



## Subcontractor's Qualification Form

Email Application to: [Subcontractors@newvillagebuilders.com](mailto:Subcontractors@newvillagebuilders.com)

Fax application to: (703) 726-8791

Company Name:

Address:

City: State: Zip Code:

Phone: Fax:

E-mail: Website:

Contact Name: Title:

Phone: E-mail:

Check if applies:

Subcontractor  Supplier  Both

Trades/Codes:

Other Services:

Certifications:

MBE   
WBE   
DBE   
SBE   
HUB Zone

Type of Labor:

Union   
Open Shop

Certificate Number:

State:

- Please include your insurance certificate when submitting application, make it out to New Village Builders LLC

Work Experience:

Years in Business:

Average Contract Value: \$

Largest Contract Value: \$

Annual Volume: \$

List some of your most notable projects:

- Attach a list of most recent projects (if available)

Legal:

Has your company or any of its owners or officers been involved in any litigation, mediation, arbitration or prosecution of formal claims in connection with any contract or subcontract? If Yes, please explain:

Has your company or any of its owners ever petitioned for bankruptcy, failed in business, or defaulted or failed to complete a contract or subcontract? If Yes, please explain:

Has your company received an OSHA citation in the last 3 years? If Yes, please explain:

References:

1.) Name:

Company:

Address:

City: State: Zip Code:

Phone: Fax:

E-mail:

Business Relationship:

2.) Name:

Company:

Address:

City: State: Zip Code:

Phone: Fax:

E-mail:

Business Relationship:

3.) Name:

Company:

Address:

City: State: Zip Code:

Phone: Fax:

E-mail:

Business Relationship: