

**CITY OF CHEHALIS  
SMALL WORKS ROSTER APPLICATION**

COMPANY NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_  
(IF DIFFERENT)

TELEPHONE ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

TYPE OF OWNERSHIP             CORPORATION     SINGLE PROPRIETORSHIP

MINORITY AND WOMAN OWNED BUSINESS             MBE     WBE

FEDERAL TAX ID # (EIN) \_\_\_\_\_

CONTRACTOR LICENSE NUMBER \_\_\_\_\_

WASHINGTON STATE TAX ID # (UBI) \_\_\_\_\_

CHECK BOX THAT BEST DESCRIBES THE TYPE OF WORK YOUR FIRM IS QUALIFIED TO PERFORM.  
*CHECK ALL THAT APPLY.*

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> BRIDGES                           | <input type="checkbox"/> MASONRY              | <input type="checkbox"/> STORM DRAINAGE           |
| <input type="checkbox"/> CONCRETE PLACEMENT<br>& FINISHING | <input type="checkbox"/> PAINTING             | <input type="checkbox"/> STRUCTURAL               |
| <input type="checkbox"/> ELECTRICAL                        | <input type="checkbox"/> PAVEMENT MARKINGS    | <input type="checkbox"/> TELEMTRY/ CONTROLS       |
| <input type="checkbox"/> GENERAL CONSTRUCTION              | <input type="checkbox"/> PAVING/STREET REPAIR | <input type="checkbox"/> TRAFFIC SIGNALIZATION    |
| <input type="checkbox"/> HVAC                              | <input type="checkbox"/> PIPE CLEANING        | <input type="checkbox"/> UTILITY VIDEO INSPECTION |
| <input type="checkbox"/> IRRIGATION SYSTEM                 | <input type="checkbox"/> PLUMBING             | <input type="checkbox"/> WASTEWATER PUMP STATIONS |
| <input type="checkbox"/> LANDSCAPING                       | <input type="checkbox"/> ROOFING              | <input type="checkbox"/> WATERMANS                |
| <input type="checkbox"/> OTHER _____                       | <input type="checkbox"/> SANITARY SEWER       | <input type="checkbox"/> WATER PUMP STATIONS      |

(SPECIFY)

BY SIGNING BELOW, I HEREBY AFFIRM THAT THE NAMED FIRM HAS NO PREVIOUS RECORD OF DEFAULT IN THE PERFORMANCE OF OR FAILURE TO COMPLETE A WRITTEN PUBLIC CONTRACT, AND HAS NOT BEEN CONVICTED OF A CRIME ARISING FROM A PREVIOUS PUBLIC CONTRACT.

MY SIGNATURE FURTHER ACKNOWLEDGES THAT I HAVE READ AND UNDERSTAND THE REQUIREMENTS DESCRIBED IN THIS APPLICATION, AND TO THE BEST OF MY KNOWLEDGE, THE INFORMATION PROVIDED IS A TRUE REPRESENTATION OF THE NAMED FIRM'S ABILITY TO PERFORM ANY WORK THAT MAY RESULT FROM SUBMITTAL OF THIS APPLICATION.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

NAME AND TITLE OF PREPARER (TYPE OR PRINT) \_\_\_\_\_