

**TOWN OF GARFIELD
SMALL WORKS ROSTER INSTRUCTIONS & APPLICATION**

Thank you for your interest in the Town of Garfield's Small Works Roster.
Please complete the attached application and return it to:

**Town of Garfield
Attn: Clerk-Treasurer
P.O. Box 218
Garfield, WA 99130
or Fax it to 509-635-1201
email garfield-town@completebbs.com.**

For additional information contact Annie Pillers, Clerk-Treasurer at (509)635-1604 or garfield-town@completebbs.com. Your application will be kept confidential, unless it becomes a matter of public record. Incomplete applications will not be processed.

The Town of garfield is an equal employment opportunity employer.

PRE-QUALIFICATION REQUIREMENTS:

Businesses on the Small Works Roster must be able to provide items (1), (2), and (3) when the need arises. *Items (4), (5), and (6) must accompany your completed application.

1. Your business must name the Town of Garfield as an additional insured prior to the performance of any contract.
2. Your business must provide a Performance Bond prior to the performance of any contract.
3. Your business must provide a Payment Bond prior to the performance of any contract.
- 4.* Your business must provide a list of references regarding similar projects performed in the past two (2) years.
- 5.* Your business must provide proof of a current Contractor's License.
- 6.* Your business must provide a written statement declaring that the contractor has no previous record of default in the performance of; or failed to complete a written public contract, and that the contractor has not been convicted of a crime arising from a previous public contract.

TOWN OF GARFIELD
SMALL WORKS ROSTER CONTRACTOR APPLICATION

08/08

COMPANY INFORMATION:

Company Name: _____

Phone () _____ Fax () _____

Mailing address: _____

Street Address: _____

E-Mail Address: _____

BANKING REFERENCE:

Name of Bank: _____

Address: _____

Phone: () _____

TYPE OF OWNERSHIP/CONTRACTOR INFORMATION:

Corporation Partnership Sole Proprietorship

Contractor License # _____ Expires: _____

Washington State Tax # _____

CONTRACT TYPES:

- | | |
|---|---|
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Paving/Street Oiling |
| <input type="checkbox"/> Concrete Placement/Finishing | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> General Construction | <input type="checkbox"/> Storm Drainage |
| <input type="checkbox"/> Heating | <input type="checkbox"/> Sewerage System |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Water Systems |
| <input type="checkbox"/> Other (specify) _____ | |

Please attach supplemental information regarding your company's experience and qualifications along with references that may be contacted regarding your company's performance.

By signing below I acknowledge that I have read and understand the requirements described in this application, and to the best of my knowledge, the information provided is a true representation of the named firm's ability to perform any contracts which may result by submittal of this application.

Name of Preparer (print)

Title of Preparer

Signature

Date

Town of Garfield

SMALL WORKS ROSTER CONTRACTOR APPLICATION SUPPLEMENT

Thank you for your interest in the Town of Garfield's Small Works Contractor Roster. Please complete the attached application and return it to Garfield Town Hall, 405 W. California, P. O. Box 218, Garfield, WA 99130. Incomplete applications will not be processed.

For additional information contact Town Hall at (509) 635-1604 or garfield-town@completebbs.com. Your application will be kept confidential, unless it becomes a matter of public record.

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