

Blue Spader Contractors, Inc.

332 S Main Street
Suite A
Romeo, MI 48065
PH: 248.289.0125

SUBCONTRACT NO. **Text**
JOB NO
COMMITMENT NO. .

SUBCONTRACT

JOB NAME: Text

THIS SUBCONTRACT AGREEMENT IS ENTERED INTO THIS **1st** day of **January, 2020** between, BLUE SPADER CONTRACTORS INC., a Michigan Corporation, herein termed "Contractor," and

Subcontractor Name

Ph: Phone

Fx: Fax Number

Subcontractor Address

Contact: Contact

Cell: Cell Number

Email: Email

VC: VC

herein termed "Subcontractor".

A. OWNER/ A/E /CONTRACT DOCUMENTS/SUBCONTRACT DOCUMENTS.

a. Contractor has entered into a prime construction contract with

herein termed "Owner" for the construction of

Text

in accordance with the Contract Documents prepared by

herein termed "A/E."

b. The term "Subcontract Documents" as used herein includes all portions of the Agreement between Contractor and Owner (except Contractor's private financial data), Addenda, Plans, Drawings, Specifications, General, Special and Supplementary Conditions and Provisions, Guarantees, and all other documents forming or by reference made a part of such Agreement; and this Subcontract, and all authorized modifications, changes, additions and deletions thereto.

B. SUBCONTRACT WORK.

a. Subcontractor agrees to furnish all labor, supervision, safety protection, insurance, materials, fixtures, equipment, tools, supplies, other property and services necessary to perform and complete in a good and workmanlike manner and in strict compliance with the Subcontract Documents, including but not limited to all of the work and services (herein termed "Subcontract Work") described in the Scope of Subcontract Work, Subcontractor pre-award meeting, and on the Exhibits identified below which are attached and incorporated as part of this Subcontract by reference:

b. Exhibit "A" - List of Drawings, Specifications and Addenda. Subcontractor is responsible for verifying that Exhibit "D" correctly identifies all Contract Documents applicable to the Subcontract work. Any misdescription or omissions shall not relieve Subcontractor of the duty to perform all necessary work called for by such Contract Documents.

c. Exhibit "B" - Subcontractor Checklist.

d. Exhibit "C" - Contractor's Project Rules and Regulations. Please see www.bluespader.net (Initial)

e. Exhibit "D" - Certificate of Non-Segregated Facilities Form (Subcontractor must complete and sign form for Subcontracts which exceed **\$10,000.00**). Please see www.bluespader.net (Initial)

f. Exhibit "E" - Insurance Requirements. Please see www.bluespader.net (Initial)

g. Exhibit "F" - Blue Spader's 5 Easy steps to payment. Please see www.bluespader.net (Initial)

h. Exhibit "G" - Application Procedure for National Maintenance Agreement. (as applicable) Please see www.bluespader.net (Initial)

i. Exhibit "H" - General Terms and Conditions. Please see www.bluespader.net (Initial)

j. Exhibit "I" - Subcontractor Pre-Award.

C. SCOPE OF SUBCONTRACT WORK

See scope on page 2a.

SUBCONTRACT NO.

JOB NO. **Text**

In addition to the above, this Subcontract includes, but is not limited to:

1. Breakdown:

Base Bid \$

Alternate No. Alternate Number

SUBCONTRACT TOTAL \$

(Continue Scope Description on additional pages continuing on 2a.)

ALL WORK MUST BE PERFORMED IN ACCORDANCE WITH ALL FEDERAL, STATE, LOCAL AND OWNER'S SAFETY LAWS, RULES AND REGULATIONS

D. SUBCONTRACT SUM.

Contractor agrees to pay Subcontractor, upon full performance of the Subcontract Work and fulfillment of this Subcontract, the sum of _____ (\$)

(the "Subcontract price"), subject to adjustment for all authorized modifications, changes, additions and deletions thereto effected after this Subcontract is entered into by the parties, and subject to the condition precedent of payment by Owner to Contractor.

Retention of 10% will be withheld from Subcontractor's progress payments and paid to Subcontractor if and when paid by Owner to Contractor provided Contractor deems Subcontractor's progress satisfactory and full performance of the Subcontract is reasonably assured.

E. ENTIRE INTEGRATED AGREEMENT/MODIFICATIONS.

This Subcontract Agreement is the entire and integrated agreement between the parties. All prior negotiations, proposals, representations or agreements, whether written or oral, not expressly incorporated herein, are superseded. Except as otherwise provided in the Subcontract Documents all modifications of this Subcontract must be in writing and signed by the parties hereto to be valid.

IN WITNESS WHEREOF, the parties have executed this Subcontract the day and year first above written.

Blue Spader Witness:

BLUE SPADER CONTRACTORS, INC.:

By _____ Title _____ Date _____

By _____ Estimator _____ Title _____ Date _____

The Above Blue Spader Representative Signatures Have Been Executed In Michigan After Subcontractor Signatures.

SUBCONTRACTOR, SIGN AND WITNESS BELOW THIS DOTTED LINE.

Subcontractor Witness Signature Below:

Subcontractor:

By _____ Title _____
Witness (Only) Signature Here

By _____ Title _____
Owner/Authorized Representative Signature Here

Please fill out completely:

A Corporation Partnership Sole

Proprietorship (Designate type of organization) of the State of

_____ with its principal place of business at _____

SCOPE DESCRIPTION (CONTINUED):

Continued on page 2b.

