



**SMALL WORKS ROSTER APPLICATION**

**STANDARD QUESTIONNAIRE FORM**

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Thank you for your interest in being included on the City of Raymond's Small Works Roster. To determine the qualifications of firms to provide services for the City, please complete and return this application.

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**QUALIFICATION REQUIREMENTS:**

Firms on the Small Works Roster must be able to show proof of the following prior to performance on a specific job:

1. Insurance, naming the City as an additional insured
2. A City of Raymond Business License
3. A performance bond
4. Appropriate Licensing
5. Proof of payment of prevailing wage rates

Company \_\_\_\_\_

Mailing Address \_\_\_\_\_

Street Address (If different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Contact Person \_\_\_\_\_

Banking Reference - Name of Bank \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Contact Person \_\_\_\_\_

*Type of Ownership:*

*Minority and Women Owned Businesses:*

- |  |                              |
|--|------------------------------|
| <input type="checkbox"/> Corporation         | <input type="checkbox"/> MBE |
| <input type="checkbox"/> Sole Proprietorship | <input type="checkbox"/> WBE |
| <input type="checkbox"/> Partnership         |                              |
| <input type="checkbox"/> Joint Venture       |                              |

City of Raymond Business License # \_\_\_\_\_ Federal Tax ID # \_\_\_\_\_

WA State Contractors License # \_\_\_\_\_ WA State Tax # \_\_\_\_\_

Please check boxes that describe types of work your firm qualifies to perform:

- |   |                              |
|---|------------------------------|
| <input type="checkbox"/> General Contractor           | Cleaning/Grubbing            |
| <input type="checkbox"/> Building                     | Waterfront or Marina         |
| <input type="checkbox"/> Concrete Placement Finishing | Plumbing                     |
| <input type="checkbox"/> Electrical                   | Roofing                      |
| <input type="checkbox"/> Heating                      | Storm Drainage               |
| <input type="checkbox"/> Masonry                      | Sewer Systems                |
| <input type="checkbox"/> Painting                     | Street Repair & Construction |
| <input type="checkbox"/> Paving                       | Illumination                 |
| <input type="checkbox"/> Road Grading                 | Water Systems                |
| <input type="checkbox"/> Other _____                  |                              |

Describe experience and qualifications:

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

List 5 References:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Other information regarding your firm's ability to satisfactorily perform a contract with the City of Raymond.

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

By signature below, I acknowledge that I have read and understand the requirements described in this application to the best of my knowledge. The information provided is a true representation of the named firm's ability to perform any contracts, which may result by submittal of this application.

\_\_\_\_\_  
**Name & Title of Preparer (typed/printed)**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date:**