

CONTRACTOR QUESTIONNAIRE

Corporate Name						Date	of Incorpora	tion		
Business Address										
Phone:		Fax:		۰۷	Veb S	ite Address:				
Manager (Barrer)										
Management Personnel	(List all co	rporate officers/partners/proprietor	s/share	holde	rs/direc		able) (Use Se Name of	eparate She		lecessary) mnity
Name		Residence Address	Da	ite of	Birth	% Owned	Spouse			lable
								Ye	1 🗌 8	No 🗌
								Ye	1 🗌 8	√ 0 □
								Ye	1 🗌	No 🗌
										 No □
										√o □
Key Personnel (Give the n	names of ot	her key personnel such as Enginee	ers Fst	imato	rs Proi	ect Managers	etc) (Use Sena			
Troy i croomier (olve the h	iames or or	ner key personner such as Enginee	, L3t	mato		cct managers	(030 00pt	Tate once	II INC	, , , , , , , , , , , , , , , , , , ,
Name	Age	Position	Si	nce		Previous	s Employer	Pos	ition	Since
	Δtt	ach Resume for all Mana	geme	nt a	nd Ke	v Personi	nel	ı		
	,	don resounts for an india,	900	u.	10110	, , c. c				
Related Companies (List	all Subsidi	iary/Affiliated Companies)				(Use Separate S	heet if Nec	essary	')
Name of Company		Business Address		-	Гуре о	f Business	Deta	ails of Ov	ners	ship
. ,					<u> </u>					•
		Is and/or their spouses and/or a c					ed in business	, petitione	d for	
bankruptcy, compromised w	itri creditor	s or caused a loss to a Surety?	(if yes, p	oroviae	e details	5)				
Yes No										
is the Company or any of its kind? (If yes, provide details		and/or their spouses and/or a co	mpany	of an	y of the	em presently	involved in litig	gation mai	ters o	of any
	,									
Yes No No Has the Company or any of	its principa	als and/or their spouses and/or a	compa	nv of	any of	them previou	sly received h	onding fac	ilities	? (If
		imits provided (single job/work pr								. ("
Yes ☐ No ☐										
	in the cont	rol and/or management of the Co	ompany	/ in th	e past	3 years? (If y	es, provide de	tails)		
		-					•	•		
Yes No No										
		and/or their spouses or a Compa	-	-		engaged in a	ny of the follow	ing types		
Joint Ventures	es No □ □ C	ontracts more than 2 years	Yes	No.		ın Ventures			Ye	s No □
Wharf/pier/dams	Ī ∐Ĥ	azardous Materials				Construction	า			

Turnkey Propositions Tunnelling Projects Design/Build Projects Class of Construction	Asbestos Remova Real Estate Speci Land Developmen Contracts normally	ulation nt		Private/Public Partneri fficiency/Performance other (Specify)		
<u>=</u>		Mechanical		☐ Electrical		
Road Builder	Specialty Builder	(identify _		Other	☐(identify)	
			T	ı		
Federal %	Provincial	%	Other Public	%	Private	%
In what geographic area	is the Company's work n	ormally under	aken? City	Provi	nce	
Radius from City in which	h work performed	km. Occ	casionally expa	ands into what othe	r geographic	area
Is the standard CCDC for	orm of contract used? (If no	o, explain)				
Yes No No	subject to environmental e	247000117002 (If.				
	subject to environmental e	exposures? (if)	/es, detail insuran	ce coverages)		
Yes ☐ No ☐ On average, what portio	n of the Company's work	is subcontract	ed?	% What type of	work?	
	uired from the major subtr			netimes Neve		
If Never , please explain	why not:		·			
If Sometimes , please in	dicate under what circum	stances you w	aive bonds:			
What is the largest am	ount of work on hand you	r Company ha	s had at any o	ne time in the past	4 years:	
\$	Year		nsisted of	•	state number) of contracts
	u feel the Company and its o			,	to \$,
How many at once?	What type of	work?				
List the 4 Largest Fig	xed or Negotiated con	ntracts comp	oleted by the	Company in the	nast 4 vea	ire:
	1		2	3	past 4 yea	4
Type of Work						
Original Contract Price						
Final Contract Price						
Location						
When Started						
When Completed						
Gross Profit						
Owner or General						
Architect/Engineer						
Surety						

