

SMALL WORKS ROSTER APPLICATION
Wenatchee Valley Fire Department
P.O. Box 2106, Wenatchee, Washington 98801
(509) 662-4734

Please complete the entire application, incomplete applications will not be considered.

Name of Company _____
Mailing Address _____
Telephone _____
Email Address _____

Incorporated **Partnership** **Sole Proprietorship**

If incorporated, name the resident agent and address. For partnership or sole proprietorship, name the managing person and address:

Name _____

Address _____

Federal Tax ID _____

Washington Registration Information:

Washington Contractor's Registration No. _____

Contractor's Bonding Company _____

Amount of Bond Limit _____

Licensed as: **General Contractor** **Specialty Contractor**

Indicate the types of services performed by your company:

General Construction **Concrete Work** **Underground Utilities**

Demolition **Earthwork** **Mechanical**

Painting **Paving** **Electrical**

Specialty Work (Specify) _____

Other (Specify) _____

ADA Compliance: In accordance with the requirements of the Americans with Disabilities Act (ADA), Wenatchee Valley Fire Department will not discriminate directly, through contract or other arrangement against qualified individuals with disabilities, on the basis of disability, in the services, benefits, activities, or physical facilities provided to the public. Contractors shall comply with the requirements of the ADA and its regulations.

The Wenatchee Valley Fire Department complies with Washington State prevailing wage laws in accordance with RCW 39.12 and requires all contractors to comply.

The bidder hereby certifies that, within the three-year period immediately preceding this application, the bidder is not a "willful" violator, as defined in RCW 49.48.082, of any provision of chapters 49.46, 49.48, or 49.52 RCW, as determined by a final and binding citation and notice of assessment issued by the Department of Labor and Industries or through a civil judgment entered by a court of limited or general jurisdiction.

Successful bidders will be required to furnish Bond in the contract amount and a Certificate of Liability Insurance acceptable to the District.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Business Name _____

Print Name and Title _____

Signature _____

Date _____