

Subcontractor/Supplier Information Form

Thank you for your interest in The Krog Corporation. All prospective Subcontractors and Suppliers are required to complete this pre-qualification form prior to working on our projects. All information provided in this questionnaire is considered confidential and will be used solely to determine your firm's qualifications and will not be shared with others. The completed form and any questions should be directed to:

			Attn: Barb Rupple			
			Email: <u>brupple@krogco</u> Fax: 716-667-1258	orp.com		
I. <u>General Information</u>						
Company Name:			Date: _			
Address:			Phone:	Phone:		
			Fax:			
Email:		Webs	ite:			
<u>Contacts</u>						
Name:	Title:	Phone:	Cell Phone:	Email:		
Name:	Title:	Phone:	Cell Phone:	Email:		
Name:	Title:	Phone:	Cell Phone:	Email:		
How many people does ye	our Company presently en	nploy?				
Office	Field/Supervisory	Trade	es People			
How many people did you	<u>ır Company employ on av</u>	erage for the last 3	years?			
Office	Field/Supervisory	Trad	es People			
Geographic Area(s) where	you perform work:					
WNYC	entral NY Southerr	n TierCorning	g/Elmira Other (ple	ease specify)		
II. <u>Organization</u>						
Is your Company:						
MBE WBE Please attach copies o	_ DBEVeteran Owne f all certifications	ed Service Dis	abled Veteran Owned	HUB Zone		



III. <u>Work Scope</u>

Trade(s)/Scope of Work: (please check all trade(s) that your Company is interested in bidding)

General Requirements

AppraisersAttorneyArchitectural ServicesStructural Engineers
Site/Civil Eng Mech./Elect. Eng Environmental Eng Geotechnical Eng.
Other EngSurveyorsAsbestos ConsultantsSafety Consultants
Real Estate Agent General Contractor Design Consultant
General Conditions
Quality Assurance/Quality Control Temp. Facilities & ControlsSecurity Services
Building MaintenanceSnow RemovalPest & Rodent Control
Site Work
Site Work SubcontractorAsbestos & Lead AbatementBuilding Demolition
Site RemediationTruckingTunneling & Boring
Piling & Caissons Railroad Tracks Paving
Curbs & SidewalksUtility ServicesFences & Appurtenances
Landscaping & Planting
Concrete
Concrete Subcontractor Basic Concrete Materials & Methods Concrete Repair
Reinforcing Bar Material Reinforcing Bar Labor Hollow Core Plank
Structural PrecastGypsum Topping
Gunnite

K	The Krog	J Corp.		
Masonr	<u>y</u>			
_	Masonry Subcontractor	Basic Masonry Mat	erials & Methods	
	Masonry Restoration & Cl	eaning		
<u>Metals</u>				
_	Structural Steel Subcontra	actor Erect Only Subco	ontractor St	ructural Steel
_	Steel Joists Meta	al Decking Cold Formed Met	al Framing M	etal Fabrication
_	Castings Expa	nsion Control		
Woods	& Plastics			
_	Carpentry Subcontractor	Basic Wood & Plastic Mater	rial & Methods	
	Rough Carpentry	Heavy Timber Construction	Glued-Lamin	ated Timber
	Finish Carpentry	Granite/Quartz Countertops		
<u>Therma</u>	ll/Moisture Protection			
_	Damp Proofing & Waterp	roofing Insulation	E.I.F.S	Roof Shingles
_	Roof Accessories	Membrane Roofing System	Flashings & She	eetmetal
_	Insulated Metal Panels	Siding Metal Siding	Metal Panels	
_	Spray Fireproofing & Sm	oke Protection Joint Sealers		
Doors	s & Windows			
_	Metal Doors & Frames	Wood Doors & Frames	Specialty Doors	Access Doors
_	Coiling Doors	Folding Doors	Entrances & Storef	ronts
	Overhead Doors	Automatic Door Operators	Windows	Skylights

