

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear Subcontractor/Supplier,

The following paperwork needs to be submitted.

\_\_\_\_\_ General Liability

\_\_\_\_\_ Workers’ Compensation Insurance

\_\_\_\_\_ Automobile Liability

\_\_\_\_\_ W9 Form

\_\_\_\_\_ Ceritfication Confirmation Form (Attached Below)

Please have your insurance company mail a certificate of insurance to the address listed below. Our insurance requires tht we listed on your General Liability policy as “Additional Insured.” Our minimum limits are as follows:

General Liability/General Aggregate –

General Liability/Products Comp/Ops –

General Liability/Each Occurance –

Wotrkers Comp –

Automobile Liability –

\_\_\_\_\_ No Insurance

\_\_\_\_\_ Insurance Needs to be Renewed

To be placed on our preferred subcontractor list for bidding, please mail hard copies as quickly as possible to:

**Caliber Commercial Group, LLC**

**5416 Pleasant Valley Rd.**

**Wylie, TX 75098**



To Whom It May Concern:

Caliber Commercial Group monitors vendor’s cerifications. Please review the options below and identify those that represent your company.

\_\_\_\_\_ HUB (Historically Underutilized Business)

\_\_\_\_\_ MBE (Minority Business Enterprise)

\_\_\_\_\_ WBE (Minority Woman-Owned Business Enterprise)

\_\_\_\_\_ DBE (Disadvantaged Business Enterprise)

\_\_\_\_\_ LEED (Leadership in Energy & Environmental Design)

\_\_\_\_\_ No Certifications

Name of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Main Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AP Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AR Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bid Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_

Certification Number(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please email this form along with a copy of your cerificates and additional paperwork to mclain.grant@caliber-commercial.com as quickly as possible.

If you should have any questions, please feel free to contact us.

Sincerely,

The Caliber Team

