

## Contractor Questionnaire - Limited Form

Completion Required for Projects <= \$35,000

Homebridge must accept, prior to loan closing, all General Contractors who will perform or oversee work to be completed on a Limited 203(k) or Fannie Mae Renovation Loan. This Limited form should be completed for projects <= \$35,000.00.

## Documentation items required in addition to this form:

- Complete **Bid for work** (must not be marked as "Estimate" or indicate any expiration date)
- Copy of applicable business license(s)
- Completed W-9 Form, signed and dated
- Copy of General Liability Insurance Certificate

**Electric** 

**Company Name:** 

Phone #:

- · Copy of Worker's Compensation Insurance (when applicable, if separate from General Liability policy)
  - If exempt, provide evidence of exemption if provided by the state\*
  - \*If the state does not provide, please provide explanation for exemption

		Dasic Co	onipany imormation	וונ		
Legal Company Nan	me:					
Company Street Ad	dress:					
City, State, Zip:						
Company Phone Nu	ımber:	Er	mail:			
Owner(s) on Record	d:					
Primary Contact:			_			
Type of Business St	ructure:					
Individual/S	ole Proprietor	Partnership	Corporation	LLC	Other	
History & Experience *Note: Business reg		ing must meet State/	City/Municipal require	ments		
Number of years or	ganization has beer	in business under p	resent name:	<del></del>		
Number of years as	a contractor:					
If project costs > \$1	.5K and business/lice	ensing history is < 12	months - Please indica	te any prior wor	k experience:	
Are there any judgr	nents, claims, arbitr	ation proceedings or	suits pending or outsta	anding against y	ou or your organizatio	on or officers?
YES	NO					
Have you or your o	rganization filed any	lawsuits or requeste	ed arbitration regarding	g construction co	ontracts within the las	t 5 years?
YES	NO					
	Gen	eral Contractor a	and Specialty Licen	se Information	on	
General Con	ntractor License #: _					
No L	icensing Available: S	State/City/Municipali	ty does not require (su	bject to verificat	tion)	
Will subcontractors be employed for this project?						
If exem	npt from worker's co	omp AND employing	subcontractors, provide	e each subcontra	actor's General Liabilit	y Insurance
			lunicipality) - Provide in	_	-	ete the work:

**Plumbing** 

**HVAC** 

Other\_



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Formerly known as "Contractor Profile"

## **REFERENCES**

Provide information on 3 projects completed by you or your organization within the last 12 months that are similar in scope to this project. Please indicate contact information, contract amounts, and a description of the project and dates of completion.

Reference Name:
Phone Number:
Project Location:
Date of Completion:
Cost of Job:
Project Description:
Reference Name:
Phone Number:
Project Location:
Date of Completion:
Cost of Job:
Project Description:
Deference Name
Reference Name:
Phone Number:
Project Location:
Date of Completion:
Cost of Job:
Project Description:
Attestation and Signature
Contractor represents and warrants that all information in this questionnaire is complete and accurate. Contractor authorizes the Borrower and Homebridge to contact the references listed in order to verify the information is complete and accurate.
Printed Name:
Title:
Signature: