

Small Works Roster Application

Lake Chelan Reclamation District

Thank you for your interest to be included on our Small Works Roster. To determine your qualifications of providing services to us, please complete the information on this form and return it to staff@lcrd.org or PO BOX J, Manson, WA 98831. Your information will be kept in confidence unless it is a matter of public record.

PREQUALIFICATION REQUIREMENTS – Firms on the Small Works Roster must be able to show proof of ability to provide the following:

1. Insurance naming Lake Chelan Reclamation District as additional insured prior to performance of any contract.
2. List of references of similar projects performed by contractor in the past two (2) years.
3. Proof of appropriate Contractor's License.

SMALL WORKS ROSTER APPLICATION

Lake Chelan Reclamation District

Company Name: _____

Contact Person: _____

Mailing Address: _____

Street Address: _____

City _____ State _____ Zip _____

Telephone: _____ Email: _____

Type of Ownership: _____

WA State Contractor's Registration No: _____

UBI Number: _____ Federal Tax ID Number: _____

Check box(s) that best describes type of contract your firm qualifies to perform:

- | | |
|--|---|
| <input type="checkbox"/> Underground/Trenching/Utilities | <input type="checkbox"/> Concrete |
| <input type="checkbox"/> Asphalt Restoration | <input type="checkbox"/> Remodeling |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Pump Repair |
| <input type="checkbox"/> Tree Removal | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Weed Control | <input type="checkbox"/> Signs |
| <input type="checkbox"/> Concrete/Asphalt Cutting | <input type="checkbox"/> Excavation/Grading |
| <input type="checkbox"/> Concrete Sealing (Polyurea or equiv.) | <input type="checkbox"/> Structures (Metal/Wood) |
| <input type="checkbox"/> Control Systems/Telemetry | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Site Clean-Up |
| <input type="checkbox"/> Fencing | <input type="checkbox"/> Irrigation/Sprinkler Systems |
| <input type="checkbox"/> General Painting (Interior/Exterior) | <input type="checkbox"/> Well Drilling & Well Pump Repair |
| <input type="checkbox"/> Security Systems | <input type="checkbox"/> Steel Pipe Welding |
| <input type="checkbox"/> Concrete Pumping | <input type="checkbox"/> Pavement Marking |
| <input type="checkbox"/> Garage Doors | <input type="checkbox"/> Pavement Milling |
| <input type="checkbox"/> Material Conveying & Placement | <input type="checkbox"/> HVAC |

By signature below, I acknowledge that I have read and understand the requirements described in this application, and to the best of my knowledge, information provided is a true representation of the named firms ability to perform any contracts which may result by submittal of this application. I further state that the named firm (contractor) has no previous record of default in the performance of a contract, has not failed to complete a written public contract and has not been convicted of a crime arising from a previous public contract.

Date: _____

Signature: _____

Printed Name: _____

