

TSBA

Tom Sauer Bond Agency, LLC

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CONTRACTOR'S QUESTIONNAIRE

Date: _____

1. Contractor's full name as licensed _____
2. Business Address _____ Phone _____
3. City _____ County _____ State _____ Zip _____

Corporation

Partnership

Proprietorship

4. Principals of the company are:

Name _____ Position / Title / % of ownership _____
Home Address _____ Hm Phone _____
Social Security# _____ DOB _____ Years in Industry _____ Years with Company _____
Personal Bank Name _____ Phone Number _____ Acct# _____

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Social Security# _____ DOB _____ Years in Industry _____ Years with Company _____
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5. What states are you licensed to contract in? _____
License # _____ Type of license _____ Federal Tax ID# _____
6. What class of construction do you specialize in? _____

7. Largest four (4) projects your organization has completed:

Location & Type	Amount	Date	Owner	Person to Contact	Phone#
A. _____					
B. _____					
C. _____					
D. _____					

8. Date Business started _____ Date incorporated _____ S or C Corp _____
9. Average number of projects underway at one time _____ Average size job _____
10. Largest amount of uncompleted work carried at one time _____ Number of Jobs _____

11. Do you have adequate equipment _____ Owned _____ Leased _____ Please provide terms of lease(s).
 12. Do you have financial or controlling interest in any other business or affiliated company? _____ If so, please describe _____
 13. Have you previously had ownership in any other businesses _____ If so, please provide company names, dates, and dispositions of previous companies _____
 14. Prior surety _____ If yes, name of surety _____ Largest bonded job _____
 Dates from _____ to _____ Reason for change _____
 15. Have you pledged collateral for any credit obligations? _____ If yes, what type of collateral has been pledged _____, amount _____ for what purpose? _____
 16. Percentage of work you perform as general contractor _____ as subcontractor _____
 17. What size projects and uncompleted work do you want at this time:
 Largest single job size \$ _____ Number of jobs _____ Total uncompleted work \$ _____

18: General Information:

Failed in business? _____ Declared bankruptcy _____ Have tax liens _____ Cancelled by or in claim with other surety company _____ Ever failed to complete a contract _____ Previous SBA bonds _____ Disputes on current work _____ Accounts receivable pledged _____ Accounts receivable in dispute _____ If YES to any of these questions please explain _____

19. All taxes current _____ All work presently undertaken current and on schedule _____ If NO on these, please explain _____

20. Who prepares your financial statements? _____ CPA? _____ PA? _____ Other? _____

21. How often are financial statements prepared _____ Method of Accounting _____

22. Name of Bank _____ Banker's Name _____

23. SBA Loan? _____ Amount _____ Balance _____ Monthly payments _____

24. Principal Suppliers:

Company	City	Contact Person	Acct#	Phone#
A. _____				
B. _____				
C. _____				
D. _____				

I hereby certify that all information presented above is complete and accurate to the best of my knowledge. My signature below authorizes TSBA to confirm and investigate this and all other statements and reports presented for underwriting consideration. My signature also authorizes TSBA to order credit reports it deems necessary.

By: _____
 Signature of Contractor Title Date

FRAUD NOTICE: Any person who knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison, denial of insurance, civil damages and is subject to be reported to the insurance department of the State.