



www.HomeRyteSolutions.com
Creating Real Value in Property and Places
Phone: 571-989-1313; Fax: 703-564-5621
Email: seemasinha@homerytesolutions.com

Contractor Application

Contact Person: _____ Date: _____ Lead Source: _____

Address: _____ Home Phone: _____

Company Name: _____ Cell Phone: _____

Specialized Field (GC, Plumber, Electric, Roofer, etc): _____ Work Phone: _____

_____ Email: _____

Insurance and Experience

Are you licensed and insured: _____ What type of insurance: _____

How much coverage: _____ License updated: _____

How long done you been doing business in the area: _____ How long running own crew: _____

How many guys on crew full time: _____

Current Projects and Bidding

How many projects do you have going on right now: _____ In the past year: _____

How many jobs do you typically handle at once: _____

What were the scopes of work: _____

What are the addresses: _____

Can I see the work on one or two recent jobs: _____

How do you usually bid out your work: _____



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Materials and Labor charged together or separate in your bids: _____

Do you give written warranties for your work: _____ How long of a warranty: _____

Sub-contractors and more prescreening

Do you use subcontractors: _____ Are they licensed and insured: _____

Who is your electrician: _____ Who is your plumber: _____

Do you belong to the Better Business Bureau or local Chamber of Commerce: _____

Do you have any certificates/licenses regarding the skills you have: _____

Have you ever declared bankruptcy: _____

How often do you communicate with your clients during a job: _____

Do you clean the job site daily: _____

Do you have a problem with signing a lien waivers: _____

References

Can you provide me with a list of references, with the names and numbers you have done work for in the past:

1. _____
2. _____
3. _____