

CITY OF TAUNTON
OFFICE OF ECONOMIC AND COMMUNITY DEVELOPMENT
AND
THE GREATER ATTLEBORO TAUNTON HOME CONSORTIUM

CHARLES CROWLEY
MAYOR

KEVIN SHEA
OECD DIRECTOR

45 SCHOOL STREET, 2ND FLOOR ♦ TAUNTON, MASSACHUSETTS 02780
TEL: 508-821-1030 ♦ FAX: 508-821-1091

HOUSING REHABILITATION LOAN PROGRAM APPLICATION FOR PLACEMENT ON QUALIFIED CONTRACTORS LIST

COMPANY INFORMATION:

Company Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Title: _____

Telephone Number: _____ Cell Phone: n/a _____

Email Address: n/a _____ Website Address: n/a _____

Federal Employer ID # _____ MBE/WBE: YES / NO

Number of Full-Time Employees: _____ Part-Time: _____

MAJOR TRADE PERFORMED BY BUSINESS:

- | | | | |
|--|------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> General Contracting | <input type="checkbox"/> Deleading | <input type="checkbox"/> Electrical | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Masonry | <input type="checkbox"/> Other | |

MAJOR TRADES NORMALLY SUBCONTRACTED:

- | | | | |
|--|------------------------------------|-------------------------------------|-----------------------------------|
| <input type="checkbox"/> General Contracting | <input type="checkbox"/> Deleading | <input type="checkbox"/> Electrical | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Painting | <input type="checkbox"/> Masonry | <input type="checkbox"/> Other | |

LICENSE INFORMATION:

Contractor's Supervisors License #: _____ Restrictions: _____

HIC License #: _____ Deleader Contractors License #: _____

INSURANCE COVERAGE:

INSURANCE TYPE	POLICY NUMBER	LIMITS	CARRIER
Property Damage			
Liability			
Workers' Compensation			

COMPANY REFERENCES:

BUSINESS REFERENCES (INCLUDE LOCAL BANKS AND MATERIAL SUPPLIERS):

Name: _____

Address: _____

Telephone: _____

PLEASE LIST THREE REFERENCES FROM JOBS RECENTLY COMPLETED IN THE TAUNTON REGION:

Name: _____ Address: _____

Type of work: _____ Estimated cost: \$ _____

Contact person: _____ Telephone #: _____

Name: _____ Address: _____

Type of work: _____ Estimated cost: \$ _____

Contact person: _____ Telephone #: _____

Name: _____ Address: _____

Type of work: _____ Estimated cost: \$ _____

Contact person: _____ Telephone #: _____

COMPANY HISTORY:

Number of years in business: _____ Has your contractor's license ever been revoked? No Yes (explain)

Have you ever been convicted of a felony? No Yes (Explain)

Are you presently, or have you ever been debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal debarment or agency? No Yes

Are you a member of a trade or civic association? No Yes (Please List) _____

PLEASE READ BEFORE SIGNING:

AUTHORITY TO OBTAIN VERIFICATION:

I understand that signing this application gives the City of Taunton's Housing Rehabilitation Loan Program Staff the authority to obtain verification from any source listed herein or otherwise available.

The undersigned certifies under penalties of law, that all information provided on this application is true and correct to the best of his or her knowledge and belief and that no information has been excluded, which might reasonably affect a judgment regarding eligibility.

Signature

Date

Name (please print)

Title

PLEASE SUBMIT APPLICATION AND COPIES OF REQUIRED DOCUMENTS TO:
CITY OF TAUNTON
HOUSING REHABILITATION LOAN PROGRAM
OFFICE OF ECONOMIC AND COMMUNITY DEVELOPMENT
(OECD)
45 SCHOOL STREET, 2ND FLOOR
TAUNTON, MA 02780
TEL: (508) 821-1030 • FAX: (508) 821-1091

DOCUMENT CHECKLIST:

Copies of the following documents must accompany this application:

- H.I.C. License
- Construction Supervisor's License
- Liability Insurance Certificate
- Workers' Compensation Insurance Certificate
- Completed W-9 Request for Taxpayer Identification Number and Certification
- Copy of SS-4 Form Employer Identification Number issued by the Internal Revenue Service

If applicable, the following documents must also accompany this application:

- Electrical License
- Plumber's License
- Certificate of Completion from U.S. Department of Housing and Urban Development sponsored course Lead-Based Paint Hazards Course
- Deleader Contractor's License from the Massachusetts Division of Occupational Safety