

## ***Subcontractors/Partners On-Boarding Form***

### **General Information**

*Company Name*

*Company Address*

*Contact Person*

*Phone Number*

*Email Address*

### **Company Profile**

*Years in Business*

*Core Business Activities*

*Licenses and Certifications (Please attach copies of all relevant licenses, certifications, and permits)*

### **Work Cover**

*Work Cover Insurance Provider*

*Work Cover Policy Number*

*Work Cover Coverage Limit*

### **Relevant Experience**

*List of Similar Projects Completed in the Last 5 Years*

*Project Name, Client, Project Value, Scope of Work, Completion Date*

### **Management**

*Project Manager Name*

*Years of Experience*

*Relevant Certifications*

### **Workers Name**

*Years of Experience*

*Relevant Certifications*

### **Health & Safety Policy in Place Yes/No**

*Safety Training Programs for Employees Yes/No*

### **Insurance Information**

*General Liability Insurance Provider*

*General Liability Policy Number*

*General Liability Coverage Limits*

## ***Staff Work Licenses***

<b>Name</b>	<b>License Type</b>	<b>License Number</b>	<b>Issuing Authority</b>	<b>Expiration Date</b>

## ***Acknowledgement***

*I certify that the information provided in this form is true and accurate to the best of my knowledge.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_