SCOPE DESCRIPTION (CONTINUED):

SUBCONTRACT NO. **Text** Alternate Number

ACCEPTED: Subcontractor Name

BY: _____

Blue Spader Contractors, Inc.
DRAWINGS, SPECIFICATIONS & ADDENDA

Specifications

Addenda

Drawings

SUBCONTRACT NO: **Text**

ACCEPTED: Subcontractor Name

BY: _____

Blue Spader Contractors, Inc.

SUBCONTRACTOR CHECKLIST

EXHIBIT B
Page 1 of 2

THE FOLLOWING ARE REQUIREMENTS OF THIS CONTRACT, AND MUST BE SUBMITTED PRIOR TO BEGINNING WORK

- 1) INSURANCE CERTIFICATE ON FILE IN OUR OFFICE LISTING THIS PROJECT AND NAMING “**BLUE SPADER CONTRACTORS, INC., AND** List Entities here **AS ADDITIONAL INSUREDS, AND CONTAIN PRIMARY AND NON-CONTRIBUTORY PROVISION”.**
- 2) A COPY OF ADDITIONAL INSURED ENDORSEMENT PAGE CG20101001 ON FILE IN OUR OFFICE.
- 3) A COPY OF YOUR WRITTEN SAFETY PROGRAM ON FILE IN OUR OFFICE.
- 4) NATIONAL MAINTENANCE AGREEMENT EXTENSION NAMING THIS PROJECT, ON FILE IN OUR OFFICE.
- 5) A COPY OF ALL MSDS SHEETS FOR ANY MATERIAL THAT WILL BE BROUGHT ON SITE.
- 6) NAME AND PHONE NUMBER OF THE PROJECT MANAGER AND SUPERINTENDENT (INCLUDING 24 HOUR NUMBER).
- 7) A LIST OF ITEMS THAT WILL BE SUBMITTED FOR APPROVAL (ie. SHOP DRAWINGS, BROCHURES, CUTS OR SAMPLES).
- 8) SUBCONTRACTOR DATA SHEET (ATTACHED).
- 9) OTHER:

SUBCONTRACT NO: **Text**

ACCEPTED: Subcontractor Name

BY: _____

Subcontractor Data Sheet

It is critical that this data sheet is filled out completely along with any applicable attachments. As part of the contract package, this data sheet must be completed and returned with the signed contract before any payments can be released for completed work being billed to our accounting department. Please contact Chet Jablonski (Controller) at ext. 126 with any questions/concerns.

Company Name		State/Province	
Phone & Fax		Zip/Postal Code	
Address			

Are you a Small or Large Business? SBA defines Large of Small according to your NAICS code. Please go to www.sba.gov/services/contractingopportunities/sizestandardstocpics/tableofsize/index.html to determine which category of WORK CLASSIFICATION (NAICS or SIC Code) your company fits into and the cap of annual revenue allowed per year per your Classification Code. <div style="display: flex; justify-content: space-around;"> Large Business Small Business </div>	If you are a certified minority contractor, a. Are you current in CCR?		Yes	No	
	b. Have you been awarded any work?		Yes	No	
c. Do you have CPAR or Eval's from CO?		Yes	No		
Are you a certified government contractor?		Yes	No		
a. Are you current in CCR?		Yes	No		
b. Have you been awarded any work?		Yes	No		
c. Do you have CPAR or Eval's from CO?		Yes	No		
Are you a VOB (Veteran Owned Business)? Yes No	What current jobs, if any, do you have on federal installations?				
If so, are al also a SDVOB (Service Disabled Veteran Owned Business)? Yes No					
Are you registered on Vetbiz? Yes No	a. Are you a prime contractor?		Yes	No	
		b. Are you a sub contractor?		Yes	No
Are you registered on CCR? Yes No	c. Are you a supplier?		Yes	No	
Have you won SDV awards? Yes No	What is the contract amount of any federal jobs to date?				
		a. Job Description: Dollar amount: \$ Location: Client			
Do you have certification(s) in any of the below Minority Designations? If so, have you won any awards related to your designation?		b. Job Description: Dollar amount: \$ Location: Client			
Are you registered on CCR this way? Yes No		c. Job Description: Dollar amount: \$ Location: Client			
a.) HubZone Business Enterprise	<input type="checkbox"/> Yes	<input type="checkbox"/> No	What is your bonding capacity?		
b.) Woman-Owned Small Business (WOSB)	Yes	No	a. Aggregate \$		
c.) Woman-Owned (WOB, WBE)	Yes	No	b. Single Limit \$		
d.) 8 (a) Business Enterprise	Yes	No	c. Largest job bonded to date \$		
e.) Alaska Native (ANC)	Yes	No	d. Bonding company name & phone:		
f.) Native Hawaiian	Yes	No			
g.) Native American	Yes	No			
h.) Asian Pacific American	Yes	No	What is your geographical capability?		
i.) Asian Indian American	Yes	No			
j.) African American	Yes	No	a. Where is (are) your office(s)?		
k.) Hispanic American	Yes	No			
l.) Aboriginal	Yes	No			
m.) Lesbian, Gay, Bi-Sexual, Transgender Business (LGBT)	Yes	No			
n.) SDB (small disadvantaged business)	Yes	No			
o.) DBE (disadvantaged business enterprise)	Yes	No	b. What distance are you willing to travel for your average sized job?		
p.) MBE (minority-owned business enterprise)	Yes	No			