



70 Griffin Road South
Bloomfield, CT 06002-1352
860-242-5565
www.bbeinc.com

BIDDER PRE-QUALIFICATION FORM

Kindly provide the following information that will help us contact you for future bid opportunities.

Company:

Name:

Address:

City:

State:

County:

Zip Code:

Primary Contact:

Name:

Title:

Office Phone Number:

Cell Phone Number:

Email Address:

Company Information:

What Trade Packages are you interested in bidding?

Is the firm signatory to any labor unions?

What is your geographical territory?

What is the dollar range of projects that you would bid?

Years in Business:

Is the firm an SBE?

Is the firm an MBE, WBE, or DBE?

Is the firm State of Connecticut, Massachusetts or Rhode Island prequalified?

Safety Information:

Current Experience Modification Rating (EMR)? _____ Last Year? _____ 2 years ago? _____

OSHA incident rates:

Recordable:

Lost work days:

Do you have a written Safety Plan?

Do you have a dedicated Safety Officer?

Bidding:

Are you registered with iSqFt and able to receive their emails?

Are you able to meet any delegated design requirements if applicable?

Bartlett Brainard Eacott, Inc.
General Contractors • Construction Management

Bartlett Brainard Eacott, Inc. is an affirmative action/equal opportunity employer



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Are you able to bid projects that have the following requirements?

Bid bond:

Performance & Payment bonds:

CHRO plan requirements:

Prevailing wages:

Please list five or six owner and/or general contractor/construction manager references. Kindly make sure that you include email and phone number:

| Contracting Company | Project Name | Reference Name | Title | Phone | Contact email |
|---------------------|--------------|----------------|-------|-------|---------------|
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What is the dollar value of the largest project completed to date?

In the last three years has your company had any legal actions pending or settled?

How many employees do you presently have?

Management: _____ Admin/Accounting: _____ Field/Tradespeople: _____

Please provide a sample certificate of insurance.

Other Company Contacts

Name:

Title:

Office Phone Number:

Cell Phone Number:

Email Address:

Name:

Title:

Office Phone Number:

Cell Phone Number:

Email Address:

When completed, please send to prequalification@bbeinc.com along with supporting information. Thank you for your interest in working with BBE

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