



Preconstruction Services Department Subcontractor Profile

Pooley Enterprises, Inc.

3601 Vineland Rd, Suite #4, Orlando, FL 32811

Phone: (407) 363-1993 Fax: (407) 363-1099

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Contact Person: _____ Email: _____

(This person will receive the Invitation to Bid)

Please indicate which (if any) of the following apply to your company:

Minority Business Enterprise _____ Women Business _____ Disadvantaged Business _____

Small Women Owned Business _____ Small Business _____ IF APPLICABLE, PLEASE ATTACH YOUR CERTIFICATE

Is your company bondable? _____ If yes, what is your maximum bond capacity? _____

D&B Rating: _____ Annual Sales Revenue: \$ _____

Federal I.D. No.: _____ Total # of Staff Employed: _____

What states are you licensed to perform business operations? _____

License No.: _____ Year Incorporated: _____ Years performing work specialty: _____

Do you carry Workers' Compensation Coverage?: _____ For what states: _____

Do you carry General Liability Coverage?: _____ General Aggregate Amount: \$ _____ Each Occurrence: \$ _____

Average Contract Size: \$ _____ Maximum: \$ _____ Minimum: \$ _____

Is your company owned by another company? If so, which company? _____

Does your company specialize in any of the following types of construction projects?

____ Office Buildings ____ Medical ____ Retail ____ Hotels

____ Schools ____ Themed Attractions ____ Industrial ____ Apartments

Using the lines below, please indicate the division(s) of work your company performs.

Please provide the following information:

Owner/GC References and Past Projects

Names of Principals

Copy of Contractor License

Certificate of Insurance

W-9 Form

Workman's Comp Certificate