



Contractor Interview Worksheet

Business Information

Company and representative: _____

Business address: _____ Telephone: _____

Cell: _____ Fax: _____ Website (if applicable): _____

Years in business: _____ B/N or GST/HST number: _____

Municipal Business License Number (if required): _____

Memberships in industry or trade associations: _____

Contractor Information

Range of services provided (type of work, special expertise, etc): _____

- | | | |
|---|------------------------------|-----------------------------|
| Will the contractor provide a least three customer references? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the contractor arrange for you to visit a current project? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the contractor have Workers' Compensation or equivalent insurance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Does the contractor have business liability insurance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the contractor provide you with a written contract? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the contractor provide a written warranty for work performed? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Was the contractor responsive to your questions and concerns? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you feel you could work well with this contractor? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |