

CONTRACTOR'S/OWNER'S REPRESENTATIVE PROFILE FORM

Date: _____
Company Name: _____
Address: _____
City, State Zip: _____
Telephone: _____
Fax#: _____
Telephone: _____
Contact: _____
Email: _____
Web Address: _____

What is your Bonding Capacity? Per Project \$ _____ Aggregate \$ _____

Surety Company:

Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Telephone: _____
Contact: _____
Surety Agent _____

Are you currently on the New Jersey Debarment List? _____ Yes _____ No
Are you currently on any Federal Debarment List? _____ Yes _____ No

Please indicate the services your company performs:

- ☐ General Contractor at Risk ☐ Owner's Representative
☐ Design Build ☐ Construction Manager at Risk

Project Types:

- ☐ Yes or No ☐ General Education ☐ Yes or No ☐ Laboratories ☐ Yes or No ☐ Parking Structures
☐ Yes or No ☐ HealthCare ☐ Yes or No ☐ Residence Hall ☐ Yes or No ☐ Solar
☐ Yes or No ☐ Life Sciences ☐ Yes or No ☐ Sports Facilities ☐ Yes or No ☐ Others, Provide list

Are You Registered As?

- ☐ MBE: Minority Business Enterprise Yes
☐ SBE: Small Business Enterprise
☐ WBE: Women Business Enterprise

Please Provide At Least 3 References Which Include The Following: (Attach pages as necessary)

1. Project Name
2. Contract Amount(\$)
3. Contracting Method
4. Type of Project
5. Architect's name, address, and phone number
6. Architect's contact person
7. Projects Owner's name, address and phone number
8. Project Owner's contact person and phone number