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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| moseal | STATE OF MISSOURI  OFFICE OF ADMINISTRATION  DIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTION  **CONTRACTOR’S QUALIFICATIONS** | | | | | | | | | | | | |  | |
| DATE | |
| NAME OF FIRM | | | | | | | | | | | | | | | |
| ADDRESS | | | | | | | | | | CITY | | STATE | | | ZIP |
| PHONE NUMBER | | | | FAX NUMBER | | | | | EMAIL ADDRESS | | | | | | |
| CONSTRUCTION CAPABILITIES | | | | | | | | | | | | | | | |
| GENERAL | | | PLUMBING | | | | | | | AIR CONDITIONING | | DEMOLITION | | | |
| ELECTRICAL | | | HEATING | | | | | | | VENTILATION | | OTHER | | | |
| BUSINESS TYPE: | | | | | | | | | | | | | | | |
| CORPORATION | | PARTNERSHIP | | | | | SOLE PROPRIETORSHIP | | | | | | JOINT VENTURE | | |
| **CORPORATION ONLY** | | | | | | | | | | | | | | | |
| DATE OF INCORPORATION | | | | | | | | | | | | | | | |
| NAME OF STATE(S) IN WHICH INCORPORATED | | | | | | | | | | | | | | | |
| IF NOT INCORPORATED IN MISSOURI, PROVIDE CERTIFICATE OF AUTHORITY TO DO BUSINESS IN MISSOURI | | | | | | | | CERTIFICATE NO. | | | | DATE | | | |
| PRESIDENT NAME | | | | | | | | | | VICE PRESIDENT NAME | | | | | |
| SECRETARY NAME | | | | | | | | | | TREASURER NAME | | | | | |
| **PARTNERSHIP ONLY** | | | | | | | | | | | | | | | |
| DATE OF ORGANIZATION | | | | | | | | | | PARTNERSHIP | | | | | |
| GENERAL  LIMITED  ASSOCIATION | | | | | |
| **List All Partners (Use Additional Sheet If Necessary)** | | | | | | | | | | | | | | | |
| NAME | | | | | | | | | | ADDRESS | | | | | |
| NAME | | | | | | | | | | ADDRESS | | | | | |
| NAME | | | | | | | | | | ADDRESS | | | | | |
| NAME | | | | | | | | | | ADDRESS | | | | | |
| **GENERAL INFORMATION** | | | | | | | | | | | | | | | |
| FEDERAL ID NUMBER | | | | | | | | | | SOCIAL SECURITY NUMBER | | | | | |
| PERCENT OF WORK DONE BY CONTRACTOR | | | | | | NUMBER OF PERMANENT EMPLOYEES | | | | | GEOGRAPHICAL LIMITS OF OPERATION | | | | |
| NUMBER OF YEARS IN BUSINESS | | | | | IF YOU HAVE DONE BUSINESS UNDER A DIFFERENT NAME, GIVE NAME AND LOCATION | | | | | | | | | | |
| HAS FIRM EVER FAILED TO COMPLETE PROJECT OR DEFAULTED ON A CONTRACT? IF SO, STATE WHERE AND WHY | | | | | | | | | | | | | | | |
| HAS FIRM EVER BEEN ENGAGED IN LITIGATION OVER ANY CONTRACT? IF SO, EXPLAIN | | | | | | | | | | | | | | | |

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| LIST COMPLETED PROJECTS WITHIN LAST FIVE (5) YEARS INCLUDING COST OF EACH, NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER CONTACT. |
| LIST PROJECTS CURRENT UNDER CONSTRUCTION INCLUDING COST OF EACH, NAME, ADDRESS, AND TELEPHONE NUMBER OF OWNER CONTACT. |

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