



**Phi Builders + Architects**  
**Subcontractor Information Form**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Service or Product supplied: \_\_\_\_\_

Contact Info: \_\_\_\_\_

Office/work

E-Mail Address

Mobile/Cell

Fax

**Subcontractor Requirements**

\*\*\*Phi Builders + Architects Cannot Enter Into Any Subcontract Agreement Until We Have The Following On File.\*\*\*

1) General Liability Insurance indicating coverage is:

- \$2,000,000 General Aggregate
- \$1,000,000 Each Occurance
- \$1,000,000 Personal Adv Injury
- \$5,000 Med Exp (any one person)
- \$1,000,000 Products Comp/ OP AGG

2) Auto Liability Insurance indicating coverage is \$1,000,000 Combined single limit  
Non-Owned Auto Liability Insurance \$2,000,000 Each Occurance & Aggregate

3) Phi Home Designs is to be named as "Additional Insured"

4) Workers Compensation Insurance Statutory Limits: \$500,000 Each Accident \$500,000 Disease ea. Employee, \$500,000 Policy Limit. For Independent Contractors, an Application for Predetermination of Independent Contractor Status Form (WCB-261) needs to be submitted to the state. Your signature is required.

5) Completed W-9 form

6) For Electricians and Plumbers - Copy of your Contractor License

Please fax (207.230.0274), mail (446 West Street, Rockport, ME 04856), or email (info@phibuildersarchitects.com) the above information and required documents to Phi Builders + Architects.

Please call 207.230.0034 with any questions. Thank you!

\_\_\_\_\_  
*PHI Signature*

\_\_\_\_\_  
*Date Requirements Met*