



Vendor Pre-Qualification Form

COMPANY INFORMATION

Company Name

Name

Title

E-mail

Web Address

Phone

Company Size

Annual Revenue

Years in business 1-2
 3-5
 6+

Do you use employees or 1099 subcontractors to complete work (or a mix of both)?

- Employees
- 1099
- Mix

Are you a licensed contractor?

- Yes
- No

If yes, please provide a list of states, active license numbers and expiration dates.

Do you have a quality control program ?

- Yes
- No

If yes, please provide a brief description of your program:

Please explain the type(s) of services/installations that your company currently performs

CAPABILITIES

Which of our services are you interested in performing?

Services

- Wheel Service
- Wheel Installation
- CartControl® Service
- CartControl® Installation
- purchek® Service
- purchek® Installation

Tools

- Mig Welder
 - Flat Saw w/wet vac
 - Dustless Flat Saw w/Vac
 - Gas Cutoff Saw
 - Cable Tracker/Toner
 - Impact guns
 - Multi-meter
 - Dustless Angle Grinder
-

In field communication capabilities

- E-mail capable smart phone
 - Broadband enabled laptop
 - Printer
 - Paper scanner
 - Phone
-

Do you have at least one year experience in the trades/services you're applying for?

- Yes
- No

States Covered

- | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> AL | <input type="checkbox"/> AK | <input type="checkbox"/> AZ | <input type="checkbox"/> AR |
| <input type="checkbox"/> CA | <input type="checkbox"/> CO | <input type="checkbox"/> CT | <input type="checkbox"/> DE |
| <input type="checkbox"/> FL | <input type="checkbox"/> GA | <input type="checkbox"/> HI | <input type="checkbox"/> ID |
| <input type="checkbox"/> IL | <input type="checkbox"/> IN | <input type="checkbox"/> IA | <input type="checkbox"/> KS |
| <input type="checkbox"/> KY | <input type="checkbox"/> LA | <input type="checkbox"/> ME | <input type="checkbox"/> MD |
| <input type="checkbox"/> MA | <input type="checkbox"/> MI | <input type="checkbox"/> MN | <input type="checkbox"/> MS |
| <input type="checkbox"/> MO | <input type="checkbox"/> MT | <input type="checkbox"/> NE | <input type="checkbox"/> NV |
| <input type="checkbox"/> NH | <input type="checkbox"/> NJ | <input type="checkbox"/> NM | <input type="checkbox"/> NY |
| <input type="checkbox"/> NC | <input type="checkbox"/> ND | <input type="checkbox"/> OH | <input type="checkbox"/> OK |
| <input type="checkbox"/> OR | <input type="checkbox"/> PA | <input type="checkbox"/> RI | <input type="checkbox"/> SC |
| <input type="checkbox"/> SD | <input type="checkbox"/> TN | <input type="checkbox"/> TX | <input type="checkbox"/> UT |
| <input type="checkbox"/> VT | <input type="checkbox"/> VA | <input type="checkbox"/> WA | <input type="checkbox"/> WV |
| <input type="checkbox"/> WI | <input type="checkbox"/> WY | | |

Metro/Areas Covered

Are you a diverse supplier?

- Yes
- No

Diverse supplier must be at least fifty-one percent (51%) unconditionally owned and operated by a person(s) who is either a citizen or lawful permanent resident of the United States or of a U.S Territory.

- Minority-Owned Business Enterprise (MBE)
 - Woman-Owned Business Enterprise (WBE)
 - Lesbian, Gay, Bisexual and/or Transgender Owned Business Enterprise (LGBTBE)
 - Small Disadvantaged Business (DBE)
 - Small Business Enterprise (SBE)
 - Veteran-Owned Business (VBE)
 - Service-Disabled Veteran Owned Business (DVBE)
 - People with Disabilities (USBLN)
 - HUBZone Business
-

HOW DID YOU HEAR ABOUT US?

Method

- Mutual Customer
 - Gatekeeper Employee
 - Gatekeeper Vendor
 - Web Research
 - Other
-

Notice: In order to become a Gatekeeper Certified Vendor, your employees must take/pass certification training tests, the employer must sign a vendor services/pricing agreement and provide the required insurance certificates.

E-mail completed form to VendorSupport@gatekeepersystems.com