

**Location Island.com**  
GC Reference Check

Name of General Contractor: \_\_\_\_\_

Principal Contact: \_\_\_\_\_

Reference Given by: \_\_\_\_\_ DBA: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of Reference Check: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Scope of Work performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please Rank the GC based on the following areas:**

<b>Quality of Supervision</b>	Poor	Fair	Good	Very Good	Excellent	N/A
<b>Reliability/Dependability</b>	Poor	Fair	Good	Very Good	Excellent	N/A
<b>Followed Instructions</b>	Poor	Fair	Good	Very Good	Excellent	N/A
<b>Quality of Finished Work</b>	Poor	Fair	Good	Very Good	Excellent	N/A

**Was the project completed on time?** Yes No

Reason: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Was the project completed on Budget?** Yes No

Reason: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**If given the opportunity, would you hire this firm again?** Yes No

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_