



SUBCONTRACTOR APPLICATION PACKET

Hodge Roofing, LLC · Pre-Qualification & Vendor Setup

Thank you for your interest in working with Hodge Roofing, LLC.

We partner with highly skilled, fully insured, and reputable subcontractor crews to deliver quality roof systems and amazing project experiences for our customers.

Please complete this packet in full and return it, along with all required attachments for consideration. Once we have reviewed application packet and requested documentations, we will contact you for future project bids and opportunities.

Please email completed packet and requested documents to: murry@hodgeroofing.net

****NOTE: If you prefer to mail in documentation, please submit completed packets to:**

Hodge Roofing, LLC
Attn: Subcontractor Compliance
9275 Youree Drive, Suite 3 | Shreveport, LA 71115
Office: (318) 946-8093
Email: murry@hodgeroofing.net

***NOTE: All information will be kept strictly confidential and used solely for the purpose of evaluating your company as a potential subcontractor for Hodge Roofing, LLC. Submission of this packet does not guarantee work or a contract.*

Thank you,

Murry Hodge, CEO & Owner

Required Attachments Checklist

The following documents **MUST** be submitted with this application before your company is approved as a Hodge Roofing, LLC Subcontractor:

- Completed Subcontractor Application (***this packet, all sections***)
- Certificate of Insurance — Workers' Compensation (\$1,000,000 minimums) & Commercial General Liability (\$1,000,000 minimums) with **HODGE ROOFING, LLC named as Additional Insured [REQUIRED]**
- Certificate of Insurance — Commercial Auto Liability (**A Plus / Not Required**)
- Signed Hodge Roofing Hold Harmless & Indemnification Agreement (***separate attachment***)
- Completed IRS Form W-9 (*current version, downloaded from www.irs.gov*)
- Signed ACH / Direct Deposit Authorization Form – Expedited Payment System (*Included in this packet. Can be filled out later if awarded project.*)
- Voided check OR bank letter confirming routing and account numbers (*Can be provided out later if awarded project.*)
- Copy of Owner / Principal photo ID (driver's license or state-issued ID)
- Copies of **ALL** state contractor licenses (*each state where work is performed by subcontractor – if applicable*)
- Copies of **ALL** roofing manufacturer certifications (*current copies / not expired*)
- Three (3) trade references — completed in Section I of this application
- Recent project list (Section J) AND 5–10 photographs of completed roofs
- Equipment inventory list (Section H) — itemized

Note: Insurance certificates must show 30-day notice of cancellation/non-renewal and waiver of subrogation in favor of Hodge Roofing, LLC.

Section A — Company Information

Legal Business Name	
DBA / Trade Name (if any)	
Federal EIN / Tax ID	
Business Structure (LLC, Corp, S-Corp, Sole Prop, Partnership)	
Year Established / Years in Business	
Physical Address	
City / State / Zip	
Mailing Address (if different)	
Office Phone	
Company Email	
Website	

Ownership / Principals

Owner / Principal Name	
Title	
Mobile Phone	
Email	
Additional Owner / Partner (if any)	

Primary Contact for Hodge Roofing

Name	
Title	
Phone	
Email	
After-Hours / Emergency Contact	

Section B — Insurance Verification

Hodge Roofing, LLC requires every subcontractor to carry — at minimum — Workers' Compensation and Commercial General Liability insurance with the limits shown below, and to attach a current Certificate of Insurance (COI) naming HODGE ROOFING, LLC as Additional Insured on the General Liability policy. Commercial Auto coverage is a plus, but not required.

