

CONTRACTOR PROFILE REPORT

JOB INFORMATION

Case Number:		Date:	
Borrower Name:		Co-Borrower Name:	
Property Address:			

CONTRACTOR INFORMATION

Contractor Name:							
Address:		City:		State:		Zip:	
Principal:		Social Security #:					
Point of Contact:							
Work/Phone Number:		Cell Number:		Fax Number:			
Email:							

ORGANIZATION

Type of Organization:	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> LLC	<input type="checkbox"/> Joint Venture	<input type="checkbox"/> Individual
Number of years in which the organization has been in business:					
Other Co. Names?					
List jurisdictions legally licensed/qualified to conduct business:					
Tax ID Number:			License Number:		

REFERENCES

Bank:		Phone:		Name:		Acct #:	
Bank:		Phone:		Name:		Acct #:	
Trade:		Phone:		Name:		Acct #:	
Trade:		Phone:		Name:		Acct #:	
Client:		Phone:		Date of Work:		(Must be in past 12 months)	
Type of Work:							
Client:		Phone:		Date of Work:		(Must be in past 12 months)	
Type of Work:							
Client:		Phone:		Date of Work:		(Must be in past 12 months)	
Type of Work:							

MISCELLANEOUS

Are there any judgments, claims, arbitration proceedings or suits pending or outstanding against you or your organization or its officers? If yes – describe in an attached document and provide 3 rd party documentation.	Yes	No
Have your or your organization filed any lawsuits or requested arbitration with regard to construction contracts within the past five (5) years? If yes – describe in an attached document and provide 3 rd party documentation.	Yes	No

INSURANCE

Liability Insurance Carrier:		(must provide current declarations page w/minimum \$1mm per incident)	
Policy #:		Expiration Date:	
Workman's Comp Insurance Carrier:			
Policy #:		Expiration Date:	

Contractor represents and warrants that all information in the Contractor's Profile is complete and accurate. Contractor authorizes the borrower and/or lender, to contact the references listed above to verify the information represented in this Contractor Profile.

Signature:			
Typed/Written Name:			
Title:		Date:	

In addition to this completed form, Contractor must provide; State/Local Licenses, Current Liability Insurance, Final Repair Bid and fully completed Lender required documents to include executed W-9.