability Company Articles and Operating Agreement (if applicable)
- *Current Work in Progress schedule, listing all projects and work to be completed
- *Resumes of principal(s) and key personnel
- *Bid/Contract information if specific bond is needed at this time

Name of Firm: _____
 Address: _____

Phone Number: _____
 Federal Tax ID#: _____

Type of Business:

Corporation Subchapter S Corporation Partnership Limited Liability Company Joint Venture Sole Proprietorship

Year Business Started: _____ Years Operated Under Current Management: _____

Type of construction: _____ What percentage of your work is performed as a general contractor? _____%, as a subcontractor _____%

What percentage of your work do you typically sub to others? _____% Do you bond your major subcontractors: _____

What criteria does the firm use to determine if a subcontractor will be bonded? _____

List construction license types held by your firm with license number and state that you are licensed in: _____

Will shareholders and spouses personally indemnify Surety? () Yes () No If no, please explain: _____

Are any shareholders assets held in trusts? Yes () No If no, please explain: _____

If trust exist, will they indemnify Surety? () Yes () No If no, please explain: _____

Is a **formal** continuity plan in place for the succession of future management? () Yes () No

Is a **formal** buyout plan in place? () Yes () No If so, is the buyout plan fully funded by life insurance or other means? () Yes () No

Are there any liens filed against the company's or related entity's projects? () Yes () No If Yes, please explain: _____

Are you involved in any litigation? () Yes () No If Yes, please explain: _____

Is the company a subsidiary, parent or holding company of any other company? () Yes () No If Yes, which one? _____

Has there been any change in the control of the company or any related entity in the past three years? () Yes () No If Yes, please explain: _____

Has the company ever failed to complete a contract? () Yes () No If Yes, please explain: _____

Has any individual or company ever filed for bankruptcy or held a senior management position with a firm that has caused a surety or bank a loss? () Yes () No
 If Yes, please explain: _____

Is the organization applying for Suretyship, a () Union () Non-Union () Double-Breasted or () Open Shop Contractor?

In what geographic area do you work? _____

Have you ever worked outside your normal geographic area? () Yes () No If so, where _____



Officers, Key Personnel, and Shareholders:

Name: _____ Date of Birth _____ Social Security Number: _____
 Address: _____ () Own () Rent Phone Number _____
 How long in this industry? _____ How long with this firm? _____ Percentage of Ownership _____ Position _____
 Spouse's Name: _____ Social Security Number: _____ Phone Number: _____

Name: _____ Date of Birth _____ Social Security Number: _____
 Address: _____ () Own () Rent Phone Number _____
 How long in this industry? _____ How long with this firm? _____ Percentage of Ownership _____ Position _____
 Spouse's Name: _____ Social Security Number: _____ Phone Number: _____

Name: _____ Date of Birth _____ Social Security Number: _____
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 How long in this industry? _____ How long with this firm? _____ Percentage of Ownership _____ Position _____
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Name: _____ Date of Birth _____ Social Security Number: _____
 Address: _____ () Own () Rent Phone Number _____
 How long in this industry? _____ How long with this firm? _____ Percentage of Ownership _____ Position _____
 Spouse's Name: _____ Social Security Number: _____ Phone Number: _____

Subsidiary / Affiliated Companies:

Name: _____ % of Common Ownership _____ Function/Purpose of Company _____ Operating Company () Yes () No
 Name: _____ % of Common Ownership _____ Function/Purpose of Company _____ Operating Company () Yes () No
 Name: _____ % of Common Ownership _____ Function/Purpose of Company _____ Operating Company () Yes () No
 Name: _____ % of Common Ownership _____ Function/Purpose of Company _____ Operating Company () Yes () No

List Your 3 Largest Completed Contracts:

Description: _____ Year Completed: _____ Contract Price: \$ _____ Gross Profit: \$ _____
 Owner _____ Contact Name: _____ Contact Phone Number: _____

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 Owner _____ Contact Name: _____ Contact Phone Number: _____

Accounting

Name of Accounting Firm: _____ Contact Name: _____ Phone Number: _____
 On what level of assurance are financial statements prepared? () CPA Audit () CPA Review () CPA Complication () Internal
 How often? () Annual () Semi-Annual () Quarterly () Monthly
 In-house Software: _____

Bank Line(s) of Credit

Name of Bank: _____ Contact: _____ Phone Number: _____
 Type of Line: _____ Amount: \$ _____ Years with this bank? _____

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 Type of Line: _____ Amount: \$ _____ Years with this bank? _____

Name of Bank: _____ Contact: _____ Phone Number: _____
 Type of Line: _____ Amount: \$ _____ Years with this bank? _____



Previous Bonding Companies

Name of Surety: _____ How Long: _____ Reason for leaving? _____

Date any amount of largest single contract bonded _____ (YEAR) Largest work on hand at any one time \$ _____ during _____ and consisted of _____ contracts.

Bond credit desired: Single contract \$ _____ Total work program at any one time \$ _____

Has any bonding company ever declined to furnish you or your company a bond? () Yes () No If yes, why? _____

Have you provided collateral to the bonding company? _____ If yes, describe _____

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Bond credit desired: Single contract \$ _____ Total work program at any one time \$ _____

Has any bonding company ever declined to furnish you or your company a bond? () Yes () No If yes, why? _____

Have you provided collateral to the bonding company: () Yes () No If yes, please describe: _____

Insurance

Does your company carry insurance for:

Liability with completed operations () Yes () No Limits: _____
 Workers' Compensation () Yes () No Limits: _____
 Property Owned/Leased () Yes () No Limits: _____
 Equipment Owned/Leased () Yes () No Limits: _____

Note: It may be necessary to verify that specific insurance is in full force and effect prior to bond issuance.

Business Life Insurance:

Insured: _____ Insurance Company: _____ Beneficiary: _____ Amount: \$ _____
 Insured: _____ Insurance Company: _____ Beneficiary: _____ Amount: \$ _____
 Insured: _____ Insurance Company: _____ Beneficiary: _____ Amount: \$ _____

Who is your Broker/Agent for insurance? _____

References

List the four largest contracts completed in the last five years:

Owner/General Contractor: _____ Phone: _____ Fax: _____
 Address: _____ Contact: _____ Contract Price: _____ Gross Profit: _____
 Job Description/Location: _____ Bonding Company: _____ Years Completed: _____

Owner/General Contractor: _____ Phone: _____ Fax: _____
 Address: _____ Contact: _____ Contract Price: _____ Gross Profit: _____
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The Applicant(s) hereby represent that the above statements and responses are accurate and authorize A.G. Sadowski Company and its affiliates to contact the references listed above. In addition, as a part of the underwriting process, our surety partners retain the right to investigate personal credit history. To the extent required by law, we will upon request, provide where or not a consumer report has been requested. If so, the name and address for the consumer reporting agency furnishing the report.

Prepared by: _____ Position: _____ Signature: _____ Date: _____