_____ Finish Hardware _____ Glass & Glazing



Finishes

	Plaster & Gypsum Subcontr	actor	Ceramic 7	Tile	Ceilings	Flooring
	Painting & Coatings					
Specialties						
	_ Chalk & Tack Boards	Compartr	nents & Cubic	les	_ Louvers & V	Vents
	_Grilles/Screens	_ Wall & C	orner Guards		_ Access Floor	ing
	_ Fireplaces & Stoves	_ Identificat	tion Devices		_Lockers & B	enches
	_Awnings	_ Postal Spe	cialties		_ Wire Mesh I	Partitions
	Operable Partitions	_ Storage Sh	nelves/Racking		_ Toilet, Bath	& Laundry Accessories
	Flagpoles	_Wardrobe	& Closet Speci	alties	_ Fire Protection	on Specialties
	Scales					
<u>Equipment</u>						
	_ Commercial Laundry Equipr	nent	_ Projection S	creens	Pai	king Control Equip.
	_Loading Dock Equipment		_ Food Service	Equipment	Ice	Machines
	_Residential Appliances		Athletic & Th	erapeutic Ed	quipment	
	_ Medical & Hospital Equip.					
<u>Furnishing</u>	<u>s</u>					
	_Manufactured Casework		Recessed Flo	oor Mats	Blinds	s & Shades
	_Furniture & Accessories		Interior Plan	ıts		
Special Con	nstruction					
	_Cold Storage Rooms	Spa Eq	luipment	Radi	ation Protection	on
	_Grandstands & Bleachers	Pre-En	gineered Meta	l Building S	ystems	
	Aquatic Park Facilities 4 Center Drive * Orcha 8 Denison Parkway East	rd Park, New Yo	ork 14127 * 716-66	67-1234 * Fax:	716-667-1258	and Wind Energy

The Krog Corp.
Conveying Systems
ElevatorsWheelchair LiftsVehicle LiftsHoists & Cranes
Mechanical
Fire Protection Systems Plumbing HVAC
Electrical
Electrical
Is your Company: Union Shop Non-Union Shop
IV. <u>Financial Information</u>
Indicate the size of project (value of your company's contract) you are most competitive in performing. Rank by preference (1, 2, 3, etc) Mark as 'N/A' ranges of work you do not perform.
Under \$100,000 \$100,000 - \$200,000 \$200,000 - \$500,000 \$500,000 - \$1,000,000 \$1,000,000 - \$3,000,000 \$3,000,000 - \$6,000,000
What is the largest contract your Company has completed? Amount: \$ Year: Project Name and Scope:
What is the largest dollar volume job you expect to do during this year? Amount: \$ Project Name and Scope:
What is your expected annual volume this year: \$ # of Projects
What was the annual volume of work performed over the past 5 years:
Yr/Vol Yr/Vol Yr/Vol

Yr/Vol. _____ Yr/Vol. _____



V. Bonding

Name of Surety	Key Contact P	erson/Phone			
A					
B. Bonding Capacity: Per Job \$	_ Aggre	Aggregate: \$			
Date of Last Bond: An Bond Rate:%	nount: \$				
VI. <u>Insurance</u>					
Agent/Broker:	_ Phone:	Fa	ax:		
Contact:	_ Email:				
A. Commercial General Liability					
Insurance Carrier:					
Any exclusion from Standard CGL Policy? Yes	No				
Limits:		Each Occurrence	<u>Aggregate</u>		
General Liability					
Auto Liability					
Umbrella/Excess Liability					
<u>Note</u> : Krog's standard practice is to require minimum combination of General Liability and Excess/Umbrella		•			
C. Workers Compensation and Employer's Liability					
Insurance Carrier:					
Limits (statutory limits required): \$					
E. Professional Liability Insurance - Applies to Design	-Build Subcont	ractors only			
Insurance Carrier:					
Office Policy Limit: \$	_ Deduc	tible: \$			
Project Specific Limit Available: \$		ded Reporting Period	d (tail) yrs.		
	Prior A	Acts: Yes	No		