

## VENDOR QUALIFICATION FORM

*\* = Required Field*

\*Company Name:

\*Company Address Line 1:

\*Company Address Line 2:

\*Office Phone Number / Fax:

\*FEIN (Federal Employment Identification Number):

DUNS (Dun & Bradstreet Identification Number):

**Please provide one or more ownership/management contacts that are authorized to contractually bind your company.**

*\*A minimum of one contact is required.*

*1.				
	<i>First Name</i>	<i>Last Name</i>	<i>Title</i>	<i>Mobile #</i>
				<i>Email Address</i>
2.				
	<i>First Name</i>	<i>Last Name</i>	<i>Title</i>	<i>Mobile #</i>
				<i>Email Address</i>
3.				
	<i>First Name</i>	<i>Last Name</i>	<i>Title</i>	<i>Mobile #</i>
				<i>Email Address</i>

**Please provide one or more estimating contacts that should receive project invitations to bid and correspondences.**

*\*A minimum of one contact is required.*

*1.				
	<i>First Name</i>	<i>Last Name</i>	<i>Title</i>	<i>Mobile #</i>
				<i>Email Address</i>
2.				
	<i>First Name</i>	<i>Last Name</i>	<i>Title</i>	<i>Mobile #</i>
				<i>Email Address</i>
3.				
	<i>First Name</i>	<i>Last Name</i>	<i>Title</i>	<i>Mobile #</i>
				<i>Email Address</i>

**\* Please select all applicable trades that your company performs**

- |   |  |
|---|--|
| 02.150 - Scaffolding                            | 10.140 - Signage                                   |
| 02.200 - Rigging                                | 10.280 - Toilet Partitions & Restroom Accessories  |
| 02.350 - Excavation                             | 10.731 - Awnings                                   |
| 02.400 - Demolition                             | 11.300 - Appliances                                |
| 02.810 - Hazardous Materials                    | 12.200 - Window Treatments                         |
| 03.000 - Concrete                               | 14.100 - Elevators                                 |
| 04.000 - Masonry                                | 21.100 - Sprinkler                                 |
| 05.100 - Structural Steel                       | 22.000 - Plumbing                                  |
| 06.400 - Architectural Woodwork                 | 23.000 - HVAC                                      |
| 07.300 - Roofing                                | 26.000 - Electrical                                |
| 07.800 - Fireproofing                           | 26.500 - Lighting                                  |
| 08.100 - Doors/Frames/Hardware                  | 27.200 - Telecomm. / Data / A.V. / Security        |
| 08.500 - Windows                                | 27.950 - Distributed Antenna Systems (DAS)         |
| 08.899 - Architectural Metal & Glass            | 31.000 - Site Work / Earth Work                    |
| 09.290 - Drywall & Ceilings                     | 32.000 - Exterior Improvements                     |
| 09.300 - Ceramic Tile & Stone                   | 32.900 - Landscaping                               |
| 09.680 - Carpet, VCT, & Vinyl Base              | 32.950 - Asphalt / Paving                          |
| 09.950 - Other Flooring <i>(Describe Below)</i> | Other / Specialty Services <i>(Describe Below)</i> |

*Other Flooring Description*

*Other / Specialty Services Description*

**\* Please select the type(s) of labor that your company perform**

Union

\*If your company performs union labor - Please identify all union affiliations below:

Non - Union

Union & Non - Union

\*If your company holds any certifications - Please identify all below:

Prevailing Wage

M.B.E.

W.B.E.

S.B.E.

D.B.E.

Other:

**\*Please designate your company's geographical service area(s) :**

International	Queens	Other (Please Describe Below)
Nationwide	Brooklyn	
Northeast	Manhattan	
Tri - State (NY, NJ, CT.)	Bronx	
Tri - State Metro Areas	Staten Island	
New York	Eastern Long Island	
New Jersey	Central Long Island	
Connecticut	Nassau County	
NYC (Five Boroughs)	Suffolk County	

**Attachments & Supplemental Information**

- \*1. In addition to this completed form, please attach a scanned copy or picture of all applicable licenses.  
*At minimum one license is required and must legibly show license number, type, and the license holder's name.*
- \*2. Please attach an evidence of insurance certificate.
- \*5. Please attach a "signed by your company's insurance broker."\*\*\*\*\*
- \*6. Please attach a "Y -9 Form."
- \*5. Please attach a letter of good standing supplied by your financial institution including a statement that your company has access to a line of credit and the amount.
- \*6. Is your company bond-able? If so, please attach a letter from your surety stating the bonding capacity.  
*If no surety letter is attached when this form is submitted, Talisen Construction Corp. will assume your company is not bond-able.*
- \*7. Please select the appropriate option below in regards to your company's capabilities.

Furnish Only

Install Only

Furnish And Install

- \*8. If applicable and if either "Furnish" or "Furnish And Install" are selected above: Does your company self-fabricate materials?

Yes (\*If Selected please indicate shop size below)

No

ft.<sup>2</sup>

\*9. How many individuals does your company employ?

In Office

In Field

In Shop (\*If Applicable)

\*10. Has your company been convicted of any crime or undergone and lien or litigation in the past?

Yes - If "Yes", please attach a letter describing the incident.

No

11. If available, please attach your company's OSHA 300 Logs for the past 3 years.

\*12. Please provide two (2) contractor references.

1.

2.

\*13. Please provide two (2) supplier references.

1.

2.

14. Please provide any additional references including, but not limited to, clients and/or architects.

1.

2.

3.

4.

\*15. Please specify your company's preferred minimum and maximum contract values.

Minimum: \$

Maximum: \$

\*16. Please indicate which sector(s) of construction your company is suited and/or willing to work in.

Commercial

Residential

Education

Healthcare

Hospitality

Retail

Other:

*\*Please describe*



213 West 35th Street | New York, NY 10001

P: 212-244-4581 | F: 212-244-4145

W: [www.talisenconstructioncorp.com](http://www.talisenconstructioncorp.com) | E: [info@talisencorp.com](mailto:info@talisencorp.com)

I certify that the information I have provided on this Vendor Qualification form is complete and correct. I understand my failure to provide complete and accurate information will be grounds for Talisen Construction Corporation to deny or withdraw this application to Talisen Construction Corporation's Vendor Network.

---

*Print Name*

---

*Title*

X

---

*Signature*

---

*Date*