

## CONTRACTOR'S QUESTIONNAIRE

1. Name of Compagnie: \_\_\_\_\_
2. Address: \_\_\_\_\_
3. Telephone: \_\_\_\_\_
4. Site internet: \_\_\_\_\_
5. When was the business started? \_\_\_\_\_
6. When incorporated? \_\_\_\_\_
7. Type of Contractor, i.e., General Building Contractor, Paving, Electrical, etc. If more than one type, list all and give approximate percentage of annual sales applicable to each:  
\_\_\_\_\_
8. In what geographical area? \_\_\_\_\_
9. List all Corporate Officers, Proprietor, Partners, Shareholders, Directors:

Full Name (including initials)	Date of Birth (MM/DD/YYYY)	Position	Held Since	% Stock Ownership	Years of Const. Experience

10. Key Personnel – (Principals, Engineers, Estimators, Superintendents, Foreman, etc.)

Name	With Co. Since	Position	Date of Birth (MM/DD/YYYY)	Years of Const. Experience

\* Attach resume for each person outlining education, experience and specifying type of work handled, previous employers and positions held.

11. Have there been any changes in the control or management of the company in the past three years?  
 Yes  No  
If Yes, please explain fully:  
\_\_\_\_\_

12. Does your company have on or more related companies?  Yes  No  
 If Yes, please state name, address, type of business and share ownership and attach copy of latest available fiscal year-end financial statement for each company:

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13. Are any of the persons named in (9) above or their spouses, engaged in any other business or businesses?  Yes  No  
 If Yes, please state name, address, type of business and share ownership and attach copy of latest available fiscal year-end financial statement for each such company

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14. Is this company, a related company, or any of the persons named above or their spouses engaged:  
 In a joint venture  Yes  No  
 In a foreign venture  Yes  No  
 In land or property speculation  Yes  No  
 In real estate development  Yes  No  
 In contracts lasting more than 2 years  Yes  No  
 In turnkey propositions  Yes  No  
 In design work  Yes  No  
 As a subdivider  Yes  No

15. On the average, what portion of you work is subcontracted?  
 Do you normally require bonds from subcontractors?  
 If No, explain:  Yes  No

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## BANK

Nom of Bank: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 With Bank since: \_\_\_\_\_  
 What is authorized operating line of credit? \_\_\_\_\_  
 How much is presently in use? \_\_\_\_\_ \$ \_\_\_\_\_  
 How secured? \_\_\_\_\_  
 What other loans do you have? \_\_\_\_\_  
 Amount outstanding: \_\_\_\_\_ \$ \_\_\_\_\_  
 Annual repayment: \_\_\_\_\_ \$ \_\_\_\_\_  
 How secured? \_\_\_\_\_

## ACCOUNTING

- When is your fiscal year end? \_\_\_\_\_
- On what basis are financial statements prepared?  
 Completed Contract  
 Percent of completion  
 Other, please specify: \_\_\_\_\_
- Who is your auditing firm and contact? \_\_\_\_\_

4. Are individual job cost records prepared?  Yes  No  
 If Yes, how often are they updated?  
 Reviewed? \_\_\_\_\_

5. Does your office staff include a full-time accountant/bookkeeper?  Yes  No

6. When are interim financial statements prepared? \_\_\_\_\_

7. At present, your company is:  
 Discounting Bills  Paying in 30 days  
 30-60 days  60-90 days  
 Over 90 days  Special Terms (explain) \_\_\_\_\_

8. Do you have one or more accounts receivable or hold-backs of any consequence which are overdue or doubtful?  Yes  No  
 If Yes, give details and amounts:  
 \_\_\_\_\_

9. Do you at present have any holdbacks which are not due within 12 months?  Yes  No  
 If Yes, state amount: \$ \_\_\_\_\_  
 And when due: \_\_\_\_\_

10. Have any of your accounts receivable, holdbacks or notes been assigned, pledged, sold, or discounted?  Yes  No  
 If Yes, give details:  
 \_\_\_\_\_

11. Have you or any related Company purchased any equipment or other assets since your last fiscal year end?  Yes  No  
 If Yes, indicate type of asset, monthly payments, total purchase price, name of tender, down payment, term. (If more than one uses a separate sheet of paper)  
 \_\_\_\_\_

12. Do you or any related Company contemplate purchasing, in the next 12 months, any equipment or other fixed assets?  Yes  No  
 If Yes, give full details: type of asset, monthly payments, total purchase price, name of tender, down payment, term. (If more than one uses a separate sheet of paper)  
 \_\_\_\_\_

13. Have you or any related Company since the last fiscal year end, constructed, or do you contemplate building or acquiring or having constructed in the next 15 months, a building, shop or plant for your own use or an extension of your present one?  Yes  No  
 If Yes, give full details:  
 \_\_\_\_\_

14. What is the estimated market value of your fixed assets?  
 \_\_\_\_\_

15. What is the estimated insurance policy value of your fixed assets?  
 \_\_\_\_\_

**16.** Is your company acting as Guarantor, Indemnitor, Bondsman or Surety for other or as endorser on their notes of account?

Yes  No

If Yes, give full details:

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**17.** List your present five (5) largest supplies:

Name	Address	Postal Code

**18.** List three architects or engineers who have supervised your work in the past year:

Name	Address	Owner / Project

**19.** List the five (5) largest contracts completed by your company:

Owner - Nature of work and location	Contract Price	Owner / Project

**20.** What is the largest amount (\$) of uncompleted work on hand at any one time in the past?

Amount: \$ \_\_\_\_\_  
 Year: \_\_\_\_\_

**21.** What maximum size contract in each of the types of work you do, do you think your company is best qualified to handle?

Type: \$ \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Type: \$ \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Type: \$ \_\_\_\_\_  
 Amount: \_\_\_\_\_

**22.** What work program do you feel your organization is qualified to undertake:

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Total program any one time: \_\_\_\_\_

During the next 12 months: \_\_\_\_\_

**23.** Is the operation

Union       Non-Union

Duration of union contacts:

When does the present contact expire?

Do you pay union wages?

Yes  No

**24.** To what extent does management control and supervise individual jobs?

Daily       Weekly  
 Monthly       Personally  
 Through reports       Other (please specify) \_\_\_\_\_

**25.** Has your company or any of its principals ever failed in business,  
defaulted on a contract, or compromised with creditors or caused a loss  
to a Surety?

Yes  No

If Yes, please explain fully:

**26.** Are there any liens for labour or materials filed against you anywhere?

Yes  No

If Yes, please explain fully and give amounts:

**27.** Are there any judgements, suits or claims outstanding against your  
Company, its officers, or any company of either?

Yes  No

If Yes, please explain:

**28.** Are others disputing any work which you did or failed to do or any account  
which you presented to them?

Yes  No

If Yes, please explain fully and give amounts:

**29.** Are there any liens for labour or materials filed by you against a third party?

Yes  No

If Yes, please explain fully and give amounts:

**30.** Are you disputing any work which was done for you or accounts which  
were presented to you?

Yes  No

If Yes, please give full details and amounts:

**31.** If you have previously bonded, state name of present Surety:

How long with present Surety and reason for change?

Has application for Suretyship ever been declined?

Yes  No

If Yes, please explain fully:

**32. List any "Key Man" insurance carried – Life Insurance and Accident, Sickness and Disability**

Insured	Amount	Issuing Company	Beneficiary

**33. List of insurance coverage in effect:**

Coverage	Limits	Insurance Company
Property	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Equipment	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Stock	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Installation Floater	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Builder's Risk	<input type="checkbox"/> Yes <input type="checkbox"/> No	
C.O.C.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Windstorm	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Automobile	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Liability	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Completed Ops	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Non-owned Auto	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Umbrella	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Fidelity	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**ATTACHED TO THIS PRESENTATION SHOULD BE:**

- Last three (3) fiscal year and statements and any recent interim statement of applicant and of all related companies whether active or not.
- Personal financial statements of all shareholders and financial statements of their other companies whether active or not.
- Propose and description of operations of each of the related or privately owned companies whether active or not.
- Current job progress report and job progress report as of latest financial year end.
- A letter from your bank stating your operating line of credit, the amount presently in use and the security held.
- Resumes on key personnel.

By signing this form, I consent to Revau collecting, using and disclosing my personal and financial information (including, where applicable, credit information) for the purposes of analysis, risk assessment, issuance, administration and management of a surety bond, as well as compliance with applicable legal obligations. I consent to such information being disclosed to insurers, reinsurers, financial institutions and other parties necessary for these purposes. I acknowledge that my information may be processed or stored outside my province or outside Canada and that I have rights of access, correction and withdrawal of consent, subject to applicable obligations.

The Undersigned hereby represents that the above statements are true and authorizes the Bank and other references to verify the correctness of the statements.

Prepared for the company by: \_\_\_\_\_ Position: \_\_\_\_\_

Signature of the Insured: \_\_\_\_\_ Date: \_\_\_\_\_

Please send the completed, signed and dated application to [surety@revau.com](mailto:surety@revau.com).