

## Contractor's Application Form

This form must be completed by each contractor who intends to bid for work that is assisted with the McDuffie County CHIP homeowner rehabilitation and reconstruction program. Approval by McDuffie County is based on the completion of this form and the review and approval of the application, puts you, as a contractor, on the list of "Available Contractors" that the McDuffie County Board of Commissioners will distribute to successful applicants who are ready to invite bidders to bid on the rehabilitation of their home. McDuffie County requires **copies** of the following current documents to be attached to this form:

### Comprehensive General Liability Insurance

Amounts: Bodily Injury \$ \_\_\_\_\_ each person; \$ \_\_\_\_\_ each occurrence; Property Damage \$ \_\_\_\_\_ per occurrence

### Comprehensive Automobile Liability

Amounts: Bodily Injury \$ \_\_\_\_\_ each person and each accident  
Property Damage \$ \_\_\_\_\_ total

Other: \_\_\_\_\_

Other: \_\_\_\_\_

Do you carry Worker's Compensation Insurance \_\_\_\_ Yes \_\_\_\_ No

Note: Self employed workers and partnerships may be exempt.

### 1. General Information

Name of Firm: \_\_\_\_\_

Firm Owner: \_\_\_\_\_

Street Address of Firm: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Name of Person Writing Bids: \_\_\_\_\_

Also, please indicate if you have a current license issued by the State of Georgia in the fields of plumbing, electrical, conditioned air, and asbestos abatement activities or current certifications in lead based paint activities by providing your current license or certification number.

Electrician's Licenses:

Electrical Contractor Class I      Current License Number \_\_\_\_\_

Electrical Contractor Class II      Current License Number \_\_\_\_\_

Low Voltage Contractor      Current License Number \_\_\_\_\_

Plumbing Licenses

Master Plumber Class I      Current License Number \_\_\_\_\_

Master Plumber Class II      Current License Number \_\_\_\_\_

Journeyman Plumber      Current License Number \_\_\_\_\_

Conditioned Air

Conditioned Air Contractor Class I      Current License Number \_\_\_\_\_

Conditioned Air Contractor Class II      Current License Number \_\_\_\_\_

Lead Based Paint:

Certified Lead Firm      Certification Number \_\_\_\_\_

Certified Lead Inspector      Certification Number \_\_\_\_\_

Certified Lead Supervisor      Certification Number \_\_\_\_\_

Certified Lead Project Designer      Certification Number \_\_\_\_\_

Certified Lead Worker      Certification Number \_\_\_\_\_

Asbestos Abatement

Asbestos Removal/Encapsulation License      Current License Number \_\_\_\_\_

Are you a General Contractor (You can handle all phases of work?) \_\_\_\_ Yes \_\_\_\_ No

What is your State of Georgia license number? \_\_\_\_\_

When was your Firm established? \_\_\_\_\_

How many employees are in your firm? \_\_\_\_\_

Is your firm a lead certified firm certified by the Environment Protection Division (EPD) of the Georgia Department of Natural Resources? \_\_\_\_ Yes \_\_\_\_ No If yes, certification number \_\_\_\_\_

Does your firm only employ Georgia EPD certified employees to conduct lead-based paint activities? \_\_\_\_ Yes \_\_\_\_ No

Are you a Section 3 Contractor? See Definition below. \_\_\_\_ Yes \_\_\_\_ No

A Section 3 business is defined as either:

1. One that is at least 51 percent owned by a low or moderate income area resident or a Public Housing resident;
2. One where at least 30 percent of its current, permanent, full-time employees were low or moderate income area residents within the last three years; or
3. One that will subcontract at least 25 percent of its contract award funds to Section 3 businesses.

Can you handle more than one \$45,900 job at a time? \_\_\_\_ Yes \_\_\_\_ No

## II. Area of Expertise

Please check the type of work you are qualified to do by indicating the years of experience you have in that area.

<u>Type of Work</u>	<u>Years Experience</u>	<u>Type of Work</u>	<u>Years Experience</u>
General Carpentry	_____	Floor Covering Replacement	_____
Roofing	_____	Kitchen Cabinet Replacement	_____
Structural Support Repair	_____	Foundation Wall Repair	_____
Window Replacement	_____	Attic and Sidewall Insulations	_____
Door Replacement	_____	Chimney Repair	_____
Siding	_____	Heating and Ventilation	_____
Concrete Repair	_____	Electrical	_____
Plumbing	_____	Lead hazard reduction	_____
Landscaping	_____	Asbestos Abatement	_____

## III. References

Provide reference information for your clients with home you have jobs currently in progress (list 3, if possible)

<u>Current Client Name</u>	<u>Phone Number</u>	<u>Dollar Value</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Provide reference information for three completed jobs

<u>Client Name</u>	<u>Phone Number</u>	<u>Dollar Value</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

List four major supplies from whom you purchase construction materials. List names and phone numbers:

<u>Supplier Name</u>	<u>Phone Number</u>
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_____	_____
_____	_____
_____	_____

List financial institution with whom you have established credit, including maximum credit line

<u>Company/loan officer</u>	<u>Max Credit Line</u>	<u>Phone Number</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

#### IV. Warranty

Do you guarantee your work for a period of one year? \_\_\_\_\_yes \_\_\_\_\_no

## V. Agreement

The undersigned contracting firm agrees that in consideration for being placed upon the “Acceptable Contractors’ Register”, he/she will comply with the following conditions on all rehabilitation work performed on properties under McDuffie County’s CHIP program:

1. To use only contract forms previously approved by McDuffie County for the CHIP program.
2. That work will be performed in accordance with the local government State Recipients’ Written Rehabilitation Standards and Specifications and will meet upon completion the local government State Recipients required program code selected for the CHIP program, subject to such inspections as deemed as necessary by McDuffie County.
3. That is work performed by the Contractor is found to be unsatisfactory by McDuffie County or if contract relations between the Contractor, homeowner, or other parties is found to be unsatisfactory than McDuffie County may remove the Contractor’s name from the “Acceptable Contractor’s Register.”
4. That adequate insurance and Workman’s Compensation will be provided \$ 50,000 for bodily injury and \$ 50,000 for property damages, and \$300,000 General Liability Insurance.
5. That the Contractor will abide by Equal Opportunity provisions of the Civil Rights Act.
6. That my withdrawal of bid without justification would remove my name from the “Acceptable Contractor’s Register.”
7. That the undersigned firm agrees to maintain in a current status all licenses and bonds required by the State of Georgia and McDuffie County.
8. That work will be done in conformance with all applicable codes and zoning regulations and performed by licensed or certified firms or individuals as required by the State of Georgia Construction Industry Licensing Board and the Environmental Protection Division of the Georgia Department of Natural Resources.

In connection with this application for my approval as a CHIP contractor, I authorize the McDuffie County BOC or its CHIP program agent to make inquiries as necessary to verify the accuracy of statements made and to determine by creditworthiness. I further certify that the above information is true and correct.

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Signature

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Date