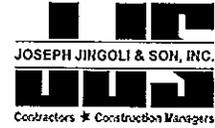


Joseph Jingoli & Son, Inc.  
100 Lenox Drive  
Suite 100  
Lawrenceville, New Jersey 08648



Phone: (609) 896-3111

[www.jingoli.com](http://www.jingoli.com)

Fax: (609) 896-1131

## Subcontractor Outreach Invitation Application

### General Information

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Contact \_\_\_\_\_  
Email \_\_\_\_\_  
Date: \_\_\_\_\_

*If you have more than one office, provide the information for the office that would be securing work in the Mid-Atlantic region.*

Type of Business (check one)

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Sole Proprietorship \_\_\_\_\_

What year was the business founded? \_\_\_\_\_

Is the business incorporated? \_\_\_\_\_ State \_\_\_\_\_ Year \_\_\_\_\_

Does the business qualify as one of the following small or disadvantaged business enterprises?

WBE \_\_\_\_\_ MBE \_\_\_\_\_ VBE \_\_\_\_\_ SBE \_\_\_\_\_

*Attach copies of certification for type of DBE checked*

List the states in which the firm is licensed to do business

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Attach copies of certifications if you are prequalified to work for any governmental agencies.*

## Subcontractor Outreach Invitation Application

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### Organization

Chief Executive Officer \_\_\_\_\_

President \_\_\_\_\_

Vice President(s) \_\_\_\_\_

Chief Financial Officer \_\_\_\_\_

### Key Personnel

\_\_\_\_\_  
*Name* *Position*

\_\_\_\_\_  
*Name* *Position*

\_\_\_\_\_  
*Name* *Position*

\_\_\_\_\_  
*Name* *Position*

Value of the largest contract completed in the past 5 years \_\_\_\_\_

Annual volume for the past 2 years \_\_\_\_\_

Does your company currently carry bonding? (Yes/No) If (Yes) amount \_\_\_\_\_

	Inquiry items	Yes	No
1	Does your company have a written Health & Safety Program?		
2	Does your company have a Drug & Alcohol Policy?		
3a	Do you conduct safety inspections?		
3b	Who conducts these inspections?		
3c	Frequency of inspections?		
4a	Does your company hold safety meetings or toolbox talks?		
4b	Frequency of these meetings?		
5	Do you have an orientation for new employees?		
6	Do you have an instruction program for supervisors?		
7	Are your employees OSHA trained?		
8	Are your employees First Aid and CPR trained?		
9	Has your company ever been inspected by OSHA? If Yes, explain below.		

## Subcontractor Outreach Invitation Application

### Labor Relations

Are your trade employees union or open shop? \_\_\_\_\_

If union list unions with whom your company is signatory \_\_\_\_\_

Trades the firm normally employs and current level of staffing

Trade	No. of employees
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

### Work Preference

List the trades you are interested in bidding

_____	_____
_____	_____
_____	_____

List the work associated with your trade that you normally subcontract

_____	_____
_____	_____
_____	_____

List three references your company has contracted with in the past five years

_____	_____
_____	_____
_____	_____

## Subcontractor Outreach Invitation Application

### Certification

I certify that information provided in this Subcontractor's Statement of Qualifications and Financial Condition is a true and accurate response.

\_\_\_\_\_  
*Name*

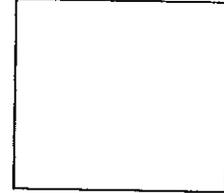
\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Date*

Witness

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Date*



Corporate Seal