

CONTRACTOR'S PRE-QUALIFICATION CHECKLIST

In order to perform work at a building/property under management by Stevenson Management Services Ltd., all contractors must complete this form and submit all information as requested below. Please check off those documents, which are in place and included in your submitted package.

Business Information:

Company Name: _____

Company Address: _____

Business Contact: _____

Telephone Number: _____ Fax No.: _____

Email: _____

Description of Work/Service to be Performed: _____

Please check all that apply and include supporting documentation:

- Business License or regional equivalent _____
- Comprehensive General Liability insurance to be the value of minimum \$2 million
- Vehicle registration showing 3rd Party Liability insurance to the value of minimum \$2 million
- Safety Program, Manitoba Construction Safety, Simplified Safety #_
- Worker's Compensation Number: _____
- Worker's Compensation Clearance Certificate
- General statement of qualification package, company pamphlet or brochure.
- Examples of similar jobs, estimated value and job contact references.
- COR Certification Number: _____
- Other (specify) _____

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Please be advised that only those trades/contractors with current documents and licensing who meet all requirements of Stevenson Management Services Ltd. will be considered for the work to be completed as per the tendering document and/or specifications.

Completed and submitted by: _____
Print Name and Title

Date Submitted: _____

Approval & Acceptance of submission by Stevenson Management Services Ltd. (as Agents for the Corporation)

Signature & Title

Date

Comments:

