



Port of Skagit

APPLICATION FOR SMALL WORKS ROSTER

PORT OF SKAGIT
P.O. BOX 348
BURLINGTON, WA 98233
(360) 757-0011
FAX (360) 757-0014

IF YOU WISH TO BE PLACED ON THE SMALL WORKS ROSTER OF THE PORT OF SKAGIT, THE FOLLOWING APPLICATION MUST BE COMPLETED IN ALL PARTICULARS. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

YOU ARE NOTIFIED THAT THE PORT OF SKAGIT COMPLIES WITH THE PREVAILING WAGE LAW OF THE STATE OF WASHINGTON (RCW 39.12) AND REQUIRES ALL CONTRACTORS TO COMPLY.

FURTHER QUESTIONS CONCERNING THIS APPLICATION MAY BE DIRECTED TO SARA YOUNG, MANAGER OF PLANNING AND ENVIRONMENTAL SERVICES.

Roster Effective Dates: January 1, 2010 - December 31, 2010

1. Name of Company _____

2. Name of Contact Person _____

Business Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____

3. Type of Business: (Check Appropriate)

_____ Incorporated _____ Partnership _____ Sole Proprietorship

If incorporated, state resident agent and address. If partnership or sole proprietorship, state managing person and address:

Name _____

Address _____

City _____ State _____ Zip _____

4. Minority Contractor: _____ Yes _____ No

5. Federal Tax Identification No. _____

6. State Licensing Information:

State of Washington Contractor's Registration No. _____

Contractor's Bond Information:

Name of Bonding Company _____

Amount of Bond _____ Bond No. _____

Licensed as: (Check Appropriate)

General Contractor Specialty Contractor

Please check type of work you are interested in bidding.

- | | | |
|---|---|---|
| <input type="checkbox"/> Carpentry/Framing | <input type="checkbox"/> Glazing/Glass | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Carpet Laying | <input type="checkbox"/> Gutters/Downspouts | <input type="checkbox"/> Sanitation Systems |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> HVAC | <input type="checkbox"/> Siding (Other than wood) |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Signs (Non-electrical) |
| <input type="checkbox"/> Excavating/Grading | <input type="checkbox"/> Painting/Wallcover | <input type="checkbox"/> Steel/Aluminum Erectors |
| <input type="checkbox"/> Fencing | <input type="checkbox"/> Paving/Striping | <input type="checkbox"/> Telecom/Cable Wiring |
| <input type="checkbox"/> Fire Protection System | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Underground Utilities |
| <input type="checkbox"/> Other (Specify) _____ | | |

Date _____

Prepared by _____
(Signature)

(Print Name)

Title _____