

# CONTRACTOR'S QUALIFICATION STATEMENT

*(CDBG related construction and demolition activities)*

\*\*\*Please attach a photocopy of current contractor's license and current EPA Certifications.

\*\*\*All questions must be answered in full. Additional sheets for clarification of answers or additional information must be attached if necessary

**\*\*\*THIS STATEMENT MUST BE NOTARIZED\*\*\***

## COMPANY INFORMATION

Company Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number(s) \_\_\_\_\_  
Email Address \_\_\_\_\_  
Contractors License # \_\_\_\_\_  
IRS ID Number of Company  
(or last 4 digits of owner's Soc. Sec No.) \_\_\_\_\_

## COMPANY OWNERSHIP INFORMATION

Owner Name \_\_\_\_\_  
Principle Officer \_\_\_\_\_  
Date of Formation \_\_\_\_\_  
Place of Formation \_\_\_\_\_

## INDUSTRY WORK DESCRIPTION

*(describe general type(s) of work performed)*

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## STATUS OF WORK

(List any work awarded failed to be completed or contracts defaulted on. Note where and why.)

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**RECENT CONTRACT WORK**

*(List three most recent contracts over \$10,000.)*

**1**                    Work Performed For \_\_\_\_\_  
                          Contact Name & Phone Number \_\_\_\_\_  
                          Type of Work Performed \_\_\_\_\_  
                          Approximate Cost of Contract \_\_\_\_\_  
                          Location of Work Performed \_\_\_\_\_  
                          Date Started \_\_\_\_\_  
                          Date Completed \_\_\_\_\_

**2**                    Work Performed For \_\_\_\_\_  
                          Contact Name & Phone Number \_\_\_\_\_  
                          Type of Work Performed \_\_\_\_\_  
                          Approximate Cost of Contract \_\_\_\_\_  
                          Location of Work Performed \_\_\_\_\_  
                          Date Started \_\_\_\_\_  
                          Date Completed \_\_\_\_\_

**3**                    Work Performed For \_\_\_\_\_  
                          Contact Name & Phone Number \_\_\_\_\_  
                          Type of Work Performed \_\_\_\_\_  
                          Approximate Cost of Contract \_\_\_\_\_  
                          Location of Work Performed \_\_\_\_\_  
                          Date Started \_\_\_\_\_  
                          Date Completed \_\_\_\_\_

**MATERIAL SUPPLIERS**

*(List three material suppliers and amount of credit available)*

**1**                    Name of Supplier \_\_\_\_\_  
                          Credit Available (\$) \_\_\_\_\_

**2**                    Name of Supplier \_\_\_\_\_  
                          Credit Available (\$) \_\_\_\_\_

**3**                    Name of Supplier \_\_\_\_\_  
                          Credit Available (\$) \_\_\_\_\_

**BANK REFERENCES**

**1**                    Name of Fiancial Institution \_\_\_\_\_  
                          Credit Available (\$) \_\_\_\_\_

**2**                    Name of Fiancial Institution \_\_\_\_\_  
                          Credit Available (\$) \_\_\_\_\_

**INSURANCE COVERAGE**

Liability (Property) \_\_\_\_\_  
Liability (Personal Injury) \_\_\_\_\_  
Vehicle/Equipment (if applicable) \_\_\_\_\_  
Other \_\_\_\_\_

**LIST OF SUBCONTRACTORS (if applicable)**

**1** Name \_\_\_\_\_  
Address \_\_\_\_\_  
Specialty \_\_\_\_\_  
Contractors License No. \_\_\_\_\_  
Year of Experience \_\_\_\_\_

**2** Name \_\_\_\_\_  
Address \_\_\_\_\_  
Specialty \_\_\_\_\_  
Contractors License No. \_\_\_\_\_  
Year of Experience \_\_\_\_\_

**3** Name \_\_\_\_\_  
Address \_\_\_\_\_  
Specialty \_\_\_\_\_  
Contractors License No. \_\_\_\_\_  
Year of Experience \_\_\_\_\_

**COMPANY EXPERIENCE AND KEY PERSONNEL**

*(Please describe)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYEES**

Number of full-time employees \_\_\_\_\_

**DEBARREMENT & EPA CERTIFICATIONS**

Are you on any list of debarred contractors maintained by the U.S. Department of Labor, U.S. Department of Housing & Urban Development, or Virginia Department of Highways?

Circle Answer: YES NO

All contractors and subcontractors, including electricians, must have the EPA required Renovate, Repair and Painting certification (RRP) in order to be considered for housing rehabilitation projects with work to houses constructed before 1978 funded under this program.

Does your company carry this certification?

Circle Answer: YES NO N/A

If "YES" complete the attached Company/Employee Record

If not, someone from your company will be required to attend the training before work can begin on a project site and. Do you need information about lead training and certification classes?

Circle Answer: YES NO

Please list any other additional certifications or licenses that you feel may be helpful or further explain the type of contract activities the compant performs.

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**The undersigned hereby authorizes and requests any person, firm or Corporation to furnish any information requested by Virginia's Region 2000 Local Government Council in verification of the recitals comprising this statement of contractor's qualifications:**

Company Name \_\_\_\_\_  
Authorized By \_\_\_\_\_  
Title \_\_\_\_\_  
Signature \_\_\_\_\_  
Date \_\_\_\_\_

**NOTARY STATEMENT**

COMMONWEALTH OF VIRGINIA  
CITY | TOWN | COUNTY of \_\_\_\_\_;

\_\_\_\_\_ being duly sworn deposes and says that he/she is an authorized representative of \_\_\_\_\_ and that the answers to the foregoing questions and all statements therein contained are true and correct.

Given under my hand this \_\_\_\_\_ of \_\_\_\_\_, 20 \_\_\_\_\_  
My commission expires \_\_\_\_\_  
My Registration Number \_\_\_\_\_

\_\_\_\_\_  
Notray Public

