Contractor Application
(An incomplete form will not be accepted)

<table>
<thead>
<tr>
<th>Name:</th>
<th>Business Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address / PO Box:</td>
<td>Telephone Number(s):</td>
</tr>
<tr>
<td>City:</td>
<td>E-Mail Address:</td>
</tr>
<tr>
<td>State:</td>
<td>Zip:</td>
</tr>
</tbody>
</table>

Information from Contractor Applicants

1. Construction trade in which you are interested.

______________________________________________________________________________

2. Indicate the amount of experience you have had in each of the trades listed below by rating as 1, 2, 3, or 4.

   1 = Large Amount of Experience  3 = Little Experience
   2 = Some Experience              4 = No Experience

   a. _____Concrete Slabs           h. _____Interior Finish Work
   b. _____Insulation               i. _____Plumbing
   c. _____Vinyl Siding             j. _____Heating and Cooling
   d. _____Codes                    k. _____Drywall
   e. _____Window Replacement       l. _____Painting
   f. _____Framing                  m. _____Flooring
   g. _____Electrical Work          n. _____List other areas of interest

______________________________________________________________________________

3. How long have you been in the construction business?

______________________________________________________________________________

4. In what areas and trades are you licensed in this jurisdiction?

______________________________________________________________________________

5. How many employees do you employ full-time and/or Part-time?

______________________________________________________________________________
6. Are you Lead Based Paint Safe Work Practice Certified? (One day class training)
   □ Yes, copy of certificate attached.  □ No

7. If you had your choice of construction work, with which type do you prefer:
   New Construction   or   Rehab of Existing Homes   (circle one or both)

8. Contractor’s General Liability Insurance
   a. Name of Insurance Company:___________________________________________
   b. Agent Name:________________________________________________________
   c. Phone:_____________________________________________________________

9. Please provide the names and phone numbers for three references.
   a.___________________________________________________________________
   b.___________________________________________________________________
   c.___________________________________________________________________

10. List other information you would like to add that would be pertinent. (Use back of sheet if needed)

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Signature __________________________________________ Date _________________


