

1.2

HIRING PROFESSIONALS

Date: APN Number:

To: From: Project Location or Address:

Here is a checklist for determining whether or not we need construction professionals for this project and if so what type:

PRIME OR MAIN CONTRACTOR

ASK YOUR SELF THE FOLLOWING QUESTIONS:

	YES	NO	MAYBE
Do you understand the scope of the work necessary to begin and complete you project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you capable of preparing a written scope of work or specifications for you project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have the ability to qualify trade professionals and/or subcontractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you have the time to schedule, coordinate and inspect your project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is your project absent of structural alterations or improvements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Will your project activities allow your specialty contractors to supply all materials, labor and clean-up without your assistance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you able and willing to have the necessary building permit documents prepared , submitted and obtained for your project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All you willing to assume full responsibility for your project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you capable of setting up, reviewing and approving progress and final payments to contractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you understand the importance of securing certificates of insurance and lien releases from contractors?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTALS:	<input type="text"/>	<input type="text"/>	<input type="text"/>

If you check NO or MAYBE to five or more of these questions you should consider hiring one of these professionals.

CONTRACTOR OR CONSTRUCTION MANAGER QUALIFICATION INFORMATION

Name: Fed ID / SS#: Bondable (YES or NO):

Area of Expertise or Specialization: Bonding Capacity (USD):

License Type: Phone Number: Bonding Rate (%):

License Number: HTTP:// Work on Hand (USD):

License Expiration Date: E-Mail Address:

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VERSION
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VENDOR OR CLIENT NAME

PHONE NUMBER

E-MAIL ADDRESS

VENDOR OR CLIENT NAME	PHONE NUMBER	E-MAIL ADDRESS
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

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QUESTIONS TO ASK VENDORS OR CLIENTS

Type of Project(s) Completed: Date: Size (SQ FT): Cost or Budget:

Completed the work on Schedule: YES NO Paid Bills on Time: YES NO

ARCHITECTURAL OR DESIGN SERVICES

ASK YOUR SELF THE FOLLOWING QUESTIONS:

YES NO MAYBE

- Do you understand the scope of the work necessary to begin and complete you project?
- If YES, can you prepare a written scope of work for my project?
- If YES, do you have the time and am I willing to prepare the scope of work?
- Do you have the expertise to prepare a sketch or drawing(s) for this project?
- If YES, do you have the time and am I willing to prepare the sketch or drawing(s)?
- Is your project absent of structural alterations or improvements?
- Are you willing to assume the liability for planning and designing your project?
- Is your contractor capable or willing to prepare scope of work for your project?
- Is your contractor capable or willing to prepare the sketch, drawings and specifications for your project?
- Will the building permit application require an architect/engineers stamp on the permit documents?

TOTALS:

If you check NO or MAYBE to five or more of these questions you should consider hiring one of these professionals.

ARCHITECT OR ENGINEER QUALIFICATION INFORMATION

Name:		Fed ID/SS#:	
Experience:			
License Type:	License Number	Education:	
License Number:	Website URL		
License Expiration Date:	E-Mail Address		

SAMPLE

ARCHITECT/ENGINEER REFERENCES

CM, CONTRACTOR OR CLIENT NAME	PHONE NUMBER	E-MAIL ADDRESS
VERSION		

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QUESTIONS TO ASK ARCHITECTS, ENGINEERS, CONTRACTORS OR CLIENTS

Type of Project(s) Completed:	Date:	Size (SQ FT)	Cost or Budget
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Notes: