



Contractor's Information

In an effort to become familiar with general contracting firms, trade contractors and construction vendors/suppliers, we have developed a Contractor's Information Statement. Here at UNCG, we understand the meaning of data confidentiality. Information obtained from the survey will be kept in strict confidence. The information will be utilized to:

- Determine the capacity of general contracting firms and trade contractors
- Create a database for recruitment
- Develop opportunities for training and development
- Creating opportunities for partnering with other firms
- Maintain a high quality work standard

Your cooperation in completing this survey would be greatly appreciated. It is our goal to ensure that qualified contractors and vendors have an opportunity to participate on projects at UNCG. We need your involvement to reach that goal successfully. If you have any questions or concerns, please contact Tony Phillips, HUB Coordinator, by phone (336) 256-1069, Fax (336) 334-3212, or e-mail a_philli@uncg.edu

Thank you for your time.

Please return completed survey IMMEDIATELY to:

By Mail:

**Tony Phillips, HUB Coordinator
University of North Carolina at Greensboro
Gray Home
105 Gray Drive
Greensboro, NC 27412**

By Email: a_philli@uncg.edu

By Fax: (334) 334-3212



COMPANY PROFILE INFORMATION

COMPANY NAME: _____

CONTACT: _____ TITLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____ EMAIL: _____

Corporation Partnership Individual Joint Venture Other

UNCG is committed to increase HUB (Historically Underutilized Businesses) contractor/ vendor participation. The following information must be completed (51% owned and controlled by the following).

- African American (B) American Indian (AI) Asian American (AI) Hispanic (H)
 Female Owned (F) (**non-minority**) Small Business Enterprise (SBE)
 Socially & Economically Disadvantaged as defined in 15 U.S.C. 637 (DBE)
 None of the above

Type of Work: _____
(Please state work normally performed and attached the company's Certificate of Insurance)

Federal ID #: _____

List License(s) and # held: *(if applicable)*: _____

Experience:

1. Number of years in business: _____ 2. Payment terms: _____

3. What is your bonding capacity? *(not required to register)* \$ _____ None ____ Unsure of capacity: ____

4. Does your company have a line of credit? ____ No ____ Yes, how much? *(optional)* _____

5. What is your target volume (in dollars) for a single project?

under \$50K under \$100K \$100 - \$500K \$500K - \$1M above \$1M

6. On a separate sheet, list 3 projects your company **has completed** for the scope of work that you are targeting for in the last five years. Provide the following information for each project:

- Name of Project
- Owner
- Architect
- General Contractor
- Contract Amount
- Date of Completion
- Percentage of work performed with your own forces
- Reference

Signature

Title

Date

I certify that the above information submitted in this document is correct and accurate of this company's current profile.

Project History #1:

Name of Project: _____

Owner: _____

Architect: _____

General Contractor: _____

Contract Amount: _____

Date of Completion: _____

Percentage of Work Performed With Your Own Forces: _____

Reference(s): _____

Project History #2:

Name of Project: _____

Owner: _____

Architect: _____

General Contractor: _____

Contract Amount: _____

Date of Completion: _____

Percentage of Work Performed With Your Own Forces: _____

Reference(s): _____

Project History #3:

Name of Project: _____

Owner: _____

Architect: _____

General Contractor: _____

Contract Amount: _____

Date of Completion: _____

Percentage of Work Performed With Your Own Forces: _____

Reference(s): _____