

January 2, 2023

Shop Fabrication 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 Shop Fabrication 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.

Joshua D. Johnson Chief Operating Officer

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:

Shop Fabrication Qualification Statement



Shop Fabrication Qualification Statement

Contact Information				
Contractor Name:				
Address:				
_				
Principle Contact:				
Phone Number:				
Email Address:				
I. Employees (Avg Number over last 2 years)				
Corporate and Satellite Field Construction Man				
Field Construction Staff	-			
II. Financial Data				
**Please attach Audited Financial Statements for previous 2 years				
Annual Revenue Total Man Hours				
2022				
2021	2021			
2020	2020		_	
Largest Contract Compl	eted		_	
Project Name:				
Project Description:				
Date Completed:				
			_	
D & B # Surety:	Rating: Rate:			
III. Construction Experience				
**Please attach lists of				
	-	**!+	A and D should include th	he fellowing at a minimum
A. Current Projects Und B. Projects completed in			on of project and Owner	he following at a minimum
C. List of 5 Construction			iption of work performed	
		3. Final (Contract Value	
IV. Labor Affiliatio	on (Check One)			
Merit Shop	Union	Both		
V. Affiliated Prog	ams (Check all t	hat apply)		
MBE	DBE	WBE	Other:	
VI. Qualified Project Locations				
**Please attach a list of	f work location and a	pplicable license	numbers for those locati	ons
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			-	
EMR 2022	LTIR 2022	TRIR 2022	DART 2022	
2022 2021	2021	2021	2021	
2020	2020	2020	2022 2021 2020	
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				