



UNITED INSULATED STRUCTURES CORP.

5430 St. Charles Road
Berkeley, IL 60163
708.544.8200 (T)
708.544.8274 (F)
www.unitedinsulated.com

Vendor Qualification Form

Prequalification Form will NOT be accepted unless completed in its entirety

BUSINESS SECTION (please print or type)

Legal Business Name		Date:		
Address #1 (Street Address)		Project, if applicable:		
City		Type of Company		
State		<input type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Both		
Zip		Address #2 (Mailing Address)		
City		City		
State		State		
Zip		Zip		
Principal Contact	Contact's Title	Years in Business	# of Employees	Fed. Tax ID #
Telephone Number	Toll Free Number	Business Type:		Labor Affiliation:
Fax Number	Cellular Phone Number	<input type="checkbox"/> Corporation <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> LLC/LLP <input type="checkbox"/> Partnership <input type="checkbox"/> Other		<input type="checkbox"/> Union <input type="checkbox"/> Merit Shop
Contact Email Address		Company Website Address		
Company Certifications (Mark if appropriate) <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> DBE <input type="checkbox"/> VOSB <input type="checkbox"/> SBE <input type="checkbox"/> JSEB <input type="checkbox"/> Other _____				
Certifying Agency: <input type="checkbox"/> City _____ <input type="checkbox"/> State _____ <input type="checkbox"/> Federal <input type="checkbox"/> DOT <input type="checkbox"/> Other				
Design-Build Capabilities? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you failed to complete awarded work or been terminated for cause? (If yes, please explain below) <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, is engineering staff: <input type="checkbox"/> Internal <input type="checkbox"/> External				
Do you have any judgments, claims, arbitrations, suits, or liens currently against your organization, had any bankruptcies or reorganizations? (If yes, please explain below) <input type="checkbox"/> Yes <input type="checkbox"/> No				

List the corporate officers, partners, or proprietors of your firm: (If additional space needed, list on a separate sheet and attach to this form.)

Name	Title	% Ownership

Have any of the above officers ever done business with United Insulated Structures Corp. through another company? (If yes, please explain below) Yes No

SAFETY SECTION

List your Experience Modification Rate (EMR) for the last three years:		Number of OSHA Recordable incidents over the prior 3 years:
Year	Rate	_____
_____	_____	(Data available at www.osha.gov)
_____	_____	
_____	_____	

Do you have a written Safety Program? Yes No
Are all employees trained in safety requirements? Yes No
Do you have a Company Safety Director or other Safety Professionals on Staff? Yes No
If yes, Contact Name: _____ Phone: _____

PROJECT INFORMATION SECTION

List data for three most recent completed fiscal years

Year 1	Max. Contract Value Completed \$	Annual Company Revenue \$	Current Yr Company Workload \$
Year 2	Max. Contract Value Completed \$	Annual Company Revenue \$	Current Yr Company Backlog \$
Year 3	Max. Contract Value Completed \$	Annual Company Revenue \$	

Select the geographical areas from the listing below where your company is properly licensed and will provide quotes for work.
If only a portion of an area, please describe.

- All The United States
- AL CA FL IL KY MA MO ND NV OR SD VT WI
 AK CO GA IN LA MI MT NH NY PA TN VA WY
 AZ CT HI IA ME MN NC NJ OH RI TX WA
 AR DE ID KS MD MS NE NM OK SC UT WV
- International Canada Mexico Other _____

List license numbers of jurisdictions in which your company is legally qualified to work. (List additional on separate sheet.)

State	License Number	Expiration
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List the types of projects for which your company typically performs work or in which it specializes.

INSURANCE AND BONDING SECTION

Do you currently carry, or can you obtain the following insurance coverage?

- Worker's Compensation Statutory Maximum at Project Site Location? Yes No
- General Liability \$2,000,000 Yes No
- Automobile Liability \$1,000,000 Yes No
- Employer Liability Min. \$500,000 Yes No

Insurance Company	Insurance Agent	Insurance Agent Telephone
Bonding Company	Bonding Company Contact	Bonding Contact Telephone
	Total Bonding Capacity \$	Current Available Bonding Capacity \$

REFERENCE SECTION

Project References (within last three years)

Project Name	Project Location (City, State)	Completion Date (MM / YY)
Your Firm's Approximate Contract Amount \$	Project General Contractor	General Contractor Contact & Telephone Number

Briefly Describe Work Performed By Your Firm:

Project Name	Project Location (City, State)	Completion Date (MM / YY)
Your Firm's Approximate Contract Amount \$	Project General Contractor	General Contractor Contact & Telephone Number

Briefly Describe Work Performed By Your Firm:

Project Name	Project Location (City, State)	Completion Date (MM / YY)
Your Firm's Approximate Contract Amount \$	Project General Contractor	General Contractor Contact & Telephone Number

Briefly Describe Work Performed By Your Firm:

Project Name	Project Location (City, State)	Completion Date (MM / YY)
Your Firm's Approximate Contract Amount \$	Project General Contractor	General Contractor Contact & Telephone Number

Briefly Describe Work Performed By Your Firm:

Major Supplier References (list three current supplier references)

Company Name	Address
Contact	Phone

Company Name	Address
Contact	Phone

Company Name	Address
Contact	Phone

Bank References (list three financial references)

Financial Institution	Address	
Contact	Phone	Established Line of Credit? <input type="checkbox"/> Yes <input type="checkbox"/> No

Financial Institution	Address	
Contact	Phone	Established Line of Credit? <input type="checkbox"/> Yes <input type="checkbox"/> No

Financial Institution	Address	
Contact	Phone	Established Line of Credit? <input type="checkbox"/> Yes <input type="checkbox"/> No

SCOPES OF WORK SECTION (Scopes of work that your company performs. Check all that apply.)**01-000 GENERAL CONDITIONS**

- 1402 Geotechnical Investigation
- 1403 Material Testing
- 1532 Construction Fence/Scaffold Rental
- 1550 Progress/Aerial Photos
- 1556 Clean-Up
- 1590 Other _____
- 1720 Layout/Surveying

02-000 SITEWORK

- 2200 Demolition
- 2300 Earthwork
- 2360 Soil Treatment (Termite)
- 2450 Piles/Caissons
- 2500 Site Utilities (Water, Sewer, Storm)
- 2743 Asphalt Paving
- 2750 Concrete Paving
- 2770 Curb & Gutter
- 2820 Fencing & Gates
- 2830 Retaining Walls
- 2870 Railroad Construction
- 2900 Landscape & Irrigation
- 2990 Other _____

03-000 CONCRETE

- 3080 Concrete Demolition
- 3200 Reinforcing Steel - Installed
- 3300 Cast-in-Place Concrete
- 3410 Architectural Precast Concrete
- 3410 Structural Precast Concrete
- 3470 Tilt-Up
- 3810 Concrete Cutting
- 3990 Other _____

04-000 MASONRY

- 4000 Masonry
- 4900 Masonry Restoration & Cleaning
- 4990 Other _____

05-000 METALS

- 5020 Structural Steel Supply
- 5025 Structural Steel Erection
- 5200 Steel Joist/Supply
- 5300 Metal Deck Supply
- 5500 Misc. Metals Fabrication
- 5510 Metal Stairs & Handrails
- 5700 Ornamental Metals
- 5990 Other _____

06-000 WOOD & PLASTIC

- 6100 Rough Carpentry Material
- 6200 Finish Carpentry
- 6400 Architectural Casework
- 6990 Other _____

07-000 THERMAL & MOIST. PROTECTION

- 7100 Waterproofing & Sealants
- 7210 Building Insulation
- 7240 Ext. Insul. & Finish Systems (EIFS)
- 7410 Metal Roof & Wall Panels
- 7500 Membrane Roofing
- 7600 Flashing, Sheet Metal & Accessories
- 7700 Roof Specialties
- 7810 Fireproofing
- 7900 Joint Sealers
- 7990 Other _____

