

Contractor's Qualification Statement

Standard Construction Document

CCDC 11– 1996 (R2006)

This document is intended to provide information on the capacity, skill, and experience of the Contractor. Applicant may supplement information requested with additional sheets if required.

Project Number:

Project Title:

Location:

1. Submitted to:

Firm Name:

Address:

Phone:

Fax:

E-mail:

2. Submitted by:

Firm Name:

Address:

Phone:

Fax:

E-mail:

3. Legal Structure of Contractor:

Year Established:

Joint Venture, Corporation, Partnership, Registered, Sole Proprietor ,

Other:

Names and Titles of Officers, Partners, Principal:

Name

Title / Position

I declare the information in this form to be true and correct to the best of my knowledge

Name of Contact Person:

Title of Contact Person:

Apply CCDC 11 copyright seal here.

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Canadian Construction Documents Committee

Contractor's Qualification Statement

4. Financial References

a. Bank Name:

Address:

Contact Person(s):

Phone:

Fax:

E-mail:

b. Bonding Company:

Address:

Contact Person(s):

Phone:

Fax:

E-mail:

5. Annual value of construction work for the past five years

Year	Value
	\$
	\$
	\$
	\$
	\$

6. Key office personnel proposed for the project

(e.g. Principal in Charge, Project Manager, Estimator, etc)

attach resume of qualifications and experience:

Name

Title / Position

7. Key site personnel proposed for the project

(e.g. Project manager, Superintendent, Foreman, etc)

attach resume of qualifications and experience:

Name

Title / Position

8. Principal projects completed in the past five years. Listed in Appendix A.

9. Similar or related projects completed. Listed in Appendix B.

10. Major construction projects underway this date. Listed in Appendix C.

APPENDIX A
Principal projects completed in the past five years.

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX A
Principal projects completed in the past five years.

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX A
Principal projects completed in the past five years.

Project Title

Date Completed: Project Value: \$

Location:

Owner:

Contact Person(s):

Phone: Fax:

E-mail:

Consultant:

Contact Person(s):

Phone: Fax:

E-mail:

Description:

Project Title

Date Completed: Project Value: \$

Location:

Owner:

Contact Person(s):

Phone: Fax:

E-mail:

Consultant:

Contact Person(s):

Phone: Fax:

E-mail:

Description:

APPENDIX A Principal projects completed in the past five years.

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX A
Principal projects completed in the past five years.

Project Title

Date Completed: _____ Project Value: \$ _____

Location:

Owner:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Consultant:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Description:

Project Title

Date Completed: _____ Project Value: \$ _____

Location:

Owner:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Consultant:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Description:

APPENDIX B
Similar or related projects completed.

Project Title

Date Completed: _____ Project Value: \$ _____

Location:

Owner:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Consultant:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Description:

Project Title

Date Completed: _____ Project Value: \$ _____

Location:

Owner:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Consultant:

Contact Person(s):

Phone: _____ Fax: _____

E-mail:

Description:

APPENDIX B
Similar or related projects completed.

Project Title

Date Completed: _____ Project Value: \$ _____

Location: _____

Owner:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Consultant:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Description: _____

Project Title

Date Completed: _____ Project Value: \$ _____

Location: _____

Owner:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Consultant:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Description: _____

APPENDIX B
Similar or related projects completed.

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Date Completed:

Project Value: \$

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX B
Similar or related projects completed.

Project Title

Date Completed: _____ Project Value: \$ _____

Location: _____

Owner:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Consultant:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Description: _____

Project Title

Date Completed: _____ Project Value: \$ _____

Location: _____

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Phone: _____ Fax: _____

E-mail: _____

Consultant:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Description: _____

APPENDIX B
Similar or related projects completed.

Project Title

Date Completed: _____ Project Value: \$ _____

Location: _____

Owner:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Consultant:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Description: _____

Project Title

Date Completed: _____ Project Value: \$ _____

Location: _____

Owner:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Consultant:

Contact Person(s): _____

Phone: _____ Fax: _____

E-mail: _____

Description: _____

APPENDIX C

Major construction projects underway as of the date of submission.

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX C

Major construction projects underway as of the date of submission.

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX C

Major construction projects underway as of the date of submission.

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

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Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX C

Major construction projects underway as of the date of submission.

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Project Value: \$

Percent Completed:

Location:

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E-mail:

Consultant:

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Scheduled Completion Date:

Project Value: \$

Percent Completed:

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E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

APPENDIX C

Major construction projects underway as of the date of submission.

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

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E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description:

Project Title

Scheduled Completion Date:

Project Value: \$

Percent Completed:

Location:

Owner:

Contact Person(s):

Phone:

Fax:

E-mail:

Consultant:

Contact Person(s):

Phone:

Fax:

E-mail:

Description: