

Subcontractor Capacity Assessment

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Company Name]

[Company Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We are conducting a subcontractor capacity assessment to evaluate potential partnerships for our upcoming projects. As part of this assessment, we would appreciate your cooperation in providing the following information:

Company Information

- Company Name:
- Address:
- Contact Person:
- Email:
- Phone Number:

Capacity Details

- Type of Services Offered:
- Number of Employees:
- Years in Business:
- Previous Projects (with references):
- Licenses and Certifications:

Please submit the completed assessment by [Insert Due Date]. This information will help us ensure that we engage with the most qualified subcontractors for our projects.

Thank you for your time and assistance.

Sincerely,

[Your Name]

[Your Title]

[Your Company]

[Your Contact Information]