

Qualifications for Subcontract Work

These are the requirements that must be met when a prime contractor issues a subcontractor request.

Insurance Coverage

Insurance coverage must include Worker's Compensation, General Liability and Automobile Liability. The Worker's Compensation must be effective in Nebraska, the General Liability limits of liability must be at least \$1,000,000/\$2,000,000, and the Auto Liability must be at least \$1,000,000.

Owner/Operator trucks are only required to have Auto Liability. *(This applies only to drivers that are the owner of the truck and does not include anyone else, including any family members.)*

The policy needs to show the Nebraska Department of Roads as the holder of the policy. Please show it this way on the insurance form.

Certificate Holder
 State of Nebraska
 Department of Roads
 Construction Division
 1500 Hwy 2
 PO Box 94759
 Lincoln NE 68509-4759

Material suppliers are not required to submit the following.

Please give a complete description of the following:

Subcontractor's Name:		Federal I.D. No.:
Address:		
Phone No.:	Fax No.:	E-mail Address:
A General Statement of Experience, Qualifications, Personnel, and Equipment available for the performance of the proposed subcontract work:		
If PARTNERSHIP – Fill out the Following:		
Name and Business Address of All Partners:		
Name and Business Address of Owner:		
If CORPORATION – Fill out the Following:		State Chartered In:
President <i>(Name and Business Address):</i>	Secretary <i>(Name and Business Address):</i>	Treasurer <i>(Name and Business Address):</i>

Email to: NDOR_Subcontracts@dor.state.ne.us • **Fax to:** Subcontracts Office, (402) 479-4854

For questions, call: Subcontracts Office, (402) 479-4428