|  |  |  |  |
| --- | --- | --- | --- |
| Business name: |  | | |
| Address: |  | Primary contact: |  |
|  |  | Contact phone: |  |
| Website: |  | Contact e-mail: |  |

|  |  |
| --- | --- |
| Is the company registered and in good standing with its home state? |  |
| Years in business: |  |
| Number of projects currently in process: |  |
| Number of projects completed within last two years: |  |

**LICENSE INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| License type: |  | State of issuance: |  |
| License number: |  | License expiration: |  |
| Name on license: |  | Years license held: |  |

**INSURANCE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Liability Insurance** | | Expiration date: |  |
| Provider: |  | Coverage amount: |  |
| **Worker’s Comp Insurance** | | Expiration date: |  |
| Provider: |  | Coverage amount: |  |

**DOCUMENTATION REQUIREMENTS**

|  |
| --- |
| Copy of Contractor License  Liability & Worker’s Comp insurance certificates |