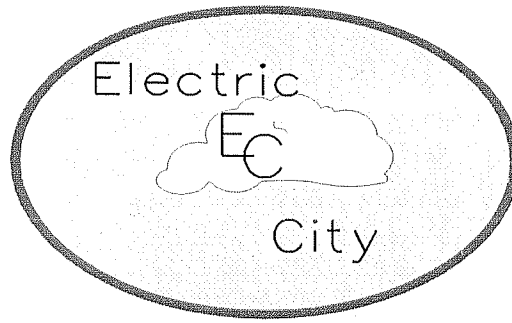


City of Electric City
10 Western Avenue
P.O. Box 130
Electric City, WA 99123



City Hall: 509-633-1510
City Shop: 509-633-2790
Fax: 509-633-1401
electriccity@homenetnw.net

SMALL WORKS/VENDOR ROSTER APPLICATION

Thank you for your interest in applying for Electric City's Small Works Roster. To determine qualification of firms to provide services or products to the City, please complete the information listed below.

COMPANY NAME: _____

MAILING ADDRESS: _____

STREET ADDRESS: _____

STATE: _____ ZIP: _____ PHONE: () _____

BANKING REFERENCE: Name of Bank: _____

Bank Address: _____

State: _____ Zip: _____ Phone: _____

TYPE OF OWNERSHIP: Incorporation _____ Sole Proprietorship _____ Partnership _____

Name of registered agent or managing person: _____

Minority/Woman Owned Business Enterprise Certification No. _____

ELECTRIC CITY BUSINESS LICENSE: YES ___ NO ___ LICENSE NO. _____

NAME OF CONTRACTOR'S BONDING COMPANY: _____

*CONTRACTOR LICENSE NUMBER: _____ *Bond No. _____

*Wash. State Tax ID No.: _____ *Federal Tax No.: _____

*Insurance Certificate, naming the City as additional insured, must be provided prior to performance of any contract.

*Performance and payment bond must be provided prior to performance of any contract.

*Statement that the contractor has no previous record of default in the performance of, or failed to complete, a written public contract, and has not been convicted of a crime arising from a previous public contract.

*List of 3 references of similar sales in Washington State within the past two years. (PRODUCT VENDORS)

*Statement to warranty all products. (PRODUCT VENDORS)

Mark which best describes the type of contract your firm qualifies to perform:

_____ Concrete Placement/Finishing

_____ Electrical

_____ General Construction

_____ Heating

_____ Landscaping

_____ Masonry

_____ Painting

_____ Paving

_____ Other _____

_____ Plumbing

_____ Road Construction

_____ Roofing

_____ Storm Drainage

_____ Sewerage System

_____ Street Repair

_____ Traffic Signalization

_____ Water Systems

(Please Specify)

Please attach a separate sheet, if you wish to provide more information.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

Information provided will be kept in confidence unless it is a matter of public record.

The City of Electric City complies with the prevailing wage law of the State of Washington (Chapter 39.12RCW) and requires all contractors to Comply.

By signature below, I acknowledge that I have read and understand the requirements described in this application. I certify that all information on this application is correct and understand that any misrepresentation or false statements on this application may be cause to reject the application.

Signature: _____ Title: _____ Date: _____