



CROSSROADS CONSTRUCTION COMPANY

P.O. Box 1109 ♦ Lakeland, FL 33802-1109 ♦ Phone 863/644-6499 ♦ Fax: 863/644-5973

BIDDER QUALIFICATION FORM

Complete this form and return via email to info@crossroadsconstruction.net or fax to 863-644-5973.

Date: _____

Company Name: _____

Mailing Address: _____

Physical Address: _____

Phone: _____ Fax: _____

Cell #: _____ E-mail: _____

Contact Name: _____

Type of Work Performed: _____

Years in Business: _____ Contractors License Number: _____

Area of Business: _____

Insurance Agent: _____

Total Number of Employees: _____ Total number of Active Projects: _____

Total Volume of Active Projects: _____

General contractor references: _____ Phone: _____

_____ Phone: _____

List three projects completed with Contract amount and Date of Completion:

_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that to the best of my knowledge the information above is true and correct.

Signed: _____ Date: _____

Typed: _____

Title: _____

Attach any additional information that you feel will help us evaluate your company.