



**GTPS Insurance Agency**

1311 S Neil St,  
 P.O. Box 1007  
 Champaign, IL 61824-1007

Phone: 217-373-6856  
 Toll Free: 800-359-9529  
 Fax: 217-373-68577

**CONTRACTOR'S INFORMATION FORM**

Contractor: \_\_\_\_\_ Individual: \_\_\_\_\_ Partnership: \_\_\_\_\_  
 Address: \_\_\_\_\_ Corporation: C Corp \_\_\_\_\_ Sub S \_\_\_\_\_ LLC \_\_\_\_\_  
 City: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

OWNERS & WIVES LEGAL NAMES	TITLE	% OF OWNERSHIP	SS #	HOME ADDRESS

Any owner ever defaulted on contract? \_\_\_\_\_ Explain: \_\_\_\_\_

Business started: \_\_\_\_\_ Date Incorporated: \_\_\_\_\_

\*Attach brochure if available

Type work: \_\_\_\_\_

Territory: \_\_\_\_\_

If so, what type construction do you perform with your forces? \_\_\_\_\_

Percent of work subbed: \_\_\_\_\_ Percent you do yourself: \_\_\_\_\_

Percentage of work on which you are required to post bonds: \_\_\_\_\_

Percentage of work your subs bond back to you: \_\_\_\_\_

Any changes contemplated: \_\_\_\_\_

Any joint ventures in past? \_\_\_\_\_ Anticipated: \_\_\_\_\_

SUBSIDIARIES, AFFILIATES	% OF OWNERSHIP	STOCK HELD BY (INDIV., CORP.)	TYPE OPERATION



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**KEY PERSONNEL** (Attach resume if available)

NAME	POSITION	AGE
Experience:		
Experience:		
Experience:		
Experience:		
Experience:		
Experience:		

Present Surety: \_\_\_\_\_ Agent: \_\_\_\_\_

Time w/Surety: \_\_\_\_\_ w/Agent: \_\_\_\_\_

Previous Surety Company(ies): \_\_\_\_\_

Previous Agent(s): \_\_\_\_\_

**LARGEST JOBS COMPLETED** (During past 5 years)

\$ AMOUNT	YEAR	\$ PROFIT	ARCHITECT, ENGINEER OR OWNER
Job Name & Type:			
Job Name & Type:			
Job Name & Type:			

Largest Previous WOH (Work on Hand): \_\_\_\_\_  
( \$ to Complete )

Largest Single Job: \_\_\_\_\_  
( Contract Amount )

Present Surety Need: Single Job \_\_\_\_\_

Aggregate: \_\_\_\_\_

Do you bond subs? \_\_\_\_\_ As a matter of policy? \_\_\_\_\_ At surety request? \_\_\_\_\_

Union \_\_\_\_\_ Non-Union \_\_\_\_\_ Double-breasted \_\_\_\_\_ Labor environment \_\_\_\_\_

Unions Utilized: \_\_\_\_\_

Contract Expires: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



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**FINANCIAL AND CREDIT:** (Attach copy of most recent bank letter and equipment schedule if not on F/S.)

BANK NAME/ ADDRESS	PHONE NUMBER/ OFFICIAL TO CONTACT	SECURED	UNSECURED	LETTER DATED
1.				
2.				

**CREDIT REFERENCES (Major Suppliers):**

NAME	ADDRESS	CITY, STATE, ZIP	PHONE

Is present credit line adequate for foreseeable needs? \_\_\_\_\_ If not, what steps are being taken? \_\_\_\_\_

Does contractor principally Buy/Lease Equipment? \_\_\_\_\_ Is present equipment schedule sufficient for foreseeable needs? \_\_\_\_\_

**REFERENCES:** (Architect, Engineer, Owners not previously included in largest jobs section)

FIRM NAME (CONTACT)	ADDRESS/PHONE	JOB REFERENCE

**INSURANCE SCHEDULE:**

	LIMIT	CARRIER	EXPIRATION
LIABILITY - BASIC			
LIABILITY - UMBRELLA			
WORKERS COMPENSATION			
EQUIPMENT SCHEDULE			



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**LIFE INSURANCE:**

NAME - KEY PERSONNEL	AMOUNT	BENEFICIARY

Is Buy-Sell in effect? \_\_\_\_\_ Does it cover disability? \_\_\_\_\_ If so, please attach copy.

If not, when will one be considered? \_\_\_\_\_

**CONTROLS - ACCOUNTING:**

Fiscal year ends:				
Basis Tax Paid:	Cash:	Accrual:	% Completion:	Completed Contract:
Basis Stmt prepared:	Cash:	Accrual:	% Completion:	Completed Contract:
S.O.C. (Status of Contracts)	Annual:	Semi-annual:	Quarterly:	Monthly:
Is Financial Statement	Audit:	Review:	Compilation:	Other:
Did accountant use AICPA accepted standards?	Yes:			

Accountant's Name: \_\_\_\_\_

CPA:  Yes  
 No

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

ATTACH THE LAST 3 YEARS FINANCIAL STATEMENTS ON THE COMPANY.



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**INTERNAL CONTROLS:**

Are all bids checked by more than one individual? \_\_\_\_\_

Rundown of total construction process (tracing procedures and responsibilities from time you determine to bid job until completion of contract): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cost control utilized?	Copy of forms used:	On every job?
How often posted?	Progress report to management?	How often?
Compare costs with costs to complete?	How often?	

Comments \_\_\_\_\_  
\_\_\_\_\_

**OTHER INFORMATION:**

Has contractor ever been declined by a surety? \_\_\_\_\_ If so, explain why \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has contractor ever defaulted on a contract? \_\_\_ If so, explain why \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Other comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Information received from: \_\_\_\_\_ Date: \_\_\_\_\_