

July 11, 2018

Subcontractor Pre-Qualification Instructions

To Whom It Concerns:

At Summit, we seek to partner with Contractors & Vendors of the highest quality and standards with whom we share similar goals. Our Subcontract Pre-Qualification process will help us determine which prospective partners are qualified for the work Summit performs, as well as identify the appropriate opportunities for partnership.

Please complete, in full, the attached Subcontractor Qualification Statement and return with the applicable submittal documents. For any items which do not apply, please note "Not Applicable' or N/A. Note that incomplete Qualification Statements cannot be processed and that an approved Pre-Qualification is required to prior to working with Summit. Additionally, a completed and/or approved Pre-Qualification does not guarantee work.

Thank you for your interest in partnering with Summit Industrial.

Nick Maddøx

Vice President of Operations

PLEASE CHECK ALL ITEMS ENCLOSED

Completed Pre-Qualification Form

OSHA Logs (Previous 3 Years)

OSHA Citation/Jobsite Incident Write-up (if applicable)

Copy of Corporate Safety Manual

EMR Letter on Insurance Carrier's Letterhead

List of State Licenses and License Numbers

Construction Experience and References

Copy of W-9

Audited Financials (Previous 2 Years)

Bonding Capacity on Surety's Letterhead (if applicable)

Sample Certification of Insurance

Attachments:

Subcontractor Qualification Statement



| SUMMIT Subcontractor Qualification Statement |
|--|
| Contact Information |
| Contractor Name: |
| Address: |
| |
| Principle Contact: |
| Phone Number: |
| Email Address: |
| I. Employees (Avg Number over last 2 years) |
| |
| Corporate and Satellite Office: Field Construction Management: |
| Field Construction Staff: |
| II. Financial Data |
| **Please attach Audited Financial Statements for previous 2 years |
| Annual Revenue Total Man Hours |
| 2017 2017 |
| 2016 2016 2015 2015 |
| Largest Contract Completed |
| Project Name: |
| Project Description: |
| Date Completed: |
| D & B # Rating: |
| Surety: Rate: |
| III. Construction Experience |
| **Please attach lists of the following items: |
| A. Current Projects Under Contract **Items A and B should include the following at a minimum |
| B. Projects completed in the last 2 years 1. Location of project and Owner |
| C. List of 5 Construction References 2. Description of work performed 3. Final Contract Value |
| IV. Labor Affiliation (Check One) |
| Merit Shop Union Both |
| V. Affiliated Programs (Check all that apply) |
| |
| |
| VI. Qualified Project Locations **Please attach a list of work location and applicable license numbers for those locations |
| |
| VII. Safety Record (Section Must be Completed in Full) **Please attach a copy of your company's safety program for the current year |
| **Please attach a copy of your company's OSHA 300 and 300-A logs |
| EMR LTIR TRIR DART |
| 2017 2017 2017 2017 |
| 2016 2016 2016 2015 2015 2015 |
| OSHA Citations within the past 3 years: |
| Jobsite Fatalities within the past 3 years: |
| ***Please attach a detailed write up and corresponding corrective actions for all OSHA citations and/or jobsite |
| fatalities from the past 3 Years |