



30141 Agoura Road, Suite 100, Agoura Hills, CA 91301 (818)706-0694 FAX: (818)706-3050

SUBCONTRACTOR REFERENCE QUESTIONNAIRE & OVERVIEW OF AMCAL EXPECTATIONS:

GENERAL INFORMATION:

TRADE: _____ COMPANY NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____

ZIP: _____ PHONE: _____ FAX: _____

EMAIL: _____ MAIN CONTACT: _____

1. What is the principal work performed by your organization? _____
2. How many years has your organization been in Business as a Subcontractor/Supplier? _____
3. How many years has your organization been in business under its present name? _____
4. Under what other or former names has your organization operated? _____
5. Has your company filed suit and/or has there here been a suit/judgment against your company in the last 5 years? If yes, please explain: _____
6. Do you normally perform the work with:
☐ Your own Full-time forces
☐ Supplemental forces from the following sources

OWNER NAME: _____ OWNER PHONE/FAX: _____
CONTRACTOR'S LICENSE #: _____ MONETARY LIMIT: _____
UNION / NON-UNION: _____ FEDERAL TAX ID: _____

SPECIAL CERTIFICATIONS: PLEASE CHECK BELOW AND ATTACH COPY OF CERTIFICATE IF APPLICIABLE:

(MBE / WBE / DBE / DVBE / SLBE / CALTRANS CERT)

BONDING: Is your company bondable? _____
If so, to what amount are you bondable? _____
If not, are you willing to sign a personal guarantee? _____

BONDING COMPANY NAME: _____ PERSON TO CONTACT: _____

EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

WORK REFERENCES: (Recently completed and current projects)

PROJECT NAME: _____

LOCATION: _____ PROJECT TYPE: _____

NUMBER UNITS/STORIES: _____ DATE COMPLETED: _____

CONTRACT AMOUNT: _____ *BUILDER: _____

*BUILDER'S SUPERINTENDANT NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

*BUILDER'S PROJECT MANAGER NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

*BUILDER'S VICE PRESIDENT NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

PROJECT NAME: _____

LOCATION: _____ PROJECT TYPE: _____

NUMBER UNITS/STORIES: _____ DATE COMPLETED: _____

CONTRACT AMOUNT: _____ *BUILDER: _____

*BUILDER'S SUPERINTENDANT NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

*BUILDER'S PROJECT MANAGER NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

*BUILDER'S VICE PRESIDENT NAME & PHONE: _____

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EMAIL ADDRESS/FAX: _____

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EMAIL ADDRESS/FAX: _____

*BUILDER'S PROJECT MANAGER NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

*BUILDER'S VICE PRESIDENT NAME & PHONE: _____

EMAIL ADDRESS/FAX: _____

BALANCE SHEET:

Please attach a copy of your most recent company balance sheet.

SUPPLIER REFERENCES:

SUPPLIER NAME: _____

PERSON TO CONTACT: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

SUPPLIER NAME: _____

PERSON TO CONTACT: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

SUPPLIER NAME: _____

PERSON TO CONTACT: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

BANK REFERENCES:

BANK NAME: _____

PERSON TO CONTACT: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

BANK NAME: _____

PERSON TO CONTACT: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

BANK NAME: _____

PERSON TO CONTACT: _____ EMAIL ADDRESS: _____

PHONE: _____ FAX: _____

AMCAL EXPECTATIONS

- **Safety Program/Hard Hat Usage**

AMCAL Policy: We will promote and protect the health and well-being of our employees, Trade Contractors and visitors and effectively manage illness and injury to reduce cost.

AMCAL expects Trade Contractors to have in place a written safety program.

AMCAL expects Trade Contractors to take safety precautions seriously by always complying with safety rules and regulations (O.S.H.A.) and understanding AMCAL's Safety Program.

AMCAL expects Trade Contractors to wear Hardhats and Work boots 100% of the time while onsite. Eye, hand and hearing protection will be worn as the job requires.

AMCAL expects those operating equipment including hand tools to be instructed and properly trained. If certification is required proof shall be provided upon request.

Each Trade Contractor is responsible for keeping the jobsite clean each day.

- **Quality and Workmanship**

AMCAL's standards go beyond that of most other builders. AMCAL expects Trade Contractors to understand and comply with these standards.

All work must be performed to the highest quality possible, using qualified trade workers.

- **Construction Schedule**

Trade Contractor must provide and maintain sufficient labor force, materials and equipment to complete the work expeditiously as per AMCAL schedule requirements.

Trade Contractors are required to attend weekly scheduling/coordination meetings. Six day work week

- **Warranty Work Within 7 Days**

Trade Contractor shall guarantee all work performed for 12 months after Notice of Completion.

Trade Contractor shall respond to and investigate all customer service complaints within 48 hours of notification.

Trade Contractor shall completely correct all complaints within a period of 5 days after investigation.

AMCAL reserves the right to back charge Trade Contractor when Trade Contractor fails to respond to a customer service complaint within an adequate time frame.

I, _____, certify that the above information is true and that I have read and understand the expectations set forth by AMCAL above as a condition of bidding and working for your company as a subcontractor.

OWNER

COMPANY NAME

[illegible]