



General Contractor Questionnaire

Please complete all questions, answer N/A to all questions that do not apply

1. Company Name:

2. Address:

3. Phone Number: _____ Fax: _____

4. How long have you been in business with your current name:

5. What other national retailers do you have a business relationship with:

6. How much construction business do you do per year (dollar amount & number of projects):

7. Which states are you currently licensed to do business in:

8. What is your primary construction focus (retail, medical, civil, etc.):

9. Can you meet accelerated construction times and schedules (90 days or less):

10. What type of work do you self-perform:

11. Do you maintain membership in any professional or trade associations? If yes, please list:

12. Dunn and Bradstreet number:

****Please e-mail form to oreillyautocontractors@gmail.com. Do not call the Corporate Office. We will call you.**

Thank you.**