

JEFFERSON COUNTY LAND BANK CONTRACTOR'S PRE-QUALIFICATION FORM

GENERAL CONTRACTOR INFORMATION

Company Name: _____

Address: _____

Phone: _____ Fax: _____ Mobile: _____

Federal Tax ID # or Social Security #: _____

Owner Name: _____ Phone: _____

Contact Person (if Different): _____ Phone: _____

Organization Type (Check):

____ Sole Proprietorship
____ Partnership
____ Corporation
____ Other _____

When organized? _____

Have you contracted under any other names? _____, if yes, explain _____

Have you ever failed to complete work awarded to you? _____, if yes, explain _____

Have you ever defaulted on a contract? _____, if yes, explain _____

Are you currently listed as an ineligible contractor by the U.S. Department of Housing & Urban

Development? _____, if yes, explain _____

INSURANCE:

Insurance Company: _____ Agent Name: _____

Phone: _____ Address: _____

EXPERIENCE RECORD

PLEASE PROVIDE 3 OF MOST RECENT PROJECTS COMPLETED OR IN-PROCESS:

REFERENCES:

Please provide no fewer than three business references where contract performance has taken place

I hereby certify that the information provided herein is, to the best of my knowledge and belief true, accurate, and complete.

Authorized Signature of Contractor

Please Print Name

Company Name

Date

REQUIRED SUBMISSIONS: (____) CERTIFICATE OF LIABILITY

(____) COPY OF WORKMAN'S COMPENSATION CERTIFICATE

(____) COPY OF CERTIFICATE OF REGISTRATION- STATE OF OHIO