



Cranshaw Construction Subcontractor Expression of Interest Form

After downloading, hit submit or email completed form to ContactUs1@cranshaw.com

Business Legal Name*

Business Address*

STREET ADDRESS*

STREET ADDRESS, LINE 2

CITY*

STATE*

ZIP*

Business Phone*

() -

AREA
CODE*

PHONE*

Web Address

. .

WWW

DOMAIN/URL

COM

Contact Name*

FIRST

LAST

Contact Phone*

IF DIFFERENT FROM
BUSINESS PHONE

() -

AREA
CODE

PHONE

Contact Email*

JDOE@ACMECORP.COM

If Contact for bidding is different than above, please list:

Bidding Contact Name

IF DIFFERENT FROM
CONTACTABOVE

FIRST

LAST

Bidding Contact Email

IF DIFFERENT FROM
CONTACTABOVE

JDOE@ACMECORP.COM

* REQUIRED FIELDS

Trades Performed*
SHIFT CLICK TO SELECT
ALL THAT APPLY



Other

Open Shop or Union*

OPEN SHOP

UNION

SIGNATORY TO ANY LABOR AGREEMENT(S)*

YES NO

Number of Years in Business*

Number of Current Employees*

Does your company perform "prevailing wage" work?*

YES NO

Building Types your business has worked on*
CHECK ALL THAT APPLY

- | | |
|---|---|
| <input type="checkbox"/> MULTIFAMILY RESIDENTIAL | <input type="checkbox"/> MEDICAL & LAB |
| <input type="checkbox"/> COMMERCIAL BUILDING | <input type="checkbox"/> OFFICE SPACE |
| <input type="checkbox"/> CORPORATE INTERIORS | <input type="checkbox"/> RETAIL |
| <input type="checkbox"/> HOTEL | <input type="checkbox"/> SENIOR LIVING |
| <input type="checkbox"/> INDUSTRIAL & MANUFACTURING | <input type="checkbox"/> LEED CERTIFIED |

Other

Minimum size job your business would perform

\$

Maximum size job your business would perform

\$

Certification
CHECK ALL THAT APPLY

MBE WBE DBE

Other

PLEASE EMAIL PDFs OF ANY APPLICABLE CERTIFICATIONS TO CONTACTUS1@CRANSHAW.COM

**Download, fill out and submit or email to:
ContactUs1@cranshaw.com**

* REQUIRED FIELDS