



SUBCONTRACTOR APPLICATION FORM

Name,  
As shown on tax return

Services Provided/  
Scope of Work

SUBCONTRACTOR BUSINESS INFORMATION

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Accounting Point of Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
*Street City/State Zip*

Remit to Address: \_\_\_\_\_  
*Street City/State Zip*

Website: \_\_\_\_\_

**Operating As:**

*If you are an LLC, please check the entity type you are taxed as*

- |  |  |
|--|--|
| <input type="checkbox"/> Corporation     | <input type="checkbox"/> Non-Profit Organization |
| <input type="checkbox"/> Partnership     | <input type="checkbox"/> Government              |
| <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> LLC Taxed As: _____     |

Federal Employee Identification Number, Social Security, or GST: \_\_\_\_\_

Years in business: \_\_\_\_\_

Net Terms: \_\_\_\_\_

Subcontractor Signature \_\_\_\_\_ Print \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_



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## INSURANCE REQUIREMENTS

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In an effort to expedite our project start up, we are asking our subcontractors to submit certificates of insurance that comply with the requirements set by Carr's General Contracting. Below is a list of those insurance requirements.

### COMMERCIAL GENERAL LIABILITY

*minimum \$1,000,000 General Aggregate/\$1,000,000 per occurrence*

### AUTOMOBILE LIABILITY

*minimum \$1,000,000 combined single limit*

### WORKERS COMPENSATION LIABILITY

*minimum \$1,000,000 Employers Liability*

### COMMERCIAL GENERAL LIABILITY

*minimum \$4,000,000*

- Certificate must list Carr's General Contracting, Inc. as additionally insured
- Certificate must provide Gallant Builders with a waiver of subrogation
- Certificate must provide 30 days' cancellation notice

Certificate Holder must read as the following:

CARRS GENERAL CONTRACTING, INC.  
13210 WEIMAN RD.  
HOUSTON, TX 77054

*Please note that subcontractors' insurance is primary to any insurance carried by Carr's General Contracting. No action by Carr's General Contracting relieves subcontractor from its duties to provide the required insurance coverage. It is noted that the above limits requested are not to be constructed, in any way, as limiting the Subcontractors liability in the event of legal action or claim.*



## ADDITIONAL DOCUMENTATION REQUIREMENTS

### BASIC COMPANY

- Signed and dated W-9*
- Surety Letter*

### CERTIFICATIONS

- Trade Licenses, if applicable to your firm*
- MBE/DBE Certifications, if applicable to your firm*

### FINANCIAL

- Bank Credit Reference Letter*
- Consolidated Financial Statements*

### SAFETY, *(if Safety Questionnaire was completed)*

- 3-year OSHA 300A Logs*
- 3-year EMR NCCI Sheets or state equivalent documents*