# Stanhope Simpson

# **CONTRACTOR QUESTIONNAIRE**

Corporate Name		Date of Incorporation
Business Address		
		Postal Code:
Phone:	Fax:	Web Site Address:

Management Personnel (List all corporate officers/partners/proprietors/shareholders/directors as applicable) (Use Separate Sheet if Necessary)

Name	Residence Address	Date of Birth	% Owned	Name of Spouse	Indemnity Available
					Yes 🗌 No 🗌
					Yes 🗌 No 🗌
					Yes 🗌 No 🗌
					Yes 🗌 No 🗌
					Yes 🗌 No 🗌

Key Personnel (Give the names of other key personnel such as Engineers, Estimators, Project Managers etc.) (Use Separate Sheet if Necessary)

Name	Age	Position	Since	Previous Employer	Position	Since

### Attach Resume for all Management and Key Personnel

### Related Companies (List all Subsidiary/Affiliated Companies)

(Use Separate Sheet if Necessary)

Name of Company	Business Address	Type of Business	Details of Ownership

Has the company or any of its principals and/or their spouses and/or a company of any of them ever failed in business, petitioned for bankruptcy, compromised with creditors or caused a loss to a Surety? (If yes, provide details)
Yes 🗌 No 🗌
Is the Company or any of its principals and/or their spouses and/or a company of any of them presently involved in litigation matters of any kind? (If yes, provide details)
Yes 🗌 No 🗌
Has the Company or any of its principals and/or their spouses and/or a company of any of them previously received bonding facilities? (If yes, provide name of Surety, bonding limits provided (single job/work program), length of time with Surety and reason for change)
Yes 🗌 No 🗌
Has there been any change in the control and/or management of the Company in the past 3 years? (If yes, provide details)
Yes 🗌 No 🗌
Is the Company or any of its principals and/or their spouses or a Company of any of them engaged in any of the following types of projects? Yes No Yes No Yes No Yes No
Joint Ventures          □ Contracts more than 2 years          □ Foreign Ventures          □ □         Wharf/pier/dams          □ Hazardous Materials          □ Bridge Construction          □ □

Page 1 of 4

Turnkey Propositions Tunnelling Projects Design/Build Projects <b>Class of Constructio</b>	Asbestos Remova	culation nt		Private/Public Partner Efficiency/Performanc Other (Specify)			
		] Mechanical ] (identify		Electrical Other	☐ ☐(identify)		
Federal %	Provincial	%	Other Publi	c %	Private %	, o	
In what geographic area	is the Company's work n	ormally undertal	ken? City	Provi	ince		
Radius from City in which	h work performed	km. Occas	sionally exp	ands into what othe	er geographic are	а	
Is the standard CCDC fo	rm of contract used? (If no	o, explain)					
Yes 🗌 No 🗌							
Is the work undertaken s	ubject to environmental e	exposures? (If yes	s, detail insura	nce coverages)			
Yes No		<u>.</u>	10				
On average, what portion				% What type of			
Are Bonds normally requ	-	rades? Alwa	ys ∐ Sor	netimes 🗌 Neve	er 🛄		
If <b>Never</b> , please explain	why not:						
If <b>Sometimes</b> , please ind	dicate under what circum	istances vou wai	ve bonds:				
What is the largest amo	ount of work on hand you	Ir Company has	had at any o	one time in the past	4 years:		
\$	Year	It con	sisted of	(	state number) of	contract	S
	u feel the Company and its o	owners are qualifie	ed to underta		to \$		
How many at once?	What type of	work?					
List the 4 Largest Fix	ted or Negotiated cor	ntracts comple	eted by the	e Company in the	e past 4 years:	: 4	
Turne of Morely	I	<b>Z</b>		3			
Type of Work							
Original Contract Price							
Final Contract Price							
Location							