08-000 DOORS & WINDOWS

- 8100 Doors, Frames & Hardware
- 8111 Doors & Hardware Install
- 8360 Overhead Doors
- 8400 Storefronts
- 8500 Windows
- 8600 Skylights
- 8800 Glass & Glazing
- 8900 Glazed Curtain Walls
- 8990 Other _____

09-000 FINISHES

- 9000 Finishes
- 9250 Drywall & Metal Framing
- 9300 Tile
- 9500 Acoustical Ceilings
- 9600 Resilient Flooring/Carpet
- 9640 Wood Flooring
- 9670 Fluid Applied Flooring
- 9840 Acoustical Wall Treatment
- 9900 Painting/Wall Covering
- 9990 Other _____

10-000 SPECIALTIES

- 10100 Visual Display Boards
- 10160 Toilet Partitions & Accessories
- 10200 Louvers & Vents
- 10260 Wall & Corner Guards
- 10270 Access Flooring
- 10350 Flagpoles
- 10400 Identification Devices/Signage
- 10500 Lockers & Benches
- 10520 Fire Extinguishers & Cabinets
- 10530 Prot. Covers/Awnings/Canopies
- 10560 Storage Racks
- 10650 Oper. Partitions/Accordion Wall
- 10750 Telephone Specialties
- 10990 Other _____

11-000 EQUIPMENT

- 11130 Audio-Visual Equipment

11-000 EQUIPMENT cont.

- 11140 Vehicle Service Equipment
- 11150 Parking Control Equipment
- 11170 Solid Waste Handling Equipment
- 11190 Detention Equipment
- 11200 Water Supply & Treatment Equip.
- 11400 Food Service Equipment
- 11480 Athletic & Recreation Equipment
- 11500 Industrial & Process Equipment
- 11600 Laboratory Equipment
- 11700 Medical Equipment
- 11800 Variable Message Signs
- 11990 Other _____

12-000 FURNISHINGS

- 12300 Manufactured Casework
- 12350 Grilles, Mats & Frames
- 12400 Window Treatment
- 12500 Furniture
- 12700 Systems Furniture
- 12990 Other _____

13-000 SPECIAL CONSTRUCTION

- 13030 Special Purpose Rooms
- 13060 Insulated Metal Panels
- 13080 Sound, Vibration, & Seismic Cont.
- 13120 Pre-Engineered Metal Buildings
- 13121 Metal Building Erector
- 13200 Storage Tanks
- 13300 Cold Storage Rooms
- 13990 Other _____

14-000 CONVEYING SYSTEMS

- 14200 Elevators & Lifts
- 14300 Escalators & Moving Walks
- 14500 Material Handling
- 14580 Pneumatic Tube System
- 14600 Hoists & Cranes
- 14990 Other _____

15-000 MECHANICAL

- 15300 Fire Suppression/Protection
- 15400 Plumbing
- 15600 Refrigeration
- 15700 HVAC
- 15900 HVAC Instrumentation/Control
- 15910 Process Instrumentation Control
- 15920 Test, Balance & Adjust
- 15990 Other _____

16-000 ELECTRICAL

- 16000 Electrical
- 16230 Generators
- 16400 Switchboards/Panel Boards

SCOPES OF WORK SECTION cont.

16-000 ELECTRICAL cont.

- 16500 Lighting Supplier
- 16600 Fire Alarm System
- 16650 Lighting Protection
- 16700 Communications
- 16701 Security Access & Surveillance
- 16800 Sound & Video
- 16910 Instrumentation & Control
- 16990 Other _____

18-000 DESIGN

- 18101 Architectural
- 18201 Civil Engineering
- 18301 Structural Engineering
- 18401 Mechanical Engineering
- 18501 Electrical Engineering
- 18990 Other _____

CONFIDENTIALITY NOTE: The information supplied by the undersigned in this document is intended only for the use of United Insulated Structures Corp.

The undersigned certifies that the information provided herein is a clear and accurate representation of this organization.

Information Supplied By:

Print Name

Signature

Title

Date

**Return completed form to: United Insulated Structures Corp.
Estimating Department
5430 St. Charles Road
Berkeley, IL 60163**

OR

Fax: 708.544.8274