Workers' Compensation [REQUIRED]

Required Limits	Your Coverage
Each Accident — \$1,000,000	\$
Disease Policy Limit — \$1,000,000	\$
Disease Each Employee — \$1,000,000	\$
Carrier / Insurance Company	
Policy Number	
Effective Date	
Expiration Date	
Agent / Broker Name	
Agent Phone	

Commercial General Liability [REQUIRED]

Required Limits	Your Coverage
Each Occurrence — \$1,000,000	\$
Personal & Adv. Injury — \$1,000,000	\$
General Aggregate — \$1,000,000	\$
Products / Comp. Ops. Aggregate — \$1,000,000	\$
Carrier / Insurance Company	
Policy Number	
Effective Date	
Expiration Date	
Hodge Roofing, LLC named as Additional Insured? (Yes / No)	

Waiver of Subrogation in favor of Hodge Roofing? (Yes / No)	
Agent / Broker Name	
Agent Phone	

Commercial Auto Liability (A Plus / Not Required)

Carrier / Insurance Company	
Policy Number	
Combined Single Limit	
Effective Date	
Expiration Date	

Safety / Loss History (If Available)

Most Recent EMR (Workers Comp Mod Rate)	
EMR — Prior Year	
EMR — Two Years Ago	
OSHA Recordable Incidents — Last 3 Years (#)	
Any OSHA citations in last 3 years? (Yes/No — explain)	
Any workers comp claims > \$25,000 in last 3 years? (Yes/No)	

Section C — Licensing & Manufacturer Certifications

State Contractor / Roofing Licenses

List every state where you are licensed. Attach a copy of each license.

State	License #	License Type / Classification	Expiration

Manufacturer Certifications

Check all current certifications. List certification level (e.g., GAF Master Elite, Owens Corning Platinum Preferred) and expiration date.

- | | |
|--|---|
| <input type="checkbox"/> GAF (Master Elite / Certified) | <input type="checkbox"/> Owens Corning (Platinum / Preferred) |
| <input type="checkbox"/> CertainTeed (SELECT ShingleMaster / SM) | <input type="checkbox"/> TAMKO (Pro Certified) |
| <input type="checkbox"/> Atlas (Pro Plus) | <input type="checkbox"/> Malarkey (Emerald Pro) |
| <input type="checkbox"/> IKO (ShieldPRO Plus) | <input type="checkbox"/> Carlisle SynTec (TPO/EPDM) |
| <input type="checkbox"/> Firestone / Elevate (TPO/EPDM) | <input type="checkbox"/> Versico (TPO/EPDM) |
| <input type="checkbox"/> Mule-Hide (Low-Slope) | <input type="checkbox"/> Johns Manville (Commercial) |
| <input type="checkbox"/> GAF Commercial (TPO/EverGuard) | <input type="checkbox"/> Sika Sarnafil (PVC) |
| <input type="checkbox"/> Duro-Last (PVC) | <input type="checkbox"/> Other (list below) |

Manufacturer Certification Detail

Manufacturer	Certification Level	Cert. ID #	Expiration

Section D — Work History & Experience

Years specifically performing roofing work	
Approximate annual revenue (last 12 months)	
Approximate # of roofing jobs completed last year	
Largest single project completed (description)	
Largest single project — \$ value	
Largest single project — square footage / squares	
Average project size — residential (squares)	
Average project size — commercial (squares)	

Customer / Project Types (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Residential — single family | <input type="checkbox"/> Residential — multi-family / apartments | <input type="checkbox"/> Commercial — retail / office |
| <input type="checkbox"/> Commercial — warehouse / industrial | <input type="checkbox"/> Government / Municipal | <input type="checkbox"/> Schools / Education |
| <input type="checkbox"/> Healthcare | <input type="checkbox"/> Religious / Non-profit | <input type="checkbox"/> Insurance / Storm Restoration |
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Re-Roof / Tear-off | <input type="checkbox"/> Repair / Service Calls |

Section E — Roof Systems Installed

Check every system your crews are experienced installing.

