

**INSTRUCTIONS** Please complete this form and email it, with the requested documents, to [info@tsivikos.com](mailto:info@tsivikos.com).

**COMPANY INFORMATION**

COMPANY NAME

ADDRESS

CITY STATE ZIP CODE

EMAIL PHONE WEBSITE

CONTACT NAME AND TITLE YEAR BUSINESS WAS ESTABLISHED

**OWNERSHIP TYPE (CHECK ALL THAT APPLY)**

- Minority Owned Business Enterprise
- Women Owned Business Enterprise
- Disadvantaged Business Enterprise
- Sole Proprietorship
- S Corporation
- C Corporation
- Limited Partnership
- Limited Liability Company

FEIN NUMBER

**DOL:**  Yes  No      **Business Registration:**  Yes  No

*If yes to either above, please email a copy of your DOL & Business Registration to [info@tsivikos.com](mailto:info@tsivikos.com).*

**TRADE & WORKFORCE**

WHAT TRADE WORK DOES YOUR COMPANY PERFORM?

TOTAL NUMBER OF EMPLOYEES OFFICE FIELD

Are you directly or indirectly signatory to any labor union agreements?  Yes  No

IF YES, WHICH UNIONS?

**FINANCIAL**

CURRENT BONDING CAPACITY AUTHORIZED BY SURETY

SINGLE JOB LIMIT AGGREGATE LIMIT

BONDING COMPANY DUN & BRADSTREET NUMBER

FIRM'S BUSINESS VOLUME FOR THE PAST FIVE (5) YEARS

*Please be prepared to send your company's financial information upon request.*  
 Tsivikos Enterprises, Inc. • 337 Rt 36, STE 6, Port Monmouth, NJ 07758-1368

### INSURANCE

Please list the maximum limits your company has for the following insurance policies:

GENERAL LIABILITY	UMBRELLA	AUTOMOTIVE	WORKERS COMP
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### SAFETY

Please list your current Experience Modification Rate (EMR):

*Please also provide a copy of your EMR via email to [info@tsivikos.com](mailto:info@tsivikos.com).*

### SAMPLE PROJECTS

Please list a minimum of three (3) sample projects below.

Project Name	Project Type	Contract Value	General Contractor
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### REFERENCES

Contact information for a minimum of three (3) owners, GCs, or construction managers you have worked for in the past three (3) years:

Company	Contact	Phone	Email
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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