



**AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE
DIRECTIONS**

**THIS PREQUALIFICATION QUESTIONNAIRE HAS
TWO (2) SECTIONS THAT MUST BE COMPLETED
AND SUBMITTED SEPARATELY.**

PART A:

Complete all sections of Part A

SUBMIT TO:

Prequalify_for_Tampa_Ticketing@austin-ind.com

PART B:

Complete form 1300a and attach all required information

SUBMIT TO:

RMS@austin-ind.com



PART A

Complete all sections of Part A

SUBMIT TO:

Prequalify_for_Tampa_Ticketing@austin-ind.com



AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE

**TAMPA INTERNATIONAL AIRPORT TICKET LEVEL EXPANSION &
OPTIMIZATION PROJECT**

If this form is not filled out in its entirety, the deficient information will be pointed out and requested from you. Should you not be responsive to this request your firm will not be assessed as prequalified and you will not be allowed to bid on this project. Untimely responses will not be assessed and will not be considered!

SECTION #1 – COMPANY & CONTACT INFORMATION

COMPANY NAME _____

Federal ID # _____

Phone: A/C _____ No. _____ Fax: A/C _____ No. _____

Mailing Address _____ Street Address _____

City _____ ST _____ ZIP _____ City _____ ST _____ ZIP _____

Estimating Contact: Name _____ Title _____

E-mail: _____ Phone: _____ Fax: _____

Cell: _____

Management Contact: Name _____ Title _____

E-mail: _____ Phone: _____ Fax: _____

Cell: _____

List two officers of your company:

Name _____

Name _____

Title _____

Title _____

Is your company affiliated with any other company?

Name _____

Affiliation: _____

Address: _____

SECTION #2 - RELEVANT EXPERIENCE

Firms seeking Small Business Enterprise (SBE) certification are encouraged to obtain certification through Tampa International Airport. (*certification expected to start August 6, 2026*) To become eligible to participate as an SBE, firms must be certified by Tampa International Airport, City of Tampa, City of St. Petersburg, Hillsborough County, or Pinellas County. A directory of SBE recognized certifications and additional information is available on the Tampa International Airport Program Directories page: [Tampa International Airport Program Directories](#). Please attach a copy of your current SBE certification letter, registration confirmation email, or a **screenprint** of your firm's registration information from your certifying agency with your prequalification submission.

Do you hold the required and active State of Florida or Hillsborough County Contractor's License(s)? Yes ☐ , N/A ☐ .
If yes, please **attach copy of current license showing classifications and expiration dates.**

Confidential & Proprietary

TPA Ticket Level Expansion & Optimization Prequalification Questionnaire - Part A - Page 1 of 6 – July 27, 2026

RETURN COMPLETED FORM VIA EMAIL TO: PrequalifyforTampaTicketing@austin-ind.com



AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE

**TAMPA INTERNATIONAL AIRPORT TICKET LEVEL EXPANSION &
OPTIMIZATION PROJECT**

What work does your company perform or what materials can your company supply?

What Aviation projects, starting with any Ticket Level projects and then any Airport projects has your firm performed over the past five years? List previous or ongoing Aviation project's name, scope of work, dollar volume, location, and duration. **Attach additional pages labeled "aviation projects" if needed.**

How many years has your company been in operation? _____
How many years has your company been in operation under the current name? _____
How many years has your company been in operation under the current ownership? _____

SECTION #3 - FINANCIAL

Check the size(s) of Subcontract or Purchase Order your company has performed over the last two years: Check all that apply.

Less than \$100,000 ☐ \$100,000 to \$500,000 ☐ \$500,000 to \$1,500,000 ☐ \$1,500,000 to \$5,000,000 ☐
\$5,000,000 to \$10,000,000 ☐ \$10,000,000 to \$20,000,000 ☐ over \$20,000,000 ☐

Annual revenue for the last two years: \$ _____ 2024 \$ _____ 2025

Provide a letter from your surety confirming your single project limit bonding capacity and program aggregate.

Company Capacity/Backlog: Current work in progress:

Total Current Contracted Value _____
Location(s) _____ Completion Date(s) _____
Location(s) _____ Completion Date(s) _____

Total Current number of Employees _____ Previous Years: 2023 _____ 2024 _____ 2025 _____

Confidential & Proprietary

TPA Ticket Level Expansion & Optimization Prequalification Questionnaire - Part A - Page 2 of 6 – July 27, 2026

RETURN COMPLETED FORM VIA EMAIL TO: [Prequalify for Tampa Ticketing@austin-ind.com](mailto:PrequalifyforTampaTicketing@austin-ind.com)



AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE

**TAMPA INTERNATIONAL AIRPORT TICKET LEVEL EXPANSION &
OPTIMIZATION PROJECT**

SECTION #4 – AREA OF OPERATIONS/LOCAL EXPERIENCE

Over the last 2+ calendar years (01/01/2024-Present) provide the following information *Attach additional pages labeled “recent past projects” if needed.* :

	CSI Division	# of Completed Projects	Aggregate Value
In Tampa?	_____	_____	_____
In Florida; Not in Tampa?	_____	_____	_____
In SE United States (AL, GA, SC)?	_____	_____	_____
Outside the above areas (domestic)?	_____	_____	_____

SECTION #5 – INSURANCE

List your firm’s current insurance limits and carriers, if no coverage put NC in Occurrence blank:

General Liability: _____ Occ. _____ Agg. _____ Carrier _____
Auto Liability: _____ Occ. _____ Agg. _____ Carrier _____
Excess Liability: _____ Occ. _____ Agg. _____ Carrier _____
Pollution Liability: _____ Occ. _____ Agg. _____ Carrier _____
Professional Liability: _____ Occ. _____ Agg. _____ Carrier _____
Workmen’s Compensation(Statutory): _____ Yes _____ No _____ Carrier _____

SECTION #6 – SAFETY

Does your company have a written Safety Program? ☐ Yes ☐ No *If yes, please attach copy.*

Does your company have a Full-Time Corporate Safety Director? ☐ Yes ☐ No *If yes, please provide contact information below.*

Corporate Safety Director Name _____ Title _____

E-mail: _____ Phone: _____ Fax: _____

Cell: _____

Does your company conduct weekly “tool box talks”? ☐ Yes ☐ No

Confidential & Proprietary

TPA Ticket Level Expansion & Optimization Prequalification Questionnaire - Part A - Page 3 of 6 – July 27, 2026

RETURN COMPLETED FORM VIA EMAIL TO: Prequalify_for_Tampa_Ticketing@austin-ind.com



**AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE**

**TAMPA INTERNATIONAL AIRPORT TICKET LEVEL EXPANSION &
OPTIMIZATION PROJECT**

All information requested in this section is required from contractors, subcontractors, and other organizations whose services include providing labor at the project site and beyond a customer's site. Provide the following rates for your company for the past three years (including current year):

Year	EMR	Incident Rate (Lost Time)	Recordable Rate	Number of OSHA Citations
2023				
2024				
2025				

*Incident Rate = $\frac{\# \text{ of lost time work related injuries/yr.} \times 200,000}{\# \text{ of man hours worked/yr.}}$

**Recordable Injury Rate: $\frac{\# \text{ of work related injuries/yr.} \times 200,000}{\# \text{ of man hours worked/yr.}}$

Describe your OSHA Citations (if applicable): _____

Provide your company's OSHA 300 Log information for each of the last three (3) years:

Description	2023	2024	2025
Total Recordable			
Lost Work Day Cases			
Lost Workdays			
Total Employee Hours Worked			
Number of Fatalities			

Does your company have a written program requiring training? ☐ Yes; ☐ No

If yes, please attach a copy.

SECTION #7 – PERFORMANCE

Attach additional pages labeled "performance" if needed:

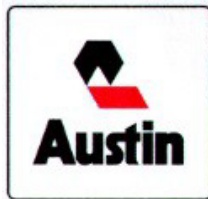
Has your firm ever defaulted on a contract, or have any of your principals been principal of another firm that defaulted on a contract? ☐ Yes, ☐ No; *If Yes, please attach explanation on additional pages.*

Are there any pending or outstanding criminal indictments, lawsuits, judgments, requests for arbitration or claims involving your firm or its principals? ☐ Yes, ☐ No; *If Yes, please attach explanation on additional pages.*

Confidential & Proprietary

TPA Ticket Level Expansion & Optimization Prequalification Questionnaire - Part A - Page 4 of 6 – July 27, 2026

RETURN COMPLETED FORM VIA EMAIL TO: Prequalify_for_Tampa_Ticketing@austin-ind.com



AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE

**TAMPA INTERNATIONAL AIRPORT TICKET LEVEL EXPANSION &
OPTIMIZATION PROJECT**

In the past five years, has any claim against your firm concerning your firm's work on a construction project, been filed in court or arbitration? ☐ Yes, ☐ No; **If Yes, please attach explanation on additional pages.**

In the past five years, has your firm made any claim against a project owner, Construction Manager, General Contractor, or another subcontractor covering work on a project or payment for a contract, and filed that claim in court or arbitration? ☐ Yes, ☐ No; **If YES, please attach explanation on additional pages.**

Provide the percentage of your work performed with self-perform labor: _____ %

What type of work do you normally engage subcontractors to perform?

CSI code(s) _____
Description _____

SECTION #8 – DIVERSITY

Does your firm have a written and active diversity program? ☐ YES ☐ NO

(Please attach a copy of your firm's diversity program)

Type of Ownership: **(Please attach a copy of your certification)**

☐ MBE (Minority-Owned); ☐ WBE (Women-Owned);
☐ VOB (Veteran-Owned); ☐ SDVOB (Service Disabled Veteran-Owned)
☐ Other (list) _____

IF YOUR FIRM QUALIFIES AS A CERTIFIED M/WBE OR DBE FIRM, PLEASE FURNISH THE INFORMATION REQUESTED BELOW **and attach a copy of your certification:**

List all Certifying Agency and Certified Group Classification below:

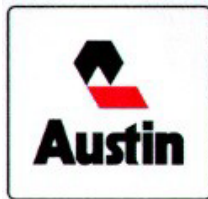
Certifying Agency and Certified Group Classification (i.e. M/WBE OR DBE)	Certificate Number	Expiration Date

SECTION #9 – QUALITY

Does your company have a written Quality Management Program?

☐ Yes ☐ No **If yes, please attach a copy of your written quality program.**

Confidential & Proprietary



AUSTIN COMMERCIAL, LP
SUBCONTRACTOR / SUPPLIER PREQUALIFICATION QUESTIONNAIRE

**TAMPA INTERNATIONAL AIRPORT TICKET LEVEL EXPANSION &
OPTIMIZATION PROJECT**

I certify that all information in this questionnaire and the attachments are true and correct. We hereby authorize Austin Commercial and its representatives to investigate directly with the references given herein, any information pertaining to the undersigned and/or the individuals involved therein. We authorize our financial institutions, prior and existing sureties, customers, creditors and suppliers to release credit history and other underwriting/qualification information.

I understand that the completion and submittal of this questionnaire is for the sole purpose of allowing Austin Commercial to prequalify firms for bidding work associated with the Ticket Level Expansion & Optimization project. I also understand completion and submittal of this questionnaire does not guarantee that my firm will be prequalified for the above. Finally, I understand completion and submittal of this questionnaire or the subsequent assessment by Austin Commercial that my firm is deemed prequalified; does not constitute a guarantee, or contract for any work associated with the above noted project.

Submitted by:

Company _____ Phone# _____

Signature _____ Name _____

Title _____ Date _____

Austin will contact you within 2-3 weeks should additional information be required or upon completion of our review.

A COMPLETE SUBMITTAL MUST INCLUDE THE DOCUMENTS LISTED BELOW AS ATTACHMENTS. PLEASE MARK THE CHECKBOX REPRESENTING THAT EACH DOCUMENT IS ATTACHED OR IT IS NOT APPLICABLE.

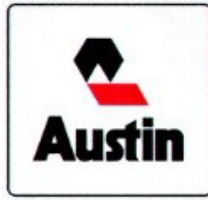
CHECKLIST OF ATTACHMENTS (questionnaire page# reference)

- | | | |
|--|----------|---|
| 1. <u>HCAA SUPPLIER REGISTRATION (page #1)</u> | ATTACHED | ☐ |
| 2. <u>STATE OF FLORIDA / HILLSBOROUGH COUNTY
ACTIVE CONTRACTOR'S LICENSE (page #1)</u> | ATTACHED | ☐ Not Required ☐ |
| 3. <u>Added pages if needed: "AVIATION PROJECTS" (page #2)</u> | ATTACHED | ☐ Not Needed ☐ |
| 4. <u>AUDITED FINANCIAL STATEMENT (PART B)</u> | PART B | ☐ |
| 5. <u>SURETY LETTER – BONDING LIMITS (page #2)</u> | ATTACHED | ☐ No Surety ☐ |
| 6. <u>Added pages if needed: "RECENT PAST PROJECTS" (page #3)</u> | ATTACHED | ☐ Not Needed ☐ |
| 7. <u>CORPORATE SAFETY PLAN (page#3)</u> | ATTACHED | ☐ Do not have one ☐ |
| 8. <u>SAFETY TRAINING PROGRAM (page#4)</u> | ATTACHED | ☐ Do not have one ☐ |
| 9. <u>Added pages if needed: "PERFORMANCE" (page #4)</u> | ATTACHED | ☐ Not Needed ☐ |
| 10. <u>DIVERSITY PROGRAM (page #5)</u> | ATTACHED | ☐ Do not have one ☐ |
| 11. <u>OWNERSHIP CERTIFICATION (page #5)</u> | ATTACHED | ☐ N/A ☐ |
| 12. <u>WMBE/DBE CERTIFICATE (page #5)</u> | ATTACHED | ☐ N/A ☐ |
| 13. <u>QUALITY PROGRAM (page #5)</u> | ATTACHED | ☐ Do not have one ☐ |

Confidential & Proprietary

TPA Ticket Level Expansion & Optimization Prequalification Questionnaire - Part A - Page 6 of 6 – July 27, 2026

RETURN COMPLETED FORM VIA EMAIL TO: PrequalifyforTampaTicketing@austin-ind.com



PART B

Complete all sections of Part B

SUBMIT TO:
RMS@austin-ind.com

Subcontractor Underwriting Risk Evaluation (SURE)

Subcontractor Qualifications

Form 1300a

The Austin Commercial, L.P. (ACLP) **SURE Program** qualifies subcontractors to work for ACLP without being required to furnish payment and performance bonds. Subcontractors must demonstrate they have the financial resources and capacity similar to that which is demonstrated to their own surety. This sensitive information is not disclosed to any person or entity other than those who have a need to review it for our qualification process.

If the pre-qualification review of your company does not meet the requirements established for the proposed subcontract award, Subcontractor hereby agrees that payments to major sub-subcontractors and suppliers will be made directly by Austin Commercial. These payments will be accomplished via the current payment process system of Textura. Subcontractor will provide an approved schedule of values (SOV) for the selected sub-subcontractors and suppliers that will be incorporated into Subcontractor's approved SOV. Subcontractor will be required to approve each payment request for sub-subcontractors and suppliers. Subcontractor will execute a contingent assignment for selected sub-subcontractors and suppliers. In limited cases, Subcontractor will agree to execute a parental guaranty and/or letter of credit.

Subcontractors desiring to bid work for ACLP must submit the information listed below either by:

- (1) Mail to Attention SURE Manager, Risk Management Services, 3535 Travis, Suite 300, Dallas, Texas 75204-1466, marked "confidential"
- (2) Fax to 214-224-4366 (*confidential fax site*), or (3) E-mail to RMS@austin-ind.com

Company Name (including DBA): _____

Federal Tax ID (FEIN): _____ Website: _____

Address: _____

Date: _____ Company Phone: _____

1. ATTACH the Company's past two year-end financial statements, including the balance sheet, income statement, and notes to financials (if CPA-prepared). If the last fiscal year end is over six month's old, include the Company's most recent internal financial statements. If consolidated company financials are provided, a parental guarantee may be required.
2. ATTACH current work-in-progress schedule/backlog, or list of current projects/amounts.
3. ATTACH owner, general contractor, subcontractor, and supplier references.
4. ATTACH a description of the three largest projects/amounts completed in the last five years.

Largest project ever awarded \$ _____ Average project size \$ _____

Preferred project size \$ _____

5. Internal Financial Officer _____ Email _____

Outside Accountant _____

6. Owner Name _____ % of Ownership _____

Continuity Plan in case of death or disability of principals (attach) _____

7. Primary Bank _____ Officer _____

8. Line of Credit \$ _____ Current Amount Available \$ _____

9. Current lawsuits, defaults, claims, liens, arbitration or pending actions in excess of \$25,000

Or, similar actions or bankruptcies against principals _____ If so, attach details.

10. Surety _____

Estimated limits: Single \$ _____ Aggregate \$ _____