List 5 current major suppli	iers:		
Supplier	Business Address	Contact	Telephone# / E-mail
List 5 subcontractors with	whom the Company has worked	in the last 2 years:	,
Company Name	Business Address	Contact	Telephone# / E-Mail
	,	1	
Accounting Details:			
When is the fiscal year-end of t	he Company?		
·	statement prepared? Accrual Com		
How often are interim statemen		•	•
	•	er (Identify)	-
Who prepares the outside state			
If C.A. prepared, are the statem	•	If no, explain	
Name of Accounting Firm and i		D.	
Firm:		Ph	
•	me accountant? Yes No (if yes,		•
Name	Background	Years	with Company
B 11 B 4 11 (2)			
Banking Details: (Attach a c	copy of current Banking Agreement)		
Bank:	Address:		
Account Manager:	Phone:	Fa	x:
Amount of available credit: \$	Amou	int currently in use: \$	
, , , , , , , , , , , , , , , , , , ,			
Life Insurance Details:(Proplace.)	vide details of "Key Man" Insurance and/or a	ttach a copy of Buy-Sell Agreeme	ent(s) which are currently in
Carrier:	Issued on behalf of:		
Amount: \$	Cash Surrender Value:	Beneficiary:	
Policy No.:	Policy Term: From:	To:	
	ched? Yes 🗌 No 🔲 If yes, please exp	plain:	
	to anyone or a financial institution? Yes		ifv:

Other In	suran	ce Carried		
Туре	;	Policy Number	Amount/Limits	Issuing Company
Liabili	ty			
Environm	ental			
Errors Omission				
Equipm				
Othe	r			
Other In			/ Hi	
others, o	mpany r as enc	or any of its principals and lorser (co-signor) on notes	or their spouses or a Compand/or accounts? (if yes,	pany of any of them, acting as guarantor, indemnitor, or Surety for provide details)
Yes 🗌 I				
form of fi	xed ass			ticipate purchasing in the next 12 months any equipment or other esently owned? (If yes, provide details)
Yes I I		any or any related, affiliated	d or subsidiary company ha	ve any accounts receivable and/or holdbacks receivable which are
		s, provide details)	, ,	,
Yes 🗌 I	No 🗌			
		Please atta	ch the following in	formation prior to submitting
		I year-end statements and companies.	any recent available interin	n statements of the company and any related, affiliated and/or
		sonal financial statements companies	of all individuals having a f	nancial interest in the company and/or any related, affiliated and/or
Con	npleted	"Status of Contract" form a	is at the Company's last fis	cal year end and at a current date.
	separate stionnai		ions are being provided in	respect to answers given to questions previously asked in this
Сор	y of the	current Banking Agreeme	nt in respect to the Compa	ny's Line of Credit Facility.
Res	sumes fo	or all Management and Key	/ Personnel	
Any	relevan	t Company brochures		
undersign any finan	ed, the cial inst	undersigned herebywar itution, credit bureau or	rants that the above info	d to apply for surety bonds or their undertakings on behalf of the rmation is true and accurate. The undersigned further authorize the correctness of information presented in this questionnaire
Dated this	s	day of		, 20
Sign	ature o	f authorized individual		_

Stamhope Simpson

Attention: Bank Manager
Re:
Good Day,
We are considering providing bond facilities for the above contractor and through application to us for Surety, they have referred us to your branch where, we understand, they conduct their banking operations.
We would appreciate you answering the following questions. The information will be considered confidential and will confer no responsibility upon you.
If you deem it necessary we suggest that you contact of the above for his/her permission to release this information to us.
1.) How long has this account been with your bank?
2.) What is the average balance maintained in the company's account?
3.) What is the present balance in the company's account?
4.) What line of credit is extended and how it is secured?
5.) What is the Review date of the line of credit?
6.) What is the highest amount that has ever been borrowed?
7.) What is the amount presently owing?
8.) Are settlements made as agreed or are extensions requested?
9.) General comments, if any:
Thank you for your cooperation.
Sincerely,