When Started

Gross Profit

Surety

When Completed

Owner or General

Architect/Engineer

## List 5 current major suppliers:

Supplier	Business Address	Contact	Telephone# / E-mail

# List 5 subcontractors with whom the Company has worked in the last 2 years:

Company Name	Business Address	Contact	Telephone# / E-Mail

## Accounting Details:

When is the fiscal year-end of the Company?		
On what basis is the year-end statement prepar	red? Accrual 🗌 Completed Contr	act 🗌 % of Completion 🗌
How often are interim statements prepared?	Monthly 🗌 Quarterly	Semi-annually
Who prepares the outside statement?	C.A. Other (Identify)	
If C.A. prepared, are the statements fully audite	ed? Yes 🗌 No 🔲 If no, explair	۱
Name of Accounting Firm and individual to cont	act:	
Firm:	Contact:	Phone:
Does your staff include a full-time accountant?	Yes 🗌 No 📋 (if yes, provide deta	ils in space provided below)
NameBackgro	und	Years with Company
Banking Details: (Attach a copy of current Bank:	anking Agreement) Address:	
Account Manager:	Phone:	Fax:
Account Manager: Amount of available credit: \$ Life Insurance Details:(Provide details of "Key place.)	Phone: Amount currently i y Man" Insurance and/or attach a copy c	n use: \$
Account Manager: Amount of available credit: \$ Life Insurance Details:(Provide details of "Key place.)	Phone: Amount currently i	n use: \$
Account Manager: Amount of available credit: \$ Life Insurance Details:(Provide details of "Key place.) Carrier:	Phone: Amount currently i y Man" Insurance and/or attach a copy c	n use: \$
Account Manager: Amount of available credit: \$ Life Insurance Details:(Provide details of "Key place.) Carrier:	Phone: Amount currently i y Man" Insurance and/or attach a copy o Issued on behalf of: ender Value:	in use: \$
Account Manager:         Amount of available credit: \$         Life Insurance Details:(Provide details of "Key place.)         Carrier:         Amount: \$         Cash Surre	Phone: Amount currently i y Man" Insurance and/or attach a copy o Issued on behalf of: ender Value: m: From :	n use: \$ of Buy-Sell Agreement(s) which are currently in Beneficiary:

### Other Insurance Carried

Туре	Policy Number	Amount/Limits	Issuing Company
Liability			
Environmental			
Errors & Omissions			
Equipment			
Other			

### **Other Information:**

Is the Company or any of its principals and/or their spouses or a Company of any of them, acting as guarantor, indemnitor, or Surety for others, or as endorser (co-signor) on notes and/or accounts? (if yes, provide details)
Yes 🗌 No 🗌
Does the Company or any related, affiliated or subsidiary company anticipate purchasing in the next 12 months any equipment or other form of fixed asset or extending any portion of existing fixed assets presently owned? (If yes, provide details) Yes No
Does the Company or any related, affiliated or subsidiary company have any accounts receivable and/or holdbacks receivable which are overdue? (If yes, provide details)
Yes 🗌 No 🗌

## Please attach the following information prior to submitting

Last 3 fiscal year-end statements and any recent available interim statements of the company and any related, affiliated and/or subsidiary companies.
Current personal financial statements of all individuals having a financial interest in the company and/or any related, affiliated and/or subsidiary companies
Completed "Status of Contract" form as at the Company's last fiscal year end and at a current date.
All separate sheets on which explanations are being provided in respect to answers given to questions previously asked in this questionnaire.
Copy of the current Banking Agreement in respect to the Company's Line of Credit Facility.
Resumes for all Management and Key Personnel
Any relevant Company brochures

For the purpose of allowing Stanhope Simpson Insurance Limited to apply for surety bonds or their undertakings on behalf of the undersigned, the undersigned herebywarrants that the above information is true and accurate. The undersigned further authorizes any financial institution, credit bureau or other reference to verify the correctness of information presented in this questionnaire for the purpose of any surety bond provider's underwriting review.

Dated this \_\_\_\_\_\_, 20\_\_\_\_\_,

Signature of authorized individual

# Stanhope Simpson Insurance Ltd.

# CONTRACT STATUS REPORT

NAME OF CONTRACTOR:							STATUS A	AS AT:		
Provide Name of Owner or General Contractor and a brief Contract Description	Bond Number (if applicable)	Original Contract Price	Original Est. Cost at Time of Bid	Current Contract Price incl. app. Change Orders	Billed to Date	Payments Received to Date	Total Direct Costs to Date	Current Estimated Cost to Complete	Estimated Date of Completion	Comments: (satisfactory progress, liens, delays, etc.) (Attach details if more space is required)
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9										
10.										
11.										
12.										
TOTALS										
Report Prepared By:	Name (Print):				Signature:				Title:	
Date:						PROVIDE INFO STATUS REPOR		OMPLETED CON	TRACTS ON TH	E BACK OF THIS CONTRACT

### CONTRACTS COMPLETED SINCE LAST FISCAL YEAR END OR SINCE LAST CONTRACT STATUS REPORT

Name of Owner or General Contractor & Contract Description	Bond No.	Final Contract Price	Profit	Date Completed	Comments
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
TOTALS					

#### THE FOLLOWING DEFINITIONS ARE PROVIDED TO ASSIST YOU IN COMPLETING THIS REPORT:

1. CONTRACT PRICE and CONTRACTOR=S ESTIMATED COST AT TIME OF BID should include approved change orders only and, in original estimated costs, the costs applicable thereto. Exclude claims and disputed items. If desired, an explanation of these items may be attached.

If contracts are on a unit price basis, and the estimated number of units approved has increased or decreased since bid date, adjust the original contract price and costs accordingly, using the original price and cost per unit as a base, and enter these amounts unless the change in unit quantity has contractually operated to change the unit price.

2. All projects should be listed: Bonded, non-bonded, lump sum and cost plus.

- 3. COSTS should be entered consistent with financial statement (Profit and Loss Report) allocation, excluding general and administrative (specifically unallocated) overhead.
- 4. BILLED TO DATE and COST TO DATE should be entered as of the same date or, when this schedule is provided in conjunction with a financial statement, consistent with their treatment in the financial report.
- 5. ESTIMATED REMAINING COSTS TO COMPLETE should be a revised figure reflecting developments which have occurred subsequent to bid date causing a change in total cost (or cost per unit), if any, not merely a subtraction exercise. After approximately 50% completion, it is imperative that a re-evaluation of costs be made. In the early stages of a project, a re-evaluation of costs may be difficult and perhaps impractical.

# Stanhope Simpson

INSURANCE LTD.

# PERSONAL WORTH STATEMENT

Name of Individual:\_\_\_\_\_

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

Occupation:\_\_

STATEMENT OF ASSETS AND LIABILITIES AS OF\_

### CURRENT ASSETS

CURRENT LIABILITIES

Phone:

Cash in Bank Branch

Cash on Hand Stocks, Bonds, etc. (Schedule "A")

Accounts Receivable	
Mortgages Receivable	
Life Insurance C.S.V.	
Other Current Assets	
Other Investments	

Accounts Payable

Bank Loan Loans Payable Taxes Due Interest Due

Other Current Liabilities (describe)

Total Current Liabilities

#### **Total Current Assets**

FIXED ASSETS

Other Personal Property and Fixed Assets (describe)

DEFERRED LIABILITIES

Real Estate (Schedule "B")

Mortgages on Real Estate (Schedule "B")

Other Deferred Liabilities (Liens) (describe)

**Total Assets** 

Total Liabilities Personal Net Worth

LIFE INSURANCE			
Name of Company	In Favour of	Amount of Policy	Cash Surrender Value
		\$	\$

	Schedule	"A" - Stocks, Bonds	s, Etc.	
Name of Security	No. of Shares	Par Value	Market Value	Secured or Unsecured

	Schedule "B" - Real Estate			
Location/Description	In Whose Name	Present Value	Amount of	Mortgage
of Property	Title		Mortgage	

Mortgages Owned				
In Favour Of	Property Covered	Amount of Mortgage	Prior Mortgages	Maturity

Questionnaire

Indirect Liability - As Endorser - \$
Indirect Liability - As Guarantor - \$
Indirect Liability - Finance Corporations - \$
Fire Insurance - Real Estate - \$

The undersigned hereby declare(s) that all the information provided herein and on the accompanying statements is to the best of my/our knowledge true, complete and correct and understand it will be used by the Surety to determine credit worthiness. The undersigned further consent(s) to the Surety making any enquiries it deems necessary to reach a decision on this application, and consent(s) to the disclosure at any time of any credit information about me/us to any credit reporting agency or to any one with whom I/we have financial relations.

Witness\_\_\_\_\_

Signed\_\_\_\_\_

# Stamhope Simpson

Attention: Bank Manager

Re:
-----

Good Day \_\_\_\_\_,

We are considering providing bond facilities for the above contractor and through application to us for Surety, they have referred us to your branch where, we understand, they conduct their banking operations.

We would appreciate you answering the following questions. The information will be considered confidential and will confer no responsibility upon you.

If you deem it necessary we suggest that you contact	
of the above for his/her permission to release this information to us.	

1.)	How long has this account been with your bank?
2.)	What is the average balance maintained in the company's account?
3.)	What is the present balance in the company's account?
4.)	What line of credit is extended and how it is secured?
5.)	What is the Review date of the line of credit?
6.)	What is the highest amount that has ever been borrowed?
7.)	What is the amount presently owing?
	Are settlements made as agreed or are extensions requested?
9.)	General comments, if any:
,	

Thank you for your cooperation.

Sincerely,