

APPLICATION FOR SMALL WORKS ROSTER

**PORT OF POULSBO
P.O. BOX 732
POULSBO, WA 98370
(360)779-9905
FAX (360)779-8090**

If you wish to be placed on the Small Works Roster for the Port of Poulsbo, the following application must be completed in all particulars. Incomplete applications will not be accepted.

You are notified that the Port of Poulsbo complies with the Prevailing Wage law of the State of Washington (RCW 39.12) and requires all contractors to comply.

Roster Effective Dates: January 1, 2012 – December 31, 2012

1. Name of Company _____

Type of Business (Check Appropriate)

_____ Incorporated _____ Partnership _____ Sole Proprietorship

2. Name of Contact Person _____

Business Address _____

City _____ State _____ Zip _____

Phone () _____ Fax () _____

3. Federal Tax Identification No. _____ UBI: _____

4. State Licensing Information:

State of Washington Contractor's Registration No.

Amount of Bond _____ Bond No. _____

Licensed as: (Check Appropriate)

_____ General Contractor (Please list type of work you are interested in bidding)

_____ Specialty Contractor (Please check specialty/specialties)

- | | | |
|-----------------------------|------------------------------|--------------------------------|
| _____ Asbestos | _____ Fire Protection System | _____ Roofing |
| _____ Carpentry/Framing | _____ Glazing/Glass | _____ Sanitation Systems |
| _____ Carpet Laying | _____ Gutters/Downspouts | _____ Siding (other than wood) |
| _____ Concrete | _____ HVAC | _____ Signs |
| _____ Demolition | _____ Landscaping | _____ Steel/Aluminum Erectors |
| _____ Electrical | _____ Marine | _____ Telecom/Cable Wiring |
| _____ Environmental/UST | _____ Painting/Wallcover | _____ Timber/Logging |
| _____ Excavating/Grading | _____ Paving/Striping | |
| _____ Fencing | _____ Plumbing | |
| _____ Other (Specify) _____ | | |

Date _____

Prepared By _____
(signature)

(printed name)

Title _____