CONTRACT STATUS REPORT

NAME OF CONTRACTOR:							STATUS A	S AT:		
Provide Name of Owner or General Contractor and a brief Contract Description	Bond Number (if applicable)	Original Contract Price	Original Est. Cost at Time of Bid	Current Contract Price incl. app. Change Orders	Billed to Date	Payments Received to Date	Total Direct Costs to Date	Current Estimated Cost to Complete	Estimated Date of Completion	Comments: (satisfactory progress, liens, delays, etc.) (Attach details if more space is required)
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9										
10.										
11.										
12.										
TOTALS										
Report Prepared By:	Name (Print):				Signature:				Title:	
Date:						PROVIDE INFOI STATUS REPOR		OMPLETED CONT	TRACTS ON TH	E BACK OF THIS CONTRACT

CONTRACTS COMPLETED SINCE LAST FISCAL YEAR END OR SINCE LAST CONTRACT STATUS REPORT

Name of Owner or General Contractor & Contract Description	Bond No.	Final Contract Price	Profit	Date Completed	Comments
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
TOTALS					

THE FOLLOWING DEFINITIONS ARE PROVIDED TO ASSIST YOU IN COMPLETING THIS REPORT:

- 1. CONTRACT PRICE and CONTRACTOR=S ESTIMATED COST AT TIME OF BID should include approved change orders only and, in original estimated costs, the costs applicable thereto. Exclude claims and disputed items. If desired, an explanation of these items may be attached.
 - If contracts are on a unit price basis, and the estimated number of units approved has increased or decreased since bid date, adjust the original contract price and costs accordingly, using the original price and cost per unit as a base, and enter these amounts unless the change in unit quantity has contractually operated to change the unit price.
- 2. All projects should be listed: Bonded, non-bonded, lump sum and cost plus.
- 3. COSTS should be entered consistent with financial statement (Profit and Loss Report) allocation, excluding general and administrative (specifically unallocated) overhead.
- 4. **BILLED TO DATE** and **COST TO DATE** should be entered as of the same date or, when this schedule is provided in conjunction with a financial statement, consistent with their treatment in the financial report.
- 5. **ESTIMATED REMAINING COSTS TO COMPLETE** should be a revised figure reflecting developments which have occurred subsequent to bid date causing a change in total cost (or cost per unit), if any, not merely a subtraction exercise. After approximately 50% completion, it is imperative that a re-evaluation of costs be made. In the early stages of a project, a re-evaluation of costs may be difficult and perhaps impractical.

Stamhope Simpsom

INSURANCE LTD.

Name of Company In Favour of	Amount of Policy Cash Surrender Value
	FE INSURANCE
Total Assets	Personal Net Worth
	Total Liabilities
Other Personal Property and Fixed Assets (describe)	Other Deferred Liabilities (Liens) (describe)
Real Estate (Schedule "B")	Mortgages on Real Estate (Schedule "B")
FIXED ASSETS	DEFERRED LIABILITIES
Total Current Assets	- -
Other Investments	Total Current Liabilities
Other Current Assets	
Life Insurance C.S.V.	
Mortgages Receivable	Other Current Liabilities (describe)
Accounts Receivable	Interest Due
	Taxes Due
Stocks, Bonds, etc. (Schedule "A")	Loans Payable
Cash on Hand	Bank Loan
Cash in Bank Branch	Accounts Payable
CURRENT ASSETS	CURRENT LIABILITIES
STATEMENT OF ASSETS AND LIABILITIES	
	Phone:
Business Address:	
Name of Individual:	

	Schedule	"A" - Stocks, Bonds, Et	ic.	
Name of Security	No. of Shares	Par Value	Market Value	Secured or
				Unsecured
	<u> </u>			
	Scheo	dule "B" - Real Estate		
ocation/Description	In Whose Name	Present Value	Amount of	Mortgage
of Property	Title		Mortgage	
, ,			0 0	
	1			
	N	Mortgages Owned		
n Favour Of	Property Covered	Amount of Mortgage	Prior Mortgages	Maturity
	I V	l l l l l l l l l l l l l l l l l l l	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Questionnaire		
ndirect Liability - As E	ndorser - \$	Questionnume		
ndirect Liability - As C				
•				
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he undersigned hereby decla	are(s) that all the informat	ion provided herein and on the	accompanying statements	is to the best
		iderstand it will be used by the		
		g any enquiries it deems necess		
		it information about me/us to a		
rith whom I/we have financia		it imormation about me/us to al	ry credit reporting agency	or to any one
Tur whom I/we have imanci	ai itiations.			
Vitness		C:amad		