Steep-Slope (Residential)

- | | | |
|---|---|--|
| <input type="checkbox"/> Asphalt Shingle (3-tab) | <input type="checkbox"/> Architectural / Laminate Shingle | <input type="checkbox"/> Designer / Luxury Shingle |
| <input type="checkbox"/> Standing Seam Metal | <input type="checkbox"/> Exposed-Fastener Metal (R-Panel) | <input type="checkbox"/> Stone-Coated Steel |
| <input type="checkbox"/> Cedar Shake / Wood Shingle | <input type="checkbox"/> Concrete Tile | <input type="checkbox"/> Clay Tile |
| <input type="checkbox"/> Natural Slate | <input type="checkbox"/> Synthetic Slate / Shake | <input type="checkbox"/> Other steep-slope |

Low-Slope (Commercial)

- | | | |
|--|--|--|
| <input type="checkbox"/> TPO (Mechanically Attached) | <input type="checkbox"/> TPO (Fully Adhered) | <input type="checkbox"/> EPDM (Rubber) |
| <input type="checkbox"/> PVC | <input type="checkbox"/> Modified Bitumen | <input type="checkbox"/> Built-Up Roof (BUR / Hot Tar) |
| <input type="checkbox"/> Standing Seam Metal (low slope) | <input type="checkbox"/> Spray Polyurethane Foam (SPF) | <input type="checkbox"/> Acrylic / Silicone Coatings |
| <input type="checkbox"/> Single-Ply Restoration | <input type="checkbox"/> Other low-slope | |

Ancillary / Related Services

- | | | |
|--|---|--|
| <input type="checkbox"/> Tear-off & Disposal | <input type="checkbox"/> Decking Replacement | <input type="checkbox"/> Skylights — install / replace |
| <input type="checkbox"/> Gutters & Downspouts | <input type="checkbox"/> Soffit & Fascia | <input type="checkbox"/> Siding |
| <input type="checkbox"/> Solar Panel R&R | <input type="checkbox"/> Insulation / Ventilation | <input type="checkbox"/> Sheet Metal Fabrication |
| <input type="checkbox"/> Roof Coatings / Restoration | <input type="checkbox"/> Drainage / Scuppers | <input type="checkbox"/> Snow & Ice Mitigation |

Section F — Crews & Capacity

Total number of crews	
Average crew size (workers per crew)	
Total field employees	
Crews are W-2, 1099, or both?	
Languages spoken on crews (English, Spanish, etc.)	
English-speaking foreman on every crew? (Yes / No)	
Squares per week — multifamily shingle capacity	
Squares per week — commercial single ply capacity	
Typical lead time / mobilization (days)	
Maximum crews available simultaneously	

Foremen / Crew Leaders

Name	Years Exp.	Mobile Phone	OSHA 10/30?

Section G — Geographic Coverage

Home State / HQ Location	
Other states where you are based / have crews	
List all states you are LICENSED to work in	
List all states you are WILLING to travel for work	
Maximum travel distance from home base (miles)	
Per diem / travel pay required? (Yes / No — describe)	
Do you bring your own dump trailers when traveling? (Yes / No — describe)	
If Hodge Roofing provides hotel rooms for crews, are you ok with 4 crew members per room? (Yes / No — describe)	

Section H — Equipment Inventory

Indicate quantity owned (not leased) of each item. Mark N/A where not applicable.

Equipment	Quantity Owned
Dump Trailers	
Material / Box Trailers	
Flatbed / Stake Trucks	
Pickup Trucks	
Boom Truck / Conveyor	
Telehandler / Forklift	
Aerial Lift / Scissor Lift	
Roof Loader / Hoist	
Magnetic Sweepers (large/walk-behind)	
Generators	
Air Compressors	
Pneumatic Nailers (approx. count)	
Fall-Arrest Harness Kits	
Roof Anchors / Lifelines	
Extension Ladders 24', 28', 33'+	
Tarps / Catch Systems	
GPS / Fleet Tracking? (Yes / No)	
Other (list)	

Do you provide your own hand tools? Yes / No

Do you provide your own safety equipment (harnesses, anchors, hard hats, etc.)? Yes / No

****NOTE: Subcontractor shall follow all OSHA and industry standard safety protocols while performing contracted work, as well as provide all necessary safety equipment and material to operate within those safety guidelines.**

Section I — Trade References [REQUIRED — 3]

Provide three (3) General Contractors or Roofing Contractors you have subcontracted for in the last 24 months that you give Hodge Roofing, LLC permission to contact and verify work history.

Reference #1

Contractor / Company Name	
Contact Name & Title	
Phone	
Email	
Project Type / Description	
Approximate \$ Value	
Year Completed	

Reference #2

Contractor / Company Name	
Contact Name & Title	
Phone	
Email	
Project Type / Description	
Approximate \$ Value	
Year Completed	

Reference #3

Contractor / Company Name	
Contact Name & Title	
Phone	
Email	
Project Type / Description	
Approximate \$ Value	
Year Completed	

Section J — Recent Project List

List 5–10 of your most recent projects. Attach 5–10 total photographs (digital or printed) of completed roofs.

Project Name / Address	System Type	Size (sq.)	Year	\$ Value

Section K — Owner Identification

A clear, legible copy of the owner / principal's photo ID (driver's license or state ID) MUST be attached.

Full Legal Name	
Driver's License # / State ID	
Issuing State	
Expiration Date	
Date of Birth (MM/DD/YYYY)	

Section L — Disclosure Questions

Answer each question. If "Yes," attach a brief explanation on company letterhead.

Question	Yes / No
Has any owner, officer, or principal of your company ever been convicted of a felony?	
Are there any pending lawsuits, judgments, or liens against your company?	
Has your company ever filed for bankruptcy or business reorganization?	
Has any insurance carrier ever cancelled or non-renewed your coverage?	
Has your company ever been removed or barred from a project for performance reasons?	
Has any state contractor license ever been suspended, revoked, or denied?	

ACH / Direct Deposit Authorization

I hereby authorize Hodge Roofing, LLC to initiate credit (deposit) entries to the account indicated below at the financial institution named below for payment of subcontractor invoices. This authorization will remain in effect until I provide written notice to Hodge Roofing, LLC of its termination, in such time and manner as to allow Hodge Roofing and the financial institution a reasonable opportunity to act on it.

Vendor / Subcontractor Information

Legal Business Name (must match W-9)	
DBA (if any)	
Federal EIN / Tax ID	
Remittance Email (for ACH advice notifications)	

Bank Account Information

Bank Name	
Bank Address	
Routing / ABA Number (9 digits)	
Account Number	
Account Type (Checking / Savings)	
Name on Account	

Wire Transfer Information (if different from ACH)

Bank Name	
Wire Routing Number	
SWIFT / BIC (if international)	
Beneficiary Name	
Beneficiary Account #	
Bank Reference / Memo	

REQUIRED: Attach a VOIDED CHECK or BANK LETTER on bank letterhead confirming the routing and account numbers above.

Authorized Signature	
Printed Name & Title	
Date	

Subcontractor Certification & Signature

I certify that all information provided in this Subcontractor Application Packet is true, correct, and complete to the best of my knowledge. I authorize Hodge Roofing, LLC to verify any and all information provided herein, including, without limitation, contacting trade references, insurance carriers and brokers, manufacturers, licensing authorities, and credit bureaus. I further authorize the release of any non-confidential information needed to complete that verification.

I understand that any material misrepresentation or omission may result in immediate disqualification, termination of any agreement, and recovery of any resulting damages. I acknowledge that submission of this packet does not constitute an offer of work or a contract, and that all work is subject to a separate written agreement (which may include a Master Subcontractor Agreement, Hold Harmless & Indemnification Agreement, and project-specific Work Order). I agree to comply with all federal, state, and local laws — including OSHA, immigration (I-9), and tax requirements — in performing any work for Hodge Roofing, LLC.

Company / Subcontractor Name	
Authorized Signer — Printed Name	
Title	
Signature	
Date	

Hodge Roofing, LLC will keep all submitted information strictly confidential and will use it solely for the purpose of evaluating and managing the subcontractor relationship.