## WENDT BONDING

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	Contractor's Questionnaire									
1.										
	Contractor's Name					Federal Tax ID#				
	ddress									
	Telephone	Fax #			E-Mail					
	Type of Organization: Corpora	Corporation Partnership				Sole Proprietorship LLC				
Other (Specify)										
	If Corporation, have Stockholders Elected to be Considered a "Sub Chapter 'S' Corporation? Yes No									
Date Business Founded Date Incorporated?  List All Stockholders/Owners and Key Personnel in Your Business										
	Name Spouses I Address		Title/ Position		% of Ownership	Date of		Yrs. & Exp. In Const.		
Ar	e All Stockholders/Owners Actively Involve	ed in the Business	? Yes	No	If No, Ple	ase Explain				
	List Affiliated, Subsidiary or Rela	ated Companies in	Which This F	irm or l	Its Stockhold	lers/Owners	Have Int	erest		
Name & Address				% of Ownership		Scope of Operations		erations		

What is Your Fiscal You	ear End?				
Who Prepares Your Fis	scal Year End Fin	ancial Statements?			
Telephone #	Do You	nents Prepared?	pared? How often?		
What Method of Accou	unting is Used in	Completed Contract _	Accrual	% of Completion	
Other, if Check	ed Please Explair	1			
On What Basis of Acco	ounting are Taxes	Paid? Completed Cor	ntract Accrual _	% of Completi	on Cash
Who is Responsible for	r Bookkeeping? _		Prepared	Manually	Computer
How Long With Fir	m?	How Many Years of I	Experience?		-
Who is Responsible for	or Estimating?		Prepared	_ Manually	Computer
How Long With Fir	rm?	How Many Years of l	Experience?		-
Provide a Brief Description	and Purpose of I	nventory Shown on Financial	Statement		
•		ce to Real Estate Owned Othe	e e		
Have Operations Been Prof	itable Since Finar	ncial Statement Date?	Yes No If No, Pl	lease Explain	
Officers, Investments, With	drawals or Divid	te Such as Acquisition of Addends that Would Significantly	Affect Financial Condition	on of Contractor?	Yes No
Has Your Business Been As Is a Buy-Sell Agreement in	udited By the IRS Effect? Yes	Yes No If Yes Plea Plea No Yea No If Yes, Please A Effect to Complete All Unco	r? Are You Attach a Copy	ur Taxes Current?	YesNo
List Life Insurance					
Insured	Amount	Beneficiary	Insurer		Cash Value
		pensation Insurance			
		Address			
		Yes No How			
		Line of Credit?			
•		Yes No If Yes Which			
Original Ralance \$	Cu	rrent Outstanding Ralance? \$	Δ	ra Paymante Curi	rent? Ves No.

2. Financial Data

List Suppliers From Whom You Buy Most of						
Name/ Contact Person Complete Mailing Address				Telephone		
1.						
2.						
3.						
4.						
5.						
3. Scope of Operation						
Type of Construction Specialty						
Type of Construction Specialty						
What Other Class of Business Do You H	landle?	W. 1. C		_ Territory		
How many: Employees do you A. % Work Done For Federal _	nave?	Work Crews? _ Public	% Priv	/ate 9	26	
A. % Work Done For Federal B. What % of Work is as: Prime C. What % of average job is: Materials	%	Sub	%	atc /	70	
C. What % of average job is: Materials	%	Subcontracted to others	%			
D. Are Bonds Required for Subcontractor	ors? Yo	es No When?	What T	rades?		
Largest Contracts Completed Within Last 5	Years		_		_	
Owner or General Contractor Mailing Address		Phone Contact Person	Contract Amount \$		Date Completed	
1.						
2.						
3.						
4.						
5.						
Principal Subcontractors You Have Used in	the Deat 2 V	Tooms				
Company	i ille Fast 2 I	Phone	Type of Wor	rk	Date	
/Mailing Address		Contact Person	Contract An		Completed	
1.						
2.						
3.						
What is Your Expected Annual Volume for t	he Coming Y	ear?	_ Expected Net Pro	ofit?		

Largest Previous Jo	ob \$	Largest Previous Cost to	Complete: #	#jobs \$	Year	
How Many Contra	cts do You Normally Have Ur	nderway At Any One Ti	me #jobs	\$		
What Is The Large	est Single Contract Your Comp	pany Can Best Handle	\$			
What Is the maxim	num Cost to Complete That Yo	our Company Can Best	Handle #jobs	s\$		
In What Radius (M	Miles) Can Your Company Ope	erate Best?	Miles			
Are Any I	estions Pertain To the Latest U More Than 10% Low Projects Behind Schedule e Any Delays or Disputes enalty	YesNo _YesNo _YesNo				
How Much of You	r Equipment is: Owned	_% Leased%?	Please attach	equipment list.		
4. Bonding Histo	ry					
	Companies With Whom You F					
Surety Company		Amount of Bono	ling Credit	Year	Reason For Change	
Reason For Chang	ing Sureties At This Time					
	tion Ever Been Denied?		If Yes Please	Explain		
	es Liens, Judgments, Law Suit					
information on me/us in with complete consumer <b>THE UNDERSIG</b>	orized to verify any information contain the processing of my/our application. To credit reports.  SNED CERTIFY THAT THE THAT IT IS TRUE AND CONTROL OF THAT IT IS TRUE AND CONTROL OF THAT IT IS TRUE AND CONTROL OF THAT IT	This document, or any photostate INFORMATION CO	ntic copy hereof, h	ereby authorizes any third p	party to furnish to Wendt Bonding	
Date:	Firm Name:					
SIGN HERE X_						