



Dear prospective LMM Partner,

The following information will be required to prequalify your company as a Subcontractor to LMM:

- Completed Application Form.
- Certificate of Insurance satisfying minimum requirements listed in **Addendum A** (provide copy)
- W-9 (provide copy)
- Trade References
- Valid Contractors License (provide a copy)

Please submit the above-requested documentation via email to purchasing@lmm.us as soon as feasible.

COMPANY INFORMATION		
NAME (as shown on Federal Tax Return)		TAX ID NUMBER (FEIN or SSN)
ALTERNATE NAME (DBA)		NAICS/SIC NUMBER
POINT OF CONTACT NAME		
ADDRESS	TITLE	
PHONE		
WEBSITE	FAX	EMAIL

ORGANIZATION TYPE					
<input type="checkbox"/>	CORPORATION	<input type="checkbox"/>	INDIVIDUAL / SOLE PROPRIETOR	<input type="checkbox"/>	JOINT VENTURE
<input type="checkbox"/>	LLC	<input type="checkbox"/>	PARTNERSHIP	<input type="checkbox"/>	NON-PROFIT

AVERAGE ANNUAL SALES – LAST THREE YEARS	
YEAR	SALES

DIVERSE SUPPLIER CATEGORY	
	MINORITY BUSINESS ENTERPRISE
	WOMEN BUSINESS ENTERPRISE
	VETERAN BUSINESS ENTERPRISE
	VETERAN-OWNED SMALL BUSINESS
	SERVICE-DISABLED VETERAN OWNED SMALL BUSINESS
	DISADVANTAGE BUSINESS ENTERPRISE
	LGBTQ+
	OTHER

PAYMENT INFORMATION	
PAYMENT ADDRESS (if different from address above)	
PAYMENT TERMS	CURRENCY
CONTACT NAME	TITLE
PHONE	
EMAIL	
BANK NAME	
ROUTING NUMBER	
SWIFT#	
INVOICING EMAIL	
BANK REFERENCE NAME	
BANK REFERENCE PHONE	
BANK REFERENCE EMAIL	

PAYEE CONTACT	
Jennifer Causbie	jcausbie@lmm.us

INTERNAL USE ONLY	
VENDOR ID	
	SET-UP
	UPDATE

We at Lee Machinery Movers look forward to having you as a part of our team!

Addendum A

INSURANCE: Subcontractor shall comply with all Insurance Requirements at its own expense. Upon execution of this Agreement, and prior to Subcontractor commencing the Work for Contractor, the Subcontractor shall maintain and provide Contractor with insurance certificates upon request reflecting the following types of coverages in amounts not less than stated:

- a. **Worker's Compensation Insurance** covering Subcontractor's statutory obligation in the state(s) which the Work is to be performed and Employer's Liability Insurance with limits no less than \$1,000,000.00, Each Accident, \$ 1,000,000.00 Bodily Injury by Disease – Policy Limit, and Disease – Each Employee \$ 1,000,000.00.
- b. **Automobile Liability Insurance** with a combined single limit for bodily Injury and Property Damage Liability of \$2,000,000.00 per accident covering Subcontractor's owned, non-owned, leased, and hired automobiles.
- c. **Motor Carrier Subcontractors.** All subcontractors who are motor carriers must carry the minimum insurance mandated by the Federal Motor Carrier Safety Act in addition to all insurance required by state or federal law or regulation.
- d. **Commercial General Liability Insurance** written on an ISO occurrence form CG 00 01 (edition 10/01 or later) which includes coverage for Subcontractor's operations, personal injury, XCU (explosion, collapse and underground), personal/advertising injury, Independent contractors, contractual and products/completed operations with the following limits of liability; PER JOB SITE AGGREGATE.
 - i. General Aggregate \$2,000,000.00
 - ii. Products/Completed Operations \$2,000,000.00
 - iii. Personal and Advertising Injury \$2,000,000.00
 - iv. Each Occurrence \$1,000,000.00
 - v. Products/Completed Operations Liability must be maintained for not less than three (3) years after acceptance of your work.
- d. **Excess of Umbrella Liability Insurance** with occurrence/aggregate limit of \$5,000,000.00 occurrence/aggregate excess/umbrella.
- e. PROFESSIONAL LIABILITY INSURANCE WITH LIMITS OF \$1,000,000.00 PER CLAIM AND AGGREGATE WHEN PROVIDING PROFESSIONAL DESIGN SERVICES ASSOCIATED WITH THE AGREEMENT.
- f. The Subcontractor's insurance carriers must be "A" rated or better.
- h. The Subcontractor shall provide a certificate of insurance coverage, listing Lee Machinery Movers, Inc. as additional insured (as well as the Owner, and all other parties, as required by contract) for ongoing and completed operations (for GL/Umbrella), on a primary and non-contributory basis. The Subcontractor shall also provide a Waiver of Subrogation in Contractor's favor for Automobile Liability and Worker's Compensation. Subcontractor's Umbrella/Excess Liability should follow form and Subcontractor shall provide at least a 30-day notice of cancellation of such coverage.