



PREQUAL APPLICATION SUMMARY



Application for: New England Construction

Report Created: November 14th, 2025 8:52 AM EST

01 COMPANY INFORMATION

Submission as of: 11/11/2025

GENERAL

Company Name	
Company Tax Name	
Doing Business As	
Offices	Main Office [REDACTED]
Year Founded	2019
State/Province Founded	Connecticut
Business Tax ID	US FEIN: [REDACTED]
Type of Work Performed	21 00 00 Fire Suppression
Markets Served	Commercial, Education, Healthcare, Hospitality, Industrial & Manufacturing, Institutional, Office & Interiors, Pharmaceutical & Laboratory, Residential, Retail, Sports
Regions Served	Connecticut , Rhode Island
Total Number of Employees	1 Home Office, 3 Field Supervisory Employees
Enterprise Business Certifications	-
Union Affiliations	-
Professional Licenses (1/1)	F-1, F-1 40704, Connecticut, Sumner & Sumner, , thames valley license.pdf

CUSTOM GENERAL

Please provide your company's business entity (corporation, partnership, sole proprietor, join venture, or other). List any that apply.	sole proprietor
Have you previously worked with New England Construction?	No
Please provide the date your business commenced.	09 30 2025
How many years has your organization been in business as a contractor?	6
How many years has your organization been in business under this name?	6
How many office staff members do you have?	6
How many field/trades people do you have?	4

CONTACTS

[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED] (860) 208-3312

CUSTOM CONTACTS

Please provide name of your company's Owner.

[REDACTED]

02 PROJECT HISTORY, REFERENCES, BACKLOG

Submission as of: 11/11/2025

COMPLETED REFERENCES

[REDACTED]
\$68,000 

[REDACTED]
[REDACTED]

[REDACTED]
\$22,000

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]

BACKLOG

Current Estimated Backlog

\$325,000

CUSTOM PROJECT HISTORY

Please provide two Supplier references. In your response, include supplier name, contact, phone, and email.

[REDACTED]
[REDACTED]

03 SAFETY

Submission as of: 11/11/2025

EMR

2025	1.00
2024	1.00
2023	1.00

OSHA 300

2024	Fatalities: 0 Cases Days Away: 0 Cases Restriction/Transfer: 0 Other Recordable: 0 Employee Hours Worked: 7,400
2023	Fatalities: 0 Cases Days Away: 0 Cases Restriction/Transfer: 0 Other Recordable: 0 Employee Hours Worked: 6,200
2022	Fatalities: 0 Cases Days Away: 0 Cases Restriction/Transfer: 0 Other Recordable: 0 Employee Hours Worked: 4,500
2021	Fatalities: 0 Cases Days Away: 0 Cases Restriction/Transfer: 0 Other Recordable: 0 Employee Hours Worked: 200
2020	Fatalities: 0 Cases Days Away: 0 Cases Restriction/Transfer: 0 Other Recordable: 0 Employee Hours Worked: 2,400
2019	Fatalities: 0 Cases Days Away: 0 Cases Restriction/Transfer: 0 Other Recordable: 0 Employee Hours Worked: 600

SAFETY MANUALS

2021	Safety Manual - Thames Valley Fire.docx
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CUSTOM SAFETY

Does your company have a current safety manual? Type "yes" or "no".	yes
Is OSHA 30 required for Supervisors/Foremen?	No
Do you hold employee "toolbox" HSE meetings? If yes, how often	Yes, weekly
Do you conduct pre-task job hazard analysis (JHA) planning meetings with employees?	Yes
Do you conduct workplace HSE inspections?	No
Please identify the most senior executive/manager directly responsible for HSE program management and implementation at your company.	Gregg Malone

04 SIGNATURE

Submission as of: 11/11/2025

Please select "yes" to verify all information provide in pre-qualification is accurate. Provide name and position of person attesting to the completion Yes, yes of this pre-qualification.

05 INSURANCE AND BONDING

Submission as of: 11/11/2025

COVERAGE

Automobile Liability \$100,000 \$100,000	Arbella Protection Insurance Company, Inc. Expires: 03/31/2026 2026 COI.pdf
General Liability \$1,000,000 \$2,000,000	Hudson Specialty Insurance Company Expires: 09/24/2026 2026 COI.pdf
Umbrella/Excess \$2,000,000 \$2,000,000	Hudson Specialty Insurance Company Expires: 09/24/2026 2026 COI.pdf
General Liability \$1,000,000 \$2,000,000	Liberty Insurance Corporation Expires: 09/24/2026 2026 COI.pdf
Workers' Compensation \$500,000 \$500,000	Standard Fire Insurance Company Expires: 07/17/2026 2026 COI.pdf

CERTIFICATES OF INSURANCE

2025	2025 coi.pdf
2021	thames valley accord.pdf

ADDITIONAL INSURED ENDORSEMENTS

2025	2025 coi.pdf
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INSURANCE BROKER INFORMATION

Broker Company Name	Ahrens, fuller, st john & vincent inc
Broker Contact Name	david cobb
Broker Contact Email	dcobb@afsvinsurance.com
Broker Contact Phone	(860) 668-3960

SURETY / BONDING INFORMATION

Surety Company Name	-
Broker Company Name	-
Broker Contact Name	-
Broker Contact Phone	-
Single Bonding Limit	-
Aggregate Bonding Limit	-

06 FINANCIAL INFORMATION

Submission as of: 11/11/2025

BANKING

Bank Name	Citizens Bank
Total Line of Credit	\$250,000
Line of Credit Available	\$45,000
Bank Contact Name	Daniel Klewin
Bank Contact Phone	(860) 564-3378
Bank Contact Email	Daniel.klewin@citizensbank.com

W-9

2025	2025 w-9.pdf
2021	W9 2021.pdf

ANNUAL VOLUME / REVENUE

2024	\$880,000
2020	\$188,000

FINANCIAL STATEMENTS

2025	Statement Date: 10/31/2025 2025 P & L and Updated Balance sheet.pdf
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CUSTOM FINANCIAL

Do you subcontract any portion of your work? If yes, provide percentage? No