



# Whiteriver Construction

5805 Wagon Wheel Lane Lakeside, AZ 85929 Phone: 928-537-2920 • Fax: 928-537-2922  
AZ Lic. #'s.: B-139367; B1-132866 NM Lic. No.: 360340

**Prequalification Form will NOT be accepted unless completed in its entirety.**

Please check the state that you are submitting your qualifications for: AZ  NM

## Business Information

Company Name: \_\_\_\_\_

Primary Address 1: \_\_\_\_\_

Primary Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Country: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Other Branch Offices: \_\_\_\_\_

Years in Business Under Present Name: \_\_\_\_\_ Years

State Contractors License Number (where applicable) \_\_\_\_\_

Average Contract Size over the last five (5) years \$ \_\_\_\_\_

Average annual revenue over the last five (5) years \$ \_\_\_\_\_

## Work Performed

Please see the attached list of Construction Codes and mark all that your company typically performs

Check the categories your company has experience in:

Healthcare  Education  Higher Education  Tribal Commercial

Apartments  Condos  Single Family Homes  Tribal Residential

Industrial  Retail  Other Commercial \_\_\_\_\_

## Business Classification

Does your business meet a special classification: Yes  No  (If yes, please complete the remainder of this section)

Minority Owned  Woman Owned  Small Business

Disadvantaged Business  HubZone  Veteran Owned

Other 1 \_\_\_\_\_ Other 2 \_\_\_\_\_ Other 3 \_\_\_\_\_

### Insurance

Is your company Insurable? Yes  No

Can your company comply with the attached Insurance Requirements? Yes  No

If not please list your current insurance limits below:

General Liability Coverage Limits: \_\_\_\_\_

Auto Coverage Limits: \_\_\_\_\_

Umbrella Policy Limits: \_\_\_\_\_

Workers Compensation Limits: \_\_\_\_\_

### Bonding

Is your company bondable? Yes  No   
*(If not bondable, please provide explanation.)*

\_\_\_\_\_

Bonding capacity in aggregate: \$ \_\_\_\_\_ Bonding capacity per projects \$ \_\_\_\_\_  
*(Current \$\$ value required, DO NOT state unlimited)*

### Financial Status

I have enough working capital to cover payroll for  30 days  60days

### Past Performance

Has your organization ever failed to complete any awarded work in the last seven (7) years? Yes  No   
*(If Yes, attach explanation)*

Are there any judgments, claims, arbitration proceedings and/or suits pending against your organization or its officers in the last seven (7) years? Yes  No  *(If Yes, attach explanation)*

Has your organization filed any lawsuits or requested arbitration with regard to construction contracts within the last seven (7) years? Yes  No  *(If Yes, attach explanation)*

### Safety

Has your organization incurred any OSHA violations over the past three years? Yes  No  If yes, how many? \_\_\_\_\_

What is your organizations' Workers Comp EMOD for the current year? \_\_\_\_\_  
*(if over 1.0 please provide additional information)*

Has your organization incurred any day's away restricted time incidents over the past three years? Yes  No   
If yes, how many? \_\_\_\_\_

Has your organization incurred any fatalities over the past three years? Yes  No  If yes, how many? \_\_\_\_\_

Does your organization have a written safety policy? Yes  No

Does your company comply with the Drug Free Work Act? Yes  No

**References**

List Contact information for three (3) projects and owners, general contractors, or construction managers for whom the company has worked in the past 5 years below:

<b>Project</b>	<b>General Contractor &amp; Contact Name</b>	<b>Phone</b>	<b>Email</b>	<b>Contract Amount</b>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List Contract information for three (3) suppliers from whom the company has purchased materials or subcontractors which the company has hired in the past 5 years below:

<b>Company</b>	<b>Contact</b>	<b>Phone</b>	<b>Email or Fax</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The undersigned certifies that the information provided herein is true and sufficiently complete so as not to be misleading.

Completed By: \_\_\_\_\_  
*(Print or Type)* \_\_\_\_\_  
*(Signature)*

Title: \_\_\_\_\_ Date Completed: \_\_\_\_\_

**INDICATE THE SCOPE OF WORK YOU PERFORM**

Code	Code Description	Check
1137	Engineering Services	
1330	Surveying	
1400	Quality Control / Requirements	
1515	Final Cleaning	
2050	Demolition	
2070	Asbestos Abatement	
2075	Saw Cutting	
2120	SWPPP Implementation	
2300	Earthwork	
2350	Piles & Caissons	
2361	Termite Control	
2500	Paving	
2510	slurry Seal	
2513	Asphalt Concrete Paving	
2580	Pavement Marking	
2600	Site Utilities	
2685	Liquid Petroleum	
2751	Cement Concrete Pavement	
2830	Fencing	
2842	Parking / Traffic Signage	
2900	Landscaping	
3000	Concrete	
3110	Curbs & Gutters	
3400	Auger Cast in Place Piles	
3500	Cementations Decks & Underlayment's	
4000	Masonry	
4400	Stone	
4700	Simulated Masonry	
5100	Structural Steel	
5200	Metal Joists	
5300	Metal Deck	
5400	Cold Formed Metal Framing	
5500	Metal Fabrications	
5510	Metal Stairs	
5520	Handrails & Railing	
6100	Rough Carpentry	
6150	Siding & Exterior Trim	
6180	Glued Laminated Beam	
6190	Truss (Prefab)	
6200	Finish Carpentry	
6400	Custom Casework	
7100	Waterproofing	
7150	Damp Proofing	
7200	Insulation	
7240	EIFS	
7250	Fireproofing	
7310	Shingle Roofing	
7400	Metal Roofing	
7500	Membrane Roofing	
7600	Flashing & Sheet Metal	
7625	Gutters & Downspouts	
7700	Roof Specialties & Accessories	
7842	Fire Resistive Joint Systems	
7900	Joint Sealers	
8150	Metal Doors & Frames	
8200	Wood & Plastic Doors	
8300	Specialty Doors	
8311	Access Door	
8360	Overhead doors	
8400	Entrances & Storefronts	
8500	Windows	

Code	Code Description	Check
8600	Skylights	
8700	Hardware	
8800	Glazing	
9200	Stucco	
9260	Gypsum Drywall	
9310	Ceramic tile	
9400	Terrazzo	
9500	Acoustical Treatment	
9510	Acoustical Ceilings	
9530	Spray Foam Insulation	
9600	Resilient Athletic Flooring	
9640	Stone Flooring	
9660	Resilient Flooring	
9680	Carpet	
9742	Epoxy Polyurethane Floor	
9900	Paints & Coatings	
9950	Wall Coverings Coating	
10100	Visual Display Boards	
10150	Compartments & Cubicles (Office)	
10155	Toilet Compartments	
10200	Louvers & Vents	
10263	Corner Guards	
10300	Fireplaces & Stoves	
10350	Flagpoles	
10400	Identification Devices	
10500	Lockers	
10521	Fire Extinguishers & Cabinets	
10550	Postal Specialties	
10670	Shelving	
10800	Bath Accessories	
10900	Wardrobe & Closet Specialties	
11400	Food Service Equipment	
11450	Appliances	
11480	Athletic Equipment	
11700	Medical Equipment	
11900	Detention Doors & Gates	
12010	Furniture /Fixtures	
12300	Manufactured Casework	
12450	Window Coverings	
12500	Projection Screens	
12600	Multiple Seating	
13121	Pre Engineered Buildings	
13200	Storage Tanks	
13700	Security Access & Surveillance	
13800	Buildings Automation & Control	
14100	Utility Connections to Modular	
14125	ADA Access Lift	
14200	Elevators	
14300	Escalators & Moving Walks	
14400	Lifts	
15100	Plumbing	
15300	Fire Protection Piping	
15700	HVAC	
16000	Electrical	
16400	Low Voltage Distribution	
16500	Lighting	
16700	Communications	
16720	Fire Alarm Systems	
16725	Security Systems	
16800	Sound & Video	

To be completed by Whiteriver Construction

**Contract License(s) Verified:** \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Estimator Comments:**

- Approved
- Called References
- Not Approved

If not approved why and how can we get the approval:

\_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Estimator Signature

\_\_\_\_\_  
Date

**Project Manager Comments:**

- Approved
- Called References
- Not Approved

If not approved why and how can we get the approval:

\_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Project Manager Signature

\_\_\_\_\_  
Date

**General Manager Comments:**

- Approved
- Called References
- Not Approved

If not approved why and how can we get the approval:

\_\_\_\_\_  
\_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
General Manager Signature

\_\_\_\_\_  
Date



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## SUBCONTRACTOR INSURANCE REQUIREMENTS

Whiteriver Construction's general liability carrier requires all subcontractors wishing to do business with Whiteriver to meet the following basic insurance requirements:

1. **General Liability Policy** which is written on an occurrence basis and provides the following written endorsements:
  - a. Waiver of Subrogation in favor of Whiteriver Construction
  - b. Additional Insured Status for Whiteriver Construction, ongoing and completed operations.
  - c. Primary & Non-Contributory wording.
  - d. Policy must provide the following limits of insurance:
    - \$1,000,000 – Any One Occurrence
    - \$2,000,000 – Products/Completed Operations Aggregate
    - \$2,000,000 – Project Aggregate
2. **Business Auto Policy** which provides the following minimum limit of insurance:
  - \$1,000,000 – Any One Occurrence
  - Waiver of Subrogation in favor of Whiteriver Construction
  - Additional Insured Status for Whiteriver Construction
3. **Workers' Compensation Policy** which provides the following minimum limit of insurance:
  - \$1,000,000 E.L., Each Accident
  - \$1,000,000 E.L., Disease EA Employee
  - \$1,000,000 E.L., Disease – Policy Limit
  - Waiver of Subrogation in favor of Whiteriver Construction
  - Statutory coverage for states where work is being performed
4. **Umbrella Policy** endorsed to increase limits for the General Liability, Business Auto, and Workers' Compensation Policy and providing the following minimum limit of insurance:
  - \$2,000,000 – Any One Occurrence
  - \$2,000,000 - Aggregate
5. **Professional Liability Policy (If applicable)** which provides the following minimum limit of insurance:
  - \$1,000,000 – Any One Occurrence

A Certificate of Insurance verifying coverage and copies of all endorsements must be provided to Whiteriver Construction **prior to the start of work**. Certificate should include a 30-day notice of cancellation, except for 10-day notice for non-payment.

Any additional expenses incurred by Whiteriver Construction caused by the subcontractor's failure to comply with these requirements will be the responsibility of the